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Form **990-P.F**

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

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OMB No. 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

2015, and ending For calendar year 2015, or tax year beginning Employer identification number 20-6834005 Robert E Schocker Charitable Trust Telephone number (see instructions) 2708 Walker Lane 801 277-7997 Salt Lake City, UT 84117 if exemption application is pending, check here Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year Accounting method X Cash (from Part II, column (c), line 16) Other (specify) F If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part | Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income income for charitable purposes (cash basis only) (see instructions)) Contributions, gifts, grants, etc, received (attach schedule) X if the foundation is not required to attach Sch B Ck ► Interest on savings and temporary cash investments Dividends and interest from securities 5 a Gross rents. b Net rental income or (loss) 74/% 80 6 a Net gain or (loss) from sale of assets not on line 10 v ĝ REVENUE * * **b** Gross sales price for all assets on line 6a ×, • Capital gain net income (from Part IV, line 2). ////S Net short-term capital gain 2000 Income modifications 22.40 A.S 10 a Gross sales less SCANNED APR O returns and allowances b Less Cost of C Gross profit or (loss) (attach schedule) Other income (attach schedule) 26 See Statement 1 Total. Add lines 1 through 11 26. 0 0 Compensation of officers, directors, trustees, etc 13 0 14 Other employee salaries and wages 15 Pension plans, employee benefits 4 2016 PHRAT-ZG 16 a Legal fees (attach schedule) **b** Accounting fees (attach sch) c Other prof fees (attach sch) 17 Interest 18 Taxes (attach schedule)(see instrs) Depreciation (attach 19 schedule) and depletion ١ 20 Occupancy 21 Travel, conferences, and meetings OGDEM 22 Printing and publications. 23 Other expenses (attach schedule) Total operating and administrative expenses Add lines 13 through 23 Stmt 2 Contributions, gifts, grants paid 4,188 4,188. 26 Total expenses and disbursements Add lines 24 and 25 0 4,188. 4,188 0 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements -4,162 0 **b** Net investment income (if negative, enter -0-) 0. C Adjusted net income (if negative, enter -0-)

Dark	- 11	Balance Sheets	Attached schedules and amounts in the description column should be for end of-year amounts only	Beginning of year		End o	f year	
Çarı		Dalance Sheets	(See instructions)	(a) Book Value	(b) Book Valu	ie	(c) Fa	aır Market Value
	1	Cash - non-interest	5					
	2	Savings and tempora	ary cash investments	85,191.	81,0	29.		
	3	Accounts receivable	-	<u> </u>			*	
		Less allowance for	doubtful accounts					
	4	Pledges receivable	•	♣ .o ,₹			~ +	
		Less allowance for	doubtful accounts >					
	5	Grants receivable						
	6	Receivables due from offic disqualified persons (atta	ers, directors, trustees, and other ch schedule) (see instructions)					
	7	Other notes and loans rec	ervable (attach sch)				<u>}`</u>	
A	İ	Less allowance for	doubtful accounts •					
Š	8	Inventories for sale	or use					
A S E T	9	Prepaid expenses a	nd deferred charges					
S	10 a	Investments – U S obligations (attach s	and state government chedule)					
	Ŀ	Investments — corporate	stock (attach schedule)					
	•	: Investments — corporate	bonds (attach schedule)					
	11	Investments – land, equipment basis	buildings, and	***		;* :	<u> </u>	2
		Less accumulated deprec (attach schedule)	ration •					
	12	Investments - morto	gage loans					
	13	Investments - other	(attach schedule)					
	14	Land, buildings, and	equipment basis >					
		Less accumulated deprec (attach schedule)	iation					
	15	Other assets (descri						
	16	see the instructions.	completed by all filers – Also, see page 1, item I)	85,191.	81,0)29.	an-/20	0.
Ļ	17		nd accrued expenses				. 7	
À	18	Grants payable					3/m 3/m	
В	19	Deferred revenue					304	
Ļ	20	,	tors, trustees, & other disqualified persons				* * * * * * * * * * * * * * * * * * *	
T	21		s payable (attach schedule)				6	٠ .
<u>i</u>	22	Other liabilities (des	cribe •)				\$	
E	23	Total liabilities (add	lines 17 through 22)	0.		0.	,	in."
		Foundations that fol	low SFAS 117, check here X4 through 26 and lines 30 and 31.					() () () () () ()
N F	24	Unrestricted		85,191.	81,0	029.	. ±th.	
E U T N	25	Temporarily restricted					. 5.62	
D	26	Permanently restrict					. 2006 2	*
A B S A L T A		Foundations that do and complete lines 2	not follow SFAS 117, check here. PL 27 through 31.]				
E L T A S N	27	Capital stock, trust p	orincipal, or current funds					* 1
SŅ	28	Paid-in or capital surplus	, or land, bldg , and equipment fund					
OE	29	Retained earnings, accum	ulated income, endowment, or other funds					, ,
ŔŠ	30		und balances (see instructions)	85,191.	81,0	29.		
	31	(see instructions)	net assets/fund balances	85,191.	81,(029.		
Par	t III	Analysis of Char	iges in Net Assets or Fund Balan	ces			1	
1	Total end-	l net assets or fund ba of-year figure reported	alances at beginning of year – Part II, colu d on prior year's return)	mn (a), line 30 (must agi	ee with	1		85,191.
		r amount from Part I,				2		-4,162.
3	Other	increases not included in li	ne 2 (Itemize)			3		
4	Add	lines 1, 2, and 3				4		81,029.
		ases not included in line 2 (=		5		
6	Tota	net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), lin	e 30	6	l	81,029.

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Part VI instructions

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Form	990-PF (2015) Robert E Schocker Charitable Trust 20-683	34005	Pa	ge 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instr	ructions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			ينفلا
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here ► and enter 1% of Part I, line 27b.		H.E	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	11.5211	2	XX
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only Others enter -0-)			0.
3	Add lines 1 and 2		_	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		. activities the	<u>0.</u>
6	Credits/Payments			
	2015 estimated tax pmts and 2014 overpayment credited to 2015			44
	Exempt foreign organizations — tax withheld at source 6 b			1
	: Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6 d	L	L	السط
7	Total credits and payments Add lines 6a through 6d			<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2016 estimated tax			
Par	t VII-A Statements Regarding Activities		31.7	
1 a	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?	1	Yes a	No_X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1	Ь	Х
	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.	∍d		
c	Did the foundation file Form 1120-POL for this year?	1	~~ "	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1 2	
	(1) On the foundation	<u> </u>		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
•	foundation managers	2		X
2	If 'Yes,' attach a detailed description of the activities	, 2	. 100	<u>~</u> -
	· · · · · · · · · · · · · · · · · · ·			* s
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
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		a	<u>X</u> _
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4	b N/	<u>A</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	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		16.1	
	By language in the governing instrument, or	ľ		[]
	 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? 	t	5	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	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			· 🔌
	N/A]	-	
t	of 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 ² If 'No,' attach explanation	<u> </u>	3 b X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942	()(5)	-	
	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Par	t XIV S	<u>, </u>	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name	s .		.,
-	and addresses		000 PE (2	<u>X</u>

Pai	rt VII-A Statements Regarding Activities (continued)	005		
<u>. u.</u> 11	the state of the s	1		_
	within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		<u>X</u>
	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? Website address. N/A	13	X	
14		-277-7	997	
•	Located at ► 2708 Walker Lane Salt Lake City UT ZIP+4 ► 84117	. =		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	· -	\prod
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2015, 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	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.		* *	1,8
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 1000	ld	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	3 7	Yes	No
1 a	a During the year did the foundation (either directly or indirectly).		V 8	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X N	o	, (1)	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X N	0		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes XN	0). 26	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes XN	0		
	(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 X N	o 3		; ;
	(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	0		********
				1
	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)?	1 b	N.	/A
	Organizations relying on a current notice regarding disaster assistance check here		27 - 37 A	,
(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 2015?	1 c		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))	2		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d		1	
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes X N	0		
	If 'Yes,' list the years ► 20 , 20 , 20 , 20 ,		Sep. 2	
-	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)	2 5	N	/ 7
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		111	
	► 20, 20, 20		2	
9			å y	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X N	lo ,	2	
	b If 'Yes,' did it have excess business holdings in 2015 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 2015)	3 t	N N	/ <u>A</u>
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	1	Х
	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			
BA/	the tax year beginning in 2015?	Form 9		X (2015)

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Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continue	d)	
5 a During the year did the foundation pay or incur			·		
(1) Carry on propaganda, or otherwise attemp			Yes	X No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	tion drive?		Yes	X No	
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	Yes	X No	
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc, org	anization described	Yes	X No	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children o	literary, or r animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	ne transactions fail to qua a current notice regardi	ialify under the exception ng disaster assistance	ons	_	5b N/A
Organizations relying on a current notice regar	ding disaster assistance	check here	•		
c If the answer is 'Yes' to question 5a(4), does that tax because it maintained expenditure response	he foundation claim exem libility for the grant?	mption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regu	ılatıons sectıon 53 4945-	5(d)			
6 a Did the foundation, during the year, receive an on a personal benefit contract?			Yes	XNo	
b Did the foundation, during the year, pay premi	ums, directly or indirectl	y, on a personal benefi	t contract?		6b X
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the found	ation a party to a probib	utad tay chalter transac	tion? Yes	X No	
b If 'Yes,' did the foundation receive any proceed				N/A	7 b
Part VIII: Information About Officers, Dire					
and Contractors	50(0)5, 1145(005, 10	anada on manago.	,	٠,٠٠٠	-,
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).	_	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions t employee bene- plans and deferr compensation	it `´c	Expense account, other allowances
Robert E Schocker	Trustee	0.			0.
2708 Walker Lane	0				
Salt Lake City, UT 84117					
Pattie Schocker Wright	Trustee	0.	(١.	0.
2708 Walker lane	0				
Salt Lake City, UT 84117					
					-
2 Compensation of five highest-paid employees	(other than those inclu	ded on line 1 — see ins	tructions). If 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 t employee bene plans and deferr compensation	fit of	Expense account, other allowances
None					
				_	
			1		
Total number of other employees paid over \$50,000)			•	0

Form 990-PF (2015) Robert E Schocker Charitable Trust	20-683400	
Part VIII Information About Officers, Directors, Trustees, Foundation Managand Contractors (continued)	ers, Highly Paid Employee	s,
3 Five highest-paid independent contractors for professional services (see instructions). If		
(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	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information su organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ch as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2	Amount
1		
<u>N/A</u>		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.
BAA	Fo	orm 990-PF (2015)

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

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

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4,188.

4.188.

4

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7		N. N.		0.
2 Undistributed income, if any, as of the end of 2015	· · · · · · · · · · · · · · · · · · ·			
a Enter amount for 2014 only			0.	
b Total for prior years 20, 20, 20		0.	-	
3 Excess distributions carryover, if any, to 2015	3	· .	× .	* %* `
a From 2010 14, 950.		***************************************		
b From 2011 22,525.		-		
c From 2012 37,550.	.	× ×	,	
d From 2013 7,500. e From 2014 26,139.	***		à 🍇	2,3
f Total of lines 3a through e	108,664.	,	*	
4 Qualifying distributions for 2015 from Part				
XII, line 4 > \$ 4,188.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4.	, · (
a Applied to 2014, but not more than line 2a	`		0.	* *
b Applied to undistributed income of prior years		****		***
(Election required — see instructions)		0.		
c Treated as distributions out of corpus				,
(Election required – see instructions)	0.	^		₩. +; ₩.
d Applied to 2015 distributable amount	** >		* ***	0.
e Remaining amount distributed out of corpus	4,188.		y 3*	
5 Excess distributions carryover applied to 2015	0.		Ä	0.
(If an amount appears in column (d), the same amount must be shown in column (a))		4,7		· ***
***)	* .
6 Enter the net total of each column as			*	
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	112,852.	***		
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed		0,	**	
income for which a notice of deficiency has			*	
been issued, or on which the section 4942(a) tax has been previously assessed		0.		*(%,
, •	` `\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0.	`	·
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from				×
line 2a Taxable amount — see instructions		*	0.	
		*	\$ 7.77	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2016				0.
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)	0.		· 	
8 Excess distributions carryover from 2010 not				
applied on line 5 or line 7 (see instructions)	14,950.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	07 000			
Subtract lines 7 and 8 from line ba 10 Analysis of line 9	97,902.			
a Excess from 2011 22, 525.				
b Excess from 2012 37, 550.				
c Excess from 2013 7,500.				
d Excess from 2014 26,139.				
e Excess from 2015 4, 188.				
4, 100.	L	1	<u></u>	Form 990-PE (2015)

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Part XIV Private Operating Foundate	tions (see instr	uctions and Par	t VII-A, questio	n 9)	N/A
1 a If the foundation has received a ruling or d is effective for 2015, enter the date of the r	uling				T-22-21-25
b Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b 85% of line 2a					
 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)(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					
Pårt XV Supplementary Information assets at any time during the	ie year – see ii	s part only if the nstructions.)	e foundation ha	ad \$5,000 or more	e in
1 Information Regarding Foundation Manag a List any managers of the foundation who h close of any tax year (but only if they have	ave contributed mo	ore than 2% of the to than \$5,000) (See s	otal contributions re section 507(d)(2))	ceived by the founda	tion before the
None					
b List any managers of the foundation who ca partnership or other entity) of which the None	own 10% or more o foundation has a 10	f the stock of a corp 0% or greater intere	oration (or an equa st	lly large portion of the	e ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only n requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions s gifts, grants, etc	to preselected char (see instructions) to	ritable organizations individuals or orga	nizations under other	t unsolicited conditions,
a The name, address, and telephone number	er or e-mail address	s of the person to wi	nom applications si	iodia de addressed	
b The form in which applications should be s	submitted and infor	mation and material	s they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charital	ole fields, kinds of i	nstitutions, or other fa	actors
.,	, , , , , , , ,	,		•	

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3 Grants and Contributions Paid During the Yea	ar or Approved for Futui	re Payment	=	
Recipient	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
Name and address (home or business)	substantial contributor	recipient	CONTINUENT	
a Paid during the year	Substantial Contributor			
Total		,	► 3a	
b Approved for future payment Total			▶ 3 b	
I OTAI			- 3b	'

Page **12**

D***	VIII.A	A	. ()	Dun de calman	A -41, .141
ran	XVI-A	Analysis	of income	-Producing	Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by s	ection 512, 513, or 514	(e) Related or exempt function income (See instructions)	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
a						
b						
c						
d					·	
e					-	
f			<u> </u>			
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						
5 Net rental income or (loss) from real estate	***	žija Š	30 · 3			
a Debt-financed property						
b Not debt-financed property			ļ			
6 Net rental income or (loss) from personal property						
7 Other investment income				26.		
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue	k 🦠		,X · / Ma	X	₹ \$:	
a					··	
b						
c						
d						
e						
12 Subtotal Add columns (b), (d), and (e)	\$9f#A		` *	26.		
13 Total. Add line 12, columns (b), (d), and (e)				13	26.	
See worksheet in line 13 instructions to verify calculated	ations)					

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	
	

Form 990-PF (2015) Robert E Schocker Charitable Trust 20-683400

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

	Exempt Organi	Zalions								
describe relating for a Transfer (1) Cash (2) Other tra (1) Sale (2) Puro (3) Rent (4) Rein (5) Loar (6) Perf c Sharing d If the an the good	er assets	of the Code (other tons? g foundation to a charitable exemum a noncharitable pment, or other accements es or membership ment, mailing lists above is 'Yes,' co services given b	er than section 5 noncharitable ex not organization le exempt organi assets or fundraising s s, other assets, o	01(c)(3) organization ization olicitations or paid employee wing schedule (coundation if the	s Column (b) s foundation	should alway	rs show the s than fair r	fair marke	Yes I a (1) I a (2) I b (1) I b (2) I b (3) I b (4) I b (5) I b (6) I c et value of ue in	X X X X X X X X X X X X X X X X X X X
	(b) Amount involved		noncharitable exemp	——		ription of trans			no arrangeme	ente
(a) Line no	(b) Amount involved	(C) Name of	HOHCHAIHTADIE EXEMP	it organization	(u) Desc	atpuon or crans	- uansacii	ins, and shar		-
N/A		<u> </u>								
									_	
						-				
	_ ,									
		1								
_		 	*****							
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		 -	· -							
										
describe	undation directly or ed in section 501(c) complete the follow	of the Code (oth	ed with, or relate er than section 5	ed to, one or mo 501(c)(3)) or ın s	re tax-exem ection 527?	ipt organizat	ions		Yes [ΧΝο
	Name of organization		(b) Type	of organization	<u>T-</u>	(c)	Description	of relatio	nship	
<u></u>	, or garnzur		(3) . , po	9					'	
N/ A						_				
	· ··									
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T., .	. H f				and statements	and to the heat.	of my knowlodge	and bolinf it	is to io	
Under p correct,	enalties of perjury, I dectare and complete Declaration	e that I have examined to on of preparer (other t	this return, including ac han taxpayer) is base	companying scriedules d on all information o	and statements f which prepare	, and to the best of er has any know	ledge	e and bener, it	is true,	
Sign	\bigcap I	O						Γ	May the IRS of	liscuss
Here	11-907 D	zhalul	. 1	3-22-16	, ▶ _{Trii}	stee			preparer show	vn below
Sinna	ature of officer or trustee		`	Date	Title	5000			(see instruction X Yes	
Oigna	Print/Type preparer's n	name	Preparer's s	· · · · · · · · · · · · · · · · · · ·	Da	te , 4		l l Pi	IN Tes	INO
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Paid	William R.			m R. Denne	y ->	110110	self-emplo		0042497	1
Preparer			radshaw PL				Firm's EIN	<u>45-553</u>	3242	
Jse Only			merce Dr.							
•			City, UT 8				Phone no	(801)	281-470	00
300							_		orm 990-P	

2015	Federal Statements	Page 1
· 	Robert E Schocker Charitable Trust	20-6834005
Statement 1 Form 990-PF, Part I, Line 11 Other Income	(a) (b) Net	(c)
Other Investment Income	Revenue Investment Income \$ 26. Total \$ 26. \$ 0.	Adjusted <u>Net Income</u>
Statement 2 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants		
Cash Grants and Allocations		
Donee's Name: Amount Given:	Teacher Appreciation Awards	\$ 300.
Donee's Name: Amount Given:	Utah Food Bank	650.
Donee's Name: Amount Given:	Salvation Army	100.
Donee's Name: Amount Given:	Doctors Without Borders	400.
Donee's Name: Amount Given:	Alzheimers	200.
Donee's Name: Amount Given:	Macular Degeneration	83.
Donee's Name: Amount Given:	National Parks	25.
Donee's Name: Amount Given:	Shriners hospital	1,000.
Donee's Name: Amount Given:	Primary childrens	1,000.
Donee's Name: Amount Given:	Muscular Dystrophy	200.
Donee's Name: Amount Given:	Salt Lake Firefighters	75.
Donee's Name: Amount Given:	Special Olympics	100.
Donee's Name: Amount Given:	Red Cross	55.
	Total	1 \$ 4,188.

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