Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

▶ Information about Form 990-PF and its separate instructions is at *www.irs.gov/form990pf*.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning , 2014, and ending , 20

Name of foundation: JOHN & CATHERINE SHULER CHARITABLE TRUST (23-37498)

A Employer identification number: 42-6076704

Number and street (or P O box number if mail is not delivered to street address): PO BOX 803878

Room/suite:

B Telephone number (see instructions):

City or town, state or province, country, and ZIP or foreign postal code: CHICAGO, IL 60680

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1 Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization: [X] Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶ $ 801,234.00

J Accounting method [X] Cash ☐ Accrual ☐ Other (specify) ____________ *(Part I, column (d) must be on cash basis)*

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*	**(a)** Revenue and expenses per books	**(b)** Net investment income	**(c)** Adjusted net income	**(d)** Disbursements for charitable purposes (cash basis only)
Revenue				
1 Contributions, gifts, grants, etc , received (attach schedule)				
2 Check ▶ ☐ if the foundation is **not** required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	23,507.00	23,507.00		
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	23,980.00			
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		23,980.00		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 **Total.** Add lines 1 through 11	47,487.00	47,487.00		
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)	650.00	650.00		
c Other professional fees (attach schedule)	4,600.00	4,600.00		
17 Interest				
18 Taxes (attach schedule) (see instructions)	1,008.00	1,008.00		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)				
24 **Total operating and administrative expenses.** Add lines 13 through 23	6,258.00	6,258.00		
25 Contributions, gifts, grants paid	41,400.00			41,400.00
26 **Total expenses and disbursements** Add lines 24 and 25	47,658.00	6,258.00		41,400.00
27 Subtract line 26 from line 12				
a **Excess of revenue over expenses and disbursements**	-171.00			
b **Net investment income** (if negative, enter -0-)		41,229.00		
c **Adjusted net income** (if negative, enter -0-)				

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Part II · **Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	10,528.00	47,962.00	47,962.00
	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 (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	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 (attach schedule)	330,919.00	292,788.00	434,004.00
	b Investments - corporate stock (attach schedule)	227,266.00	227,254.00	242,022.00
	c Investments - corporate bonds (attach schedule)			
	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments - mortgage loans	27,186.00	27,186.00	42,622.00
	13 Investments - other (attach schedule)			
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)	38,775.00	38,775.00	34,624.00
	16 **Total assets** (to be completed by all filers - see the instructions Also, see page 1, item I)	634,674.00	633,965.00	801,234.00
Liabilities	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 (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)			
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here** ▶ ☐ **and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, ▶ ☐ **check here and complete lines 27 through 31.**			
	27 Capital stock, trust principal, or current funds	634,674.00	633,965.00	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	634,674.00	633,965.00	
	31 **Total liabilities and net assets/fund balances** (see instructions)	634,674.00	633,965.00	

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 (must agree with end-of-year figure reported on prior year's return)	1	634,674.00
2	Enter amount from Part I, line 27a	2	-171.00
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	634,503.00
5	Decreases not included in line 2 (itemize) ▶ TIMING DIFFERENCES TAX/BOOK	5	538.00
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	633,965.00

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	LONG TERM GAIN DIVIDENDS			
b	LONG TERM GAINS (SEE ATTACHED)			
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	3,361.00			3,361.00
b	58,713.00		38,094.00	20,619.00
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				3,361.00
b				20,619.00
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	23,980.00
3	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) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? [ ] Yes [X] No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	39,000.00	781,049.00	0.0499
2012	36,602.00	750,640.00	0.0488
2011	40,500.00	739,854.00	0.0547
2010	32,178.00	706,983.00	0.0455
2009	37,622.00	657,630.00	0.0572

2	**Total** of line 1, column (d)	2	0.2561
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	0.0512
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	813,698.65
5	Multiply line 4 by line 3	5	41,661.37
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	412.29
7	Add lines 5 and 6	7	42,073.66
8	Enter qualifying distributions from Part XII, line 4	8	41,400.00

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 . . . Date of ruling or determination letter ______________ (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	825.00
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	825.00
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	825.00
6	Credits/Payments		
a	2014 estimated tax payments and 2013 overpayment credited to 2014 . . . . 6a		
b	Exempt foreign organizations - tax withheld at source 6b		
c	Tax paid with application for extension of time to file (Form 8868) 6c 1,000.00		
d	Backup withholding erroneously withheld 6d		
7	Total credits and payments Add lines 6a through 6d	7	1,000.00
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	175.00
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶ **Refunded** ▶	11	175.00

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		X
	*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*			
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 (1) On the foundation ▶ $ ________ (2) On foundation managers ▶ $ ________			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ ________			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, 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? *If "Yes," attach the statement required by General Instruction T*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • 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	X	
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 XV*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ ________			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If "No," attach explanation*	8b		X
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," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	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		X
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 ▶

14 The books are in care of ▶ THE NORTHERN TRUST COMPANY Telephone no ▶ 312-630-6000

Located at ▶ PO BOX 803878, CHICAGI, IL ZIP+4 ▶ 60680

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

			Yes	No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(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)? ☐ Yes ☒ No			
	(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) ☐ Yes ☒ No			
b	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 instructions)?	1b		
	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 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? ☐ Yes ☒ No			
	If "Yes," list the years ▶			
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 statement - see instructions)	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 ▶			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2014 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 2014)*	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 2014?	4b		X

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				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No			
	(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes ☒ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No			
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)?		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 expenditure responsibility for the grant?	☐ Yes ☐ No			
	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 a personal benefit contract?	☐ Yes ☒ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b		X
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No			
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GIVEN CHASE 14324 WEST THORNE LANE LAKEWOOD, WA 98498	TRUSTEE	0.00	0.00	0.00

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ NONE

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). 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 Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 ▶	

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4E1465 1 000

Part X **Minimum Investment Return** (All domestic foundations must complete this part Foreign foundations, see instructions)

1	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	801,205.00
b	Average of monthly cash balances	1b	24,885.00
c	Fair market value of all other assets (see instructions)	1c	
d	**Total** (add lines 1a, b, and c)	1d	826,090.00
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	826,090.00
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	12,391.35
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	813,698.65
6	**Minimum investment return.** Enter 5% of line 5	6	40,684.93

Part XI **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	40,684.93
2a	Tax on investment income for 2014 from Part VI, line 5	2a	825.00		
b	Income tax for 2014 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	825.00
3	Distributable amount before adjustments Subtract line 2c from line 1			3	39,859.93
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	39,859.93
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	39,859.93

Part XII **Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	41,400.00
b	Program-related investments - total from Part IX-B	1b	
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		
a	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	41,400.00
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 (see instructions)	5	
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	41,400.00

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				39,859.93
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only				
b Total for prior years 20____,20____,20____				
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f **Total** of lines 3a through e				
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ $ 41,400.00				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2014 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2014 *(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:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				39,859.93
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				

JSA
4E1480 1 000

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling . . . . ▶

b Check box to indicate whether the foundation is a private operating foundation described in section [ ] 4942(j)(3) or [ ] 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2a Enter the lesser of the adjusted net income from Part I or the minimum 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 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)(B)(i)					
b "Endowment" alternative test-enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "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					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year - see instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ▶ [ ] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

N/A

b The form in which applications should be submitted and information and materials they should include

N/A

c Any submission deadlines

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

N/A

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SEE ATTACHED				41,400.00
Total ▶ **3a**				41,400.00
b *Approved for future payment*				
Total ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	23,507.00	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	23,980.00	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				47,487.00	

13 **Total.** Add line 12, columns (b), (d), and (e) . . . 13 47,487.00

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
	N/A

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		X
(2) Other assets	1a(2)		X
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets	1b(3)		X
(4) Reimbursement arrangements	1b(4)		X
(5) Loans or loan guarantees	1b(5)		X
(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

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

Signature of officer or trustee — Date 8/12/15 — Title TRUSTEE

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
ALBERT C RAWSON III		08/10/15		P00219967

Firm's name ▶ ALBERT C RAWSON III, CPA — Firm's EIN ▶ 59-2118251

Firm's address ▶ 808-A NW 16TH AVENUE GAINESVILLE, FL 32601 — Phone no 352-375-6608

42-6076704

JOHN & CATHERINE SHULER CHARITABLE TRUST

Supplemental Schedules

2014

Page 1, Part 1 – Analysis of Revenues & Expenses

Line 16b-Accounting Fees

Tax Preparation Fee	$ 650

Line 16c – Other Professional Fees

Trustee Fees	$ 4,600

Line 18 – Taxes

Excise Tax	$ 515
Foreign Tax	493
	$ 1,008

Page 2, Part III – Analysis of Change in Fund Balance

Line 5 – Other Decreases

Timing Differences-Tax/Book	$ 538

Part VII – A – Statements Regarding Activities

Question 8(b) – No, because the Attorney General does not require a copy of the Foundation's 990-PF.

2014 Tax Information Statement

Payer's Name and Address:
THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

Account Number:	**23-37498**
Recipient's Tax ID Number:	**XX-XXX6704**
Payer's Federal ID Number:	**36-7158276**
Payer's State ID Number:	
State:	**FL**
Questions?	**(941)907-2113**
☐ **Corrected**	☐ **2nd TIN notice**

Recipient's Name and Address:
SHULER CHARITABLE TRUST J & C
C/O ALBERT C RAWSON III, CPA
808A NW 16TH AVENUE
GAINESVILLE, FL 32601-4012

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
Long Term Sales Reported on 1099-B										
0.5	#REORG WP GLIMCHER NAME CHANGE WP GLIMCHER INC 0002916AB1 01-16-2015									
939647103	05/29/2014	04/16/2012	D	9.52	8.70		0.00	0.82	0.00	0.00
75.0	ST JUDE MEDICAL INC									
790849103	06/18/2014	Various	D	4,965.42	3,215.96		0.00	1,749.46	0.00	0.00
7.0	#REORG WP GLIMCHER NAME CHANGE WP GLIMCHER INC 0002916AB1 01-16-2015									
939647103	12/04/2014	04/16/2012	D	119.20	121.84		0.00	-2.64	0.00	0.00
30.0	PARAGON OFFSHORE COMMON STOCK									
G6S01W108	12/04/2014	Various	D	90.89	414.20		0.00	-323.31	0.00	0.00
20.0	COSTCO WHSL CORP NEW									
22160K105	12/08/2014	02/03/2011	D	2,860.34	1,459.21		0.00	1,401.13	0.00	0.00
60.0	EMERSON ELECTRIC CO									
291011104	12/08/2014	Various	D	3,889.71	3,110.13		0.00	779.58	0.00	0.00
50.0	INTEL CORP									
458140100	12/08/2014	05/09/2012	D	1,872.45	1,361.48		0.00	510.97	0.00	0.00
45.0	QUALCOMM INC									
747525103	12/08/2014	Various	D	3,285.38	2,530.05		0.00	755.33	0.00	0.00

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2014 Tax Information Statement

Ref: NAZ

Payer's Name and Address:
THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

Account Number:	**23-37498**
Recipient's Tax ID Number:	**XX-XXX6704**
Payer's Federal ID Number:	**36-7158276**
Payer's State ID Number:	
State:	**FL**
Questions?	**(941)907-2113**
☐ **Corrected**	☐ **2nd TIN notice**

Recipient's Name and Address:
SHULER CHARITABLE TRUST J & C
C/O ALBERT C RAWSON III, CPA
808A NW 16TH AVENUE
GAINESVILLE, FL 32601-4012

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
Covered (Box 5 is not checked)

Description of property *(Box 1a)*

Cusip Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
15.0	SIMON PPTY GROUP INC NEW									
828806109	12/08/2014	04/16/2012	D	2,719.43	2,071.46		0.00	647.97	0.00	0.00
40.0	V F CORP									
918204108	12/08/2014	Various	D	2,947.13	1,072.77		0.00	1,874.36	0.00	0.00
90.0	NOBLE CORP PLC COMMON STOCK									
G65431101	12/08/2014	Various	D	1,435.47	2,949.18		0.00	-1,513.72	0.00	0.00
Total Long Term Sales Reported on 1099-B				**24,194.94**	**18,314.98**		**0.00**	**5,879.95**	**0.00**	**0.00**

Report on Form 8949, Part II, with Box D checked

TEP231159_80_3590 14 of 36

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2014 Tax Information Statement

Payer's Name and Address:
THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

Account Number: 23-37498
Recipient's Tax ID Number: XX-XXX6704
Payer's Federal ID Number: 36-7158276
Payer's State ID Number:
State: FL
Questions? (941)907-2113

☐ **Corrected** ☐ **2nd TIN notice**

Recipient's Name and Address:
SHULER CHARITABLE TRUST J & C
C/O ALBERT C RAWSON III, CPA
808A NW 16TH AVENUE
GAINESVILLE, FL 32601-4012

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.
For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.
Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property *(Box 1a)*

CUSIP Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
Long Term Sales Reported on 1099-B										
0.5	NOW INC COM									
67011P100	06/02/2014	11/26/2007	E	16.78	13.25		0.00	3.53	0.00	0.00
25.0	CITRIX SYS INC									
177376100	06/18/2014	12/28/2010	E	1,609.05	1,712.00		0.00	-102.95	0.00	0.00
12.0	NOW INC COM									
67011P100	06/18/2014	Various	E	405.69	239.56		0.00	166.13	0.00	0.00
135.0	US BANCORP DEL NEW									
902973304	07/23/2014	Various	E	5,725.22	4,410.02		0.00	1,315.20	0.00	0.00
5.0	#REORG WP GLIMCHER NAME CHANGE WP GLIMCHER INC 0002916AB1 01-16-2015									
939647103	12/04/2014	08/05/2010	E	85.15	55.32		0.00	29.83	0.00	0.00
25.0	CHEVRONTEXACO CORP									
166764100	12/08/2014	02/08/2007	E	2,747.69	1,843.94		0.00	903.75	0.00	0.00
5.0	COSTCO WHSL CORP NEW									
22160K105	12/08/2014	01/18/2008	E	715.08	325.28		0.00	389.80	0.00	0.00

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2014 Tax Information Statement

Ref: NAZ

Account Number: 23-37498
Recipient's Tax ID Number: XX-XXX6704
Payer's Federal ID Number: 36-7158276
Payer's State ID Number:
State: FL
Questions? (941)907-2113

☐ **Corrected** ☐ **2nd TIN notice**

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THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

Recipient's Name and Address:
SHULER CHARITABLE TRUST J & C
C/O ALBERT C RAWSON III, CPA
808A NW 16TH AVENUE
GAINESVILLE, FL 32601-4012

Reported to the IRS is proceeds less commissions and option premiums.
For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.
Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property *(Box 1a)*

CUSIP Number	Date Sold or Disposed *(Box 1c)*	Date Acquired *(Box 1b)*	Form 8949 Checkbox	Proceeds *(Box 1d)*	Cost or Other Basis *(Box 1e)*	Code if any *(Box 1f)*	Adjustments *(Box 1g)*	Net Gain or Loss	Federal Income Tax Withheld *(Box 4)*	State Tax Withheld *(Box 16)*
25.0	INTL BUSINESS MACHINES CORP									
459200101	12/08/2014	Various	E	4,081.41	3,011.89		0.00	1,069.52	0.00	0.00
75.0	OMNICOM GROUP									
681919106	12/08/2014	Various	E	5,870.87	3,500.43		0.00	2,370.44	0.00	0.00
10.0	SIMON PPTY GROUP INC NEW									
828806109	12/08/2014	08/05/2010	E	1,812.96	877.77		0.00	935.19	0.00	0.00
35.0	UNITED TECHNOLOGIES CORP									
913017109	12/08/2014	05/12/2004	E	3,926.21	1,448.12		0.00	2,478.09	0.00	0.00
75.0	UNITEDHEALTH GROUP INC									
91324P102	12/08/2014	12/15/2009	E	7,521.58	2,341.71		0.00	5,179.87	0.00	0.00
Total Long Term Sales Reported on 1099-B				**34,517.69**	**19,779.29**		**0.00**	**14,738.40**	**0.00**	**0.00**

Report on Form 8949, Part II, with Box E checked

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately responsible for the accuracy of their own tax return

2014 Tax Information Statement

SHULER CHARITABLE TRUST J & C

Account Number: 23-37498
Tax ID Number: XX-XXX6704
Ref: NAZ

Payments/Receipts Made on Behalf of SHULER CHARITABLE TRUST J & C

The following transactions from the account are presented to assist you in the preparation of your individual tax return. Transactions are shown under three general headings of, where applicable, Medical Expenses, Taxes Paid and Miscellaneous. They are intended to cover those items the account paid on your behalf during the tax year that you may want to consider for your individual tax return. We recommend that you check your statement of transactions for any corrections or additions.

Miscellaneous

Date	Description	Payments	Receipts
09/17/2014	Other Disbursements CHECK PAYMENT TO CHILD ADVOCACY CENTER, INC. 2014 GIFT FROM ALBERT AND CAROLYN	1,000.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO OREGON PUBLIC BROADCAST ING 2014 GIFT FROM WILLIAM M. RAWSON.	400.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO MARY BRIDGE CHILDREN'S FOUNDATION FOR THE AREA OF MOST NEED; 2014 GIFT	4,300.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO LAKEWOLD GARDENS FOR THE AREA OF MOST NEED; 2014 GIFT FROM GIVIN AND NANCY CHASE	1,900.00	

Important Tax Return Documents Enclosed

2014 Tax Information Statement

SHULER CHARITABLE TRUST J & C

Account Number: 23-37498
Tax ID Number: XX-XXX6704
Ref: NAZ

Date	Description	Payments	Receipts
12/18/2014	Other Disbursements CHECK PAYMENT TO FAUNA FOUNDATION FOR THE AREA OF MODT NEED; 2014 GIFT FROM GIVIN AND NANCY CHASE	1,700.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO SARASOTA MEMORIAL HEALT HCARE FOUNDATION 100% FOR PSYCHIATRIC CARE SERVICES; 2014	2,600.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO UNITED WAY OF CENTRAL M INNESOTA FOR THE AREA OF MOST NEED; 2014 GIFT	10,000.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO COURAGE KENNY FOUNDATIO N FOR THE AREA OF MOST NEED; 2014 GIFT	500.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO T.E.S.S.A 2014 GIFT FROM HOLLIS SHUMWAY	2,500.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO SUMMIT FOUNDATION 2014 GIFT FROM HOLLIS SHUMWAY	2,500.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO HUMANE SOCIETY OF PIKES PEAK REGION 2014 GIFT FROM HOLLIS SHUMWAY	1,000.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO CARE & SHARE FOOD BANK 2014 GIFT FROM HOLLIS SHUMWAY	1,000.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO PORTLAND ART MUSEUM 2014 GIFT FROM WILLIAM M. RAWSON.	1,250.00	

Important Tax Return Documents Enclosed

2014 Tax Information Statement

SHULER CHARITABLE TRUST J & C

Account Number: 23-37498
Tax ID Number: XX-XXX6704
Ref: NAZ

Date	Description	Payments	Receipts
12/18/2014	Other Disbursements CHECK PAYMENT TO OREGON FOOD BANK 2014 GIFT FROM WILLIAM M. RAWSON.	500.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO CONTEMPORARY ART COUNCI L 2014 GIFT FROM WILLIAM M. RAWSON.	500.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO OREGON HISTORICAL SOCIE TY 2014 GIFT FROM WILLIAM M. RAWSON.	900.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO THE OREGON STUDENT ASSI STANCE COMMISSION 2014 GIFT FROM WILLIAM M. RAWSON.	500.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO OUTREACH IN BURNSIDE 2014 GIFT FROM WILLIAM M. RAWSON. VOID	~~600.00~~ 0	
12/18/2014	Other Disbursements CHECK PAYMENT TO PORTLAND RESCUE MISSION 2014 GIFT FROM WILLIAM M. RAWSON.	600.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO RAPHAEL HOUSE OF PORTLA ND 2014 GIFT FROM WILLIAM M. RAWSON.	700.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO MACDONALD CENTER 2014 GIFT FROM WILLIAM M. RAWSON.	750.00	
12/18/2014	Other Disbursements CHECK PAYMENT TO LEVE 2014 GIFT FROM WILLIAM M. RAWSON.	300.00	
12/23/2014	Other Disbursements CHECK PAYMENT TO STOP CHILDREN'S CANCER 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	1,000.00	

Important Tax Return Documents Enclosed

2014 Tax Information Statement

Account Number: 23-37498
Tax ID Number: XX-XXX6704
Ref: NAZ

SHULER CHARITABLE TRUST J & C

Date	Description	Payments	Receipts
12/23/2014	Other Disbursements CHECK PAYMENT TO GAINESVILLE AREA COMMUN ITY TENNIS ASSOC 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	1,000.00	
12/23/2014	Other Disbursements CHECK PAYMENT TO CULVER MILITARY ACADEMY 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	500.00	
12/23/2014	Other Disbursements CHECK PAYMENT TO SALVATION ARMY 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	1,000.00	
12/23/2014	Other Disbursements CHECK PAYMENT TO BIG BROTHERS, BIG SISTE RS MID-FLORIDA 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	500.00	
12/23/2014	Other Disbursements CHECK PAYMENT TO FLORIDA SHERIFF'S YOUTH RANCHES 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	1,000.00	
12/23/2014	Other Disbursements CHECK PAYMENT TO FLORIDA UNITED METHODIS T CHILDREN'S HOME 2014 GIFT FROM ALBERT AND CAROLYN RAWSON	1,000.00	
		41,400.00	

Important Tax Return Documents Enclosed

Form **8868** (Rev January 2014) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at *www.irs.gov/form8868*.**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing *(e-file)*. You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only . . . . ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print		
File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions JOHN & CATHERINE SHULER CHARITABLE TRUST (23-37498)	Employer identification number (EIN) or 42-6076704
	Number, street, and room or suite no If a P O box, see instructions PO BOX 803878	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions CHICAGO,IL 60680	

Enter the Return code for the return that this application is for (file a separate application for each return) . . . . [0 4]

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ NORTHERN TRUST COMPANY

Telephone No ▶ 941-907-2113 FAX No ▶ 941-907-6024

- If the organization does not have an office or place of business in the United States, check this box . . . . ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ If this is for the whole group, check this box . . . . . . ▶ [ ] If it is for part of the group, check this box . . . . ▶ [ ] and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 20 15 , to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ [X] calendar year 20 14 or
▶ [ ] tax year beginning ____________, 20___, and ending ____________, 20___

2 If the tax year entered in line 1 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$ 1,000.00
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$
c	**Balance due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	$ 1,000.00

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions