

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

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

2007

Department of the Treasury Internal Revenue Service

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

Fo	r cal	endar	year 2007, or t	ax year beginni	ng			2007,	, and endi	ng					
G	Che	ck all	that apply.	Initial return	Fin	al retu	rn Ame	nded	return	F		s change		me change	
	Use th		CHMIDT FA	MILY STAR	FOUNI	DATIC	N				A	Employer identific		mber	
	RS lab therwi	el. D	.O. BOX 9								 	20-85535		_ _	
U	print		OUTH JORD	AN, UT 840	95						В	Telephone numbe	•	•	
	or typ											(801) 56			
	e Spec structi										C			pending, check h	ere 🔣 📙
				lylca.	t 50	17-1721		-1-1			⊣"	1 Foreign organizat			abaak
Н	Cr C		pe of organiza	nonexempt cha			exempt priv					2 Foreign organizat here and attach or			UTIECK ☐
$\overline{}$	Fa		et value of all asset				g method			Accrua		If private foundat			. —
•			ll, column (c), line			Other (s		MO	الــا	Acciua		under section 507			▶ ∐
	► Ś			, 384.	(Part I		nn (d) must l	he on	cash bas	ıs)	- F	under section 507)-month terminatio), check here	″ - □
Pa	art Î	An	alysis of Re		11, 6,1,							T		i	
تت		Ex	penses (The	total of amount	s ın	Lexpe	Revenue an		(b) Net	ınvestr come	nent	(c) Adjusted income	net	(d) Disburse for charit	
		coli	ımns (b), (c), a	and (d) may not	neces-	0,,,,,,				•••••				purpos	ses
			ny equal trie ar. e the instruction	nounts in colum ns))	n (a)									(cash basi	s only)
				grants, etc, received	(att sch)		10,00	00.		٠,	-	<u> </u>	13 5	• , •	
	l			oundn is not req to a				* ,		<u>.</u>		رة بن الأسلى الله الإسلى الله الإسلى الله الإسلى الله الإسلى الله الله الله الله الله الله الله ال	, ,	. 3	
		3	nterest on sav	ings and tempo	rary									4 13 6 14 15	121
	ĺ		cash investmer	rest from securities		-		_	_						<u>. F. y.</u>
			Gross rents	rest from securities				\dashv				<u> </u>		7 7 7 2	
		bı	Net rental income or (loss)				,	·		1.		, ., .			7
	_	_		sale of assets not or	n line 10	†				٠,	,	**!		E	** • • •
	R E		Gross sales price to assets on line 6a	r all					. '		', '	1 . 7 1/4/	·	1 34 5 10	. " },
	E V			ome (from Part IV, III	ne 2)	ت	agangladas ar sa					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	- , - '	24 93	1. 香油
	E N		Net short-term			<u> </u>	HEGE	YE		1	•				<u> </u>
	υl	-	ncome modific	ations		1	(101	·	<u>· · ·.</u>	- 20 2 2 2 2 2 2			1 1
	E	ſ	Gross sales less eturns and			Z	MUNIT 4	2	318 0						1
			allowances				NOV 1	5 6	110 (Q)	ات ا	* **			1 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	***
	Ì		ess Cost of goods sold			L			ع لب		Destern		£3 + 4 ×	11 1 2 2	
7010		c (Gross profit/(loss)	(att sch)		i	OGUE	¥, (11		- ,				2
7		11 (Other income (attach schedule)	_								1	
Ð	- 1	_				<u> </u>								3	AL -
-			Total. Add line			<u> </u>	10,00				<u>0.</u>		0.	,*	الي يا في
>			Compensation of off Other employee sal	ficers, directors, trust	ees, etc.	}		0.				 			
=]			iaries and wages employee bene	fite										
			Legal fees (attach :		ST 1	-	1,58	R 1		1	581.	 -		-	
	Â		Accounting fees (at		J1 1		1,50		_	Ξ,	501 .				
	M.		Other prof fees (at	•								 			
O P	N		Interest	,											
E	S T R	18	Taxes (attach sche	dule)											
Ã	Ä		Depreciation (a										•	7 , 3	
į			sch) and deple	tion		<u> </u>						 			
N G	Ĕ		Occupancy Travel confere	nces, and meet	inas				_			 			
A	Е		Printing and pu		gs										
N D	P			s (attach sched	ıle)				•						
	E N	_		SEE STATEM	ENT 2			35.			35.				
	S E	24	Total operating	g and administr	ative		1 (ا ء ا		1	C1 C				
	S		expenses. Add Contributions, gifts	Thes 13 through	n 23	<u> </u>	1,6	10.		Ι,	616.	 		 	
				, grants part s and disburser	nentc						•	 		 	
		20	Add lines 24 ai	nd 25	nents.		1,6	16.		1,	616.		0.		0.
		27	Subtract line 2	6 from line 12:							-	3 - 3 - 1			,
		a	Excess of reve and disbursem	enue over exper	ises	1	8,38	84	,	+	-	\ · · · · · · · · · · · · · · · · · ·	-	1 3.2	t
				ome (if negative, enti	۰r .۸.۱	 	0,30	U -I .	L		0.	 			
				ne (if negative, enter	-						. .	`	0.	`	
			,												

20-8553555

End of year

Page 2

Form 990-PF (2007) SCHMIDT FAMILY STAR FOUNDATION

,Par		osses for Tax on Investment the kind(s) of property sold (e.g., rise, or common stock, 200 shares MI		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month day year)	(d) Date sold (month day year)
1 a	N/A					
b						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa		(h) Gain or (e) plus (f) m	
a	· -					
b						
e						
	Complete only for assets show (i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned b (j) Adjusted basis as of 12/31/69	y the foundation on 12/31/6 (k) Excess of columnover column (j), if a	n (i)	(I) Gains (Coli gain minus column (I nan O-) or Losses (fi	(), but not less
a						
						
e						
	Capital gain net income or (net	capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	. 2		
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	_	<u> </u>	<u> </u>	
•		e 8, column (c) (see the instructions		- 3		
Par		Section 4940(e) for Reduce	d Tax on Net Investme			
If sec	ction 4940(d)(2) applies, leave the foundation liable for the sec	tion 4942 tax on the distributable ar	nount of any year in the ba		N/A	□ No
		lify under section 4940(e) Do not co	· ·		 	
_1	(a) Base period years Calendar year (or tax year beginning in)	n each column for each year, see the (b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distribution lumn (b) divided	
	2006					
	2005				_	
	2004	1				
	2003					
	2002					
	Total of line 1, column (d)			2		
3	Average distribution ratio for the number of years the foundation	ne 5-year base period – divide the to n has been in existence if less than	otal on line 2 by 5, or by the 5 years	3		
4	Enter the net value of nonchar	itable-use assets for 2007 from Part	X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment inc			6		
		come (1% of Part I, line 27b).			 	
7	Add lines 5 and 6	come (1% of Part I, line 27b)		7		
7	Enter qualifying distributions fr			8		

	990-PF (2007) SCHMIDT FAMILY STAR FOUNDATION 20-8553555		F	age 4
Par	t VI 🔆 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instru	ctions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here	, ,		
	Date of ruling letter (attach copy of ruling letter if necessary – see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here ► and enter 1% of Part I, line 27b	4, 5	- 40.	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
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-			0.
6	Credits/Payments		٠,٠	-
а	2007 estimated tax pmts and 2006 overpayment credited to 2007			
b	Exempt foreign organizations — tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c	,		
	Backup withholding erroneously withheld	,'	٠,٠	
	Total credits and payments Add lines 6a through 6d 7	•••		0.
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	_		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 2008 estimated tax			
	*VII-A Statements Regarding Activities		_	
		Tr.	Yes	No
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?	1a	163	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1ь		x
	If the answer is 'Yes' to <i>1a</i> or <i>1b</i> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1 () () () () () () () ()	7.7	
_	Did the foundation file Form 1120-POL for this year?	1 c	"	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1		<u> </u>
	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$	12.5	1	1.
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	77	* * *	1
	foundation managers \$ 0.	:\		
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		` ~ <u>.</u> .	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		-(-\frac{1}{2}	
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		<u>X</u> _
4 a	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	N	/A
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.			1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			'
	By language in the governing instrument, or	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		ı	\ `
	with the state law remain in the governing instrument?	6	Х	}
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)			Ī.,
	UT		١.	
b	off 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 <i>General Instruction G? If 'No,' attach explanation</i>	8ь	<u> X</u>	<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 catendar year 2007 or the taxable year beginning in 2007 (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 SEE STATEMENT 3	10	X	
BAA		orm 99		(2007)

Part VII-A Statements Regarding Activities Continued			
11 a 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 a		<u>x</u> _
b If 'Yes', did the foundation have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, an annuities described in the attachment for line 11a?	11 6	N	′A
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract?	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	 -
Website address ► N/A	L. <u></u>		
14 The books are in care of ► DAVID H. SCHMIDT Telephone no ► (801)	562	141	<u>-</u>
Located at ► P.O. BOX 95410 SOUTH JORDAN UT ZIP + 4 ► 84095			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	$-\overline{N}/\overline{A}$		
and enter the amount of tax-exempt interest received or accrued during the year	,		N/A
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	$\overline{\cdot}$	Yes	No
1a During the year did the foundation (either directly or indirectly)			1 .
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	; ', '		: .
	1.7	"	1.1
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	-^	4	<u>.</u>
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	.	΄,	٠,
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			·, ·
	1. 1	* * *	, , ,
(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 No	-	. "	
To the benefit of ase of a disquamed persony		1,-4	, -
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the	1 1	-, 5	•
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)	-	٦	
	7-	22.00	
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 the instructions)?	16	N	/Ã
Organizations relying on a current notice regarding disaster assistance check here		1	 -
	14 ×	.	
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 2007?	1 c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a	1 12 1		
private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	ST:	. " "	- 4 5-
a At the end of tax year 2007, did the foundation have any undistributed income (lines 6d	,	. ~	· · ·
and 6e, Part XIII) for tax year(s) beginning before 2007? Yes X No	';		(1 en (4 c
If 'Yes,' list the years ► 20, 20, 20, 20		-	₹ '
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	,	İ	,-
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		NI	/ T
all years listed, answer 'No' and attach statement — see the instructions)	2b	N	<u> </u>
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	•	`	
► 20 , 20 , 20		:	
3a Did the foundation hold more than a 2% direct or indirect interest in any business	[· `· ./		·
enterprise at any time during the year? Yes X No	·	.	•
b If 'Yes,' did it have excess business holdings in 2007 as a result of (1) any purchase by the foundation	,	-	
by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by diff or beguest, or		. [
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 2007.)	!	- ~	/ Ti
determine it the toundation had excess business holdings in 2007.)	3ь	N	<u> </u>
4a Did the foundation invest during the year any amount in a manner that would jeopardize its		ł	v
charitable purposes?	4 a		<u>X</u>
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could	1.	ε	-
jeopardize its charitable purpose that had not been removed from jeopardy before the first day of		ļ	v
the tax year beginning in 2007?	4b	D DE 4	X 2007)
500 F1	11 III 399'	v-rr (.	/111/1

BAA

Part VII-B Statements Regarding Activiti	es for Which Form	14720 May Be Requ	uired (contınued)				
5a During the year did the foundation pay or incui (1) Carry on propaganda, or otherwise attemp		n (section 4945(e))?	Yes 🛚	No No			
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section tion drive?	4955), or to carry	Yes X				
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	an a charitable, etc, or 4940(d)(2)? (see instru	ganization described uctions)	Yes	No Profit			
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes [X	No A			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to d a current notice regard	qualify under the except ding disaster assistance	ions _	5b N/A			
Organizations relying on a current notice regains	ding disaster assistanc	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	sibility for the grant?		N/A Yes	□ No			
If 'Yes,' attach the statement required by Regu		• •		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
6a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes ⊉	K No 66 X			
b Did the foundation, during the year, pay premi If you answered 'Yes' to 6b, also file Form 887		tiy, on a personal benef	it contract?	60 ^			
7a At any time during the tax year, was the found	ation a party to a prohi			K No			
b If yes, did the foundation receive any proceeds Part VIII Information About Officers, Di	or have any net incom	ne attributable to the tra	nsaction?	7b N/A			
and Contractors	rectors, trustees,						
1 List all officers, directors, trustees, foundatio		·		T.::=			
(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	other allowances			
DAVID H. SCHMIDT	BOARD CHAIRM	0.	0.	0.			
P.O. BOX 95410	0						
SOUTH JORDAN, UT 84095 DONNA A SCHMIDT	PRESIDENT	0.	0.	0.			
P.O. BOX 95410	0	0.	0.	1			
SOUTH JORDAN, UT 84095							
MONIKA SCHMIDT	EXECUTIVE DI	0.	0.	0.			
P.O. BOX 95410	0						
SOUTH JORDAN, UT 84095							
2 Compensation of five highest-paid employee	s (other than those inc	l cluded on line 1 – see in	structions). If none.	enter 'NONE.'			
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,			
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred compensation	other allowances			
NONE	-		Compensation				
Total number of other employees paid over \$50,000) .			0			
BAA	TEEA0306L	02/20/08		Form 990-PF (2007)			

20-8553555 Form 990-PF (2007) SCHMIDT FAMILY STAR FOUNDATION 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 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

Form 990-PF (2007)

All other program-related investments. See instructions

Total. Add lines 1 through 3

BAA

Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign fo	undations,
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	
b Average of monthly cash balances	1 b	9,021.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	9,021.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1e 0.]	
2 Acquisition indebtedness applicable to line 1 assets.	2	0.
3 Subtract line 2 from line 1d	3	9,021.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	135.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,886.
6 Minimum investment return. Enter 5% of line 5	6	444.
Part XI ² Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► and do not complete this part of the part XI ² Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► and do not complete this part of the part XI ² Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► and do not complete this part of the part XI ² Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► and do not complete this part of the part of t	rating fou art.)	ındatıons
1 Minimum investment return from Part X, line 6	1	444.
2a Tax on investment income for 2007 from Part VI, line 5 . 2a		
b Income tax for 2007 (This does not include the tax from Part VI) 2b	i .	
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	444.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	444.
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	444.
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	
b Program-related investments — total from Part IX-B	1Ь	
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)	~	
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
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	0.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe qualifies for the section 4940(e) reduction of tax in those years	ther the fo	undation

BAA

Form **990-PF** (2007)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2006	(c) 2006	(d) 2007
1 Distributable amount for 2007 from Part XI, line 7		in the second		444.
2 Undistributed income, if any, as of the end of 2006				-
a Enter amount for 2006 only		,	0.	
b Total for prior years 20, 20, 20	, ,	0.	-	
3 Excess distributions carryover, if any, to 2007	,,,			ر در معر میرود سام
a From 2002	,	· •	, , , ,	
b From 2003		,		- 4, , , ,
c From 2004	المراجع	•	, , , , , ,	
d From 2005				,
e From 2006		, ,		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2007 from Part			· Ł	
XII, line 4 ► \$	'		,	
a Applied to 2006, but not more than line 2a	-		0.	,
 b Applied to undistributed income of prior years (Election required — see instructions) 	. , , , ,	0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.			÷
d Applied to 2007 distributable amount.		• .		0.
e Remaining amount distributed out of corpus	0.	11 15 15 1 1 1 1	SUPPLY THE FORE	\.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
5 Excess distributions carryover applied to 2007	0.	3	增型。"1945年 "。23	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	1. 金牌			The state of the s
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	0.			·
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-	,			
ed income for which a notice of deficiency	÷,		5, 7,	
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount – see instructions		0.	. ,	. ,
	*	·		, ,
e Undistributed income for 2006. Subtract line 4a from line 2a. Taxable amount — see instructions	7		0.	`
f Undistributed income for 2007 Subtract lines		su .	7-	
4d and 5 from line 1 This amount must be distributed in 2008	1 - 2 - 2 - 2			444.
7 Amounts treated as distributions out of				`
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.		i	., ·
,		, -,		,
8 Excess distributions carryover from 2002 not applied on line 5 or line 7 (see instructions)	0.	-		,
9 Excess distributions carryover to 2008. Subtract lines 7 and 8 from line 6a	0.			****
10 Analysis of line 9		• • •	-	
a Excess from 2003		· ·		
b Excess from 2004 .	,		,	
c Excess from 2005		_	- 3	
d Excess from 2006				
e Excess from 2007	<u> </u>		<u> </u>	5 000 PF (2007)

Form 990-PF (2007) SCHMIDT FAMILY ST			/II A guartian (20-8553555	Page 10 N/A
Part XIV Private Operating Foundation 1 a If the foundation has received a ruling or compared to the foundation of the foundation has received a ruling or compared to the foundation of the fo	letermination letter				N/A
is effective for 2007, enter the date of the	ruling			4942(j)(3) or	4942(j)(5)
b Check box to indicate whether the foundat 2a Enter the lesser of the adjusted net	Tax year	rating loundation de	Prior 3 years	14342()(3) 01	1 4342()(3)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
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					
 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·					
 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.		<u> </u>		L	
Part XV Supplementary Information assets at any time during th			organization ha	d \$5,000 or mor	e in
1 Information Regarding Foundation Management		3114011011317	 		
a List any managers of the foundation who have close of any tax year (but only if they have DAVID H. SCHMIDT	nave contributed mo	ore than 2% of the t than \$5,000) (See	otal contributions re section 507(d)(2))	eceived by the found	lation before the
b List any managers of the foundation who can partnership or other entity) of which the NONE	own 10% or more o foundation has a 1	f the stock of a corp 0% or greater intere	ooration (or an equa est	ally large portion of t	he 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 chai (see instructions) to	ritable organizations o individuals or orga	anizations under oth	pt unsolicited er conditions,
a The name, address, and telephone numbe	er of the person to v	vhom applications s	should be addressed	I	
b The form in which applications should be	submitted and infor	mation and materia	ls they should inclu	de·	
c Any submission deadlines:				-	
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors
RAA	тс	FA03101 07/31/07	 		Form 990-PF (2007)

Page 11

Part XV: Supplementary Information (continued) N/A 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year 3a Total **b** Approved for future payment 3 b Total

Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2007)

nter gross	amounts unless otherwise indicated	Unrelate	ed business income	Excluded by	section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exemptounction income
	m service revenue			code		(see the instruction
a h		-	· · · · · · · · · · · · · · · · · · ·			!
		1				
		†				
f						
a Fees a	nd contracts from government agencies					
_	ership dues and assessments					
Interest	on savings and temporary cash investments					
	nds and interest from securities					
Net rer	ntal income or (loss) from real estate:			,	. 41	
	nanced property					
	bt-financed property					
	al income or (loss) from personal property					
	investment income					
	(loss) from sales of assets other than inventory					
-	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue.					
-						
					····	
e		<u> </u>				
е		- 4 .		- ,		
e 2 Subtota	al Add columns (b), (d), and (e)	- 3 1		- ,	13	
Subtotal.		· · · · · · · · · · · · · · · · · · ·		- ,	13	
Subtotal Action of the Worksh	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. rt XVI-E	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c	alculations)	···		es	
Subtota Total. // e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. // e worksh rt XVI-E	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. // e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. / e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. // e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. // e worksh rt XVI-E ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. rt XVI-E	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtotal Action of the Worksh	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. rt XVI-E	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. rt XVI-E	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	
Subtota Total. We worksh int XVI-E	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) eet in the instructions for line 13 to verify c Relationship of Activities to the	alculations)	···		es	tly to the the instructions)

0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							-
Part XVII	Information Regarding Exempt Organizations	Transfers To and	Transactions and	d Relationships	With Nonch	aritable	
						-	

_								: 1,	V	Ala.
1	descri	ie organization directibed in section 501(d ing to political organi	c) of the Code (o	ngage in any of the follo ther than section 501(c)(wing with ar 3) organizat	ny other organization ions) or in section	on 527,		Yes	No ;
	a Trans	fers from the reporti	ng foundation to	a noncharitable exempt	organization	n of			``	
	(1) Ca	ash						1a(1)		<u>X</u>
(2) Other assets								1a (2)		X
	b Other	transactions						3.5	-	. ~
	(1) S	ales of assets to a n	oncharitable exe	mpt organization				1 b (1)		_X
	(2) Pi	urchases of assets f	rom a noncharita	able exempt organization				1b (2)		<u>X</u>
	(3) R	ental of facilities, eq	uipment, or othe	r assets				1 b (3)		<u>X</u>
	(4) R	eimbursement arran	gements					1 b (4)		X
	(5) Lo	oans or loan guarant	tees	,				1 b (5)		X
	(6) P	erformance of service	es or membersh	ip or fundraising solicitat	ions			1 b (6)		<u>X</u>
	c Sharır	ng of facilities, equip	ment, mailing lis	sts, other assets, or paid	employees			1 c		<u>X</u>
	1.16.41.		b IV !	complete the following s	abadula Ca	luma (h) should al	wave chow the fair r	market valu	a of	
	the oc	nods other assets o	r services diven	by the reporting foundat how in column (d) the va	ion. If the fo	undation received	less than fair marke	t value in	. 01	
_ (a) Line no	(b) Amount involved		of noncharitable exempt organiz			ensfers, transactions, and		ements	
_	/A	(b) / modile mitored	(5)			<u> </u>				
/										
_										
					Ü					
_										
2	descri	ibed in section 501(c) of the Code (o	ated with, or related to, ther than section 501(c)	one or more (3)) or in sec	tax-exempt organ ction 527?	ızatıons	Yes	X	No
_		s,' complete the follo (a) Name of organiz		(b) Type of orga	nization		(c) Description of rel	ationship		
N	/A	(a) Harrie or organiz		(S) Type of orge			(-) = 000phon 0101			
_										
Ī	Under pena	alties of perjury, I declare t	hat I have examined the than taxpayer or fire	his return, including accompanyir duciary) is based on all informati	ng schedules and on of which prep	d statements, and to the parer has any knowledge	best of my knowledge and	belief, it is true	, corre	t, and
l		·)	2/ 0				$\langle \cdot \rangle$	201		
.	>	Low	H.A.	mel		111.12.10		Mund	eg,	ر مہ
	Sign	ature of officer or trustee	7,5,7,00	1		Date	Title		V	T
۱ţ						Date	10	parer's SSN or F		re)
!	Paid	Preparer's signature	In XI	nove CPA	7	NOV 1 1 2010	lsell. —l`	0072480		,
1	Pre- parer's	Firm's name (or HA	NSEN, BRADS	SHAW, MALMROSE &	FRICKS	ON PC	EIN ► 87-03			
	Use	yours if self-		SOUTH	. 2.12 (113)	O.T., L.O.	57 03	<u></u>		
	Only			Γ 84010			Phone no ► (80	01) 296-	-020	0
31 31	AA	120 code 20					(0)	Form 990		

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2007

Name of organization		Employer identification flamber
SCHMIDT FAMILY STAR FOUN	DATION	20-8553555
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizat	tion
	4947(a)(1) nonexempt charitable trust n	ot treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tr	eated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the boxes for both the General Rule and a	General Rule or a Special Rule (Note: Only a section 501(c, Special Rule — see instructions))(7), (8), or (10) organization can check
General Rule – X For organizations filing Form 990, 9 contributor (Complete Parts I and I	990-EZ, or 990-PF that received, during the year, 5.0	000 or more (in money or property) from any one
Special Rules –		
For a section 501(c)(3) organization 509(a)(1)/170(b)(1)(A)(vi) and rece amount on line 1 of these forms (C	n filing Form 990, or Form 990-EZ, that met the 33-1/ived from any one contributor, during the year, a cont Complete Parts I and II)	3% support test of the regulations under sections tribution of the greater of \$5,000 or 2% of the
aggregate contributions or bequests	organization filing Form 990, or Form 990-EZ, that resolved than \$1,000 for use exclusively for religious lty to children or animals (Complete Parts I, II, and I	s, charitable, scientific, literary, or educational
some contributions for use exclusive \$1,000 (If this box is checked, enter	organization filing Form 990, or Form 990-EZ, that revely for religious, charitable, etc, purposes, but these er here the total contributions that were received during the Parts unless the General Rule applies to this c	contributions did not aggregate to more than ng the year for an exclusively religious, charitable,
religious, charitable, etc, contribution	ons of \$5,000 or more during the year)	* \$
990-PF) but they must check the box ii	vered by the General Rule and/or the Special Rules d in the heading of their Form 990, Form 990-EZ, or on nedule B (Form 990, 990-EZ, or 990-PF)	o not file Schedule B (Form 990, 990-EZ, or line 2 of their Form 990-PF, to certify that they do
BAA For Paperwork Reduction Act No for Form 990, Form 990-EZ, and Form	otice, see the Instructions 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2007

	B (Form 990, 990-EZ, or 990-PF) (2007)	Page 1	of 1 of Part I		
Name of org	panization DT FAMILY STAR FOUNDATION	' '	r identification number 553555		
Part					
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
1	DAVID H. SCHMIDT P.O. BOX 95410 SOUTH JORDAN, UT 84095	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
BAA	TEEA0702L 07/31/07	Schedule B (Form 990), 990-EZ, or 990-PF) (2007)		

Page 1 of 1 of Part I

Schedule E	3	(Form	990,	990-EZ,	or	990-PF)) ((2007))
									-

Name of organization
SCHMIDT FAMILY STAR FOUNDATION

20-8553555

Part II	Noncash Property (See Specific Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
!		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA	Sche	dule B (Form 990, 990-EZ	, or 990-PF) (2007

BAA

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Transfer of gift

2007	FEDERAL S	STATEMENTS		PAGE 1	
CLIENT 023	SCHMIDT FAMILY	STAR FOUNDATIO	N	20-8553555	
11/10/10				03 52PM	
STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES					
		NSES INVESTME BOOKS INCOME	NT ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	TOTAL \$	1,581. \$ 1,58 1,581. \$ 1,58	31. 31. \$ 0	\$ 0.	
STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES					
		(A) (B) NE' NSES INVESTME BOOKS INCOM	NT ADJUSTED	(D) CHARITABLE PURPOSES	
BANK CHARGES	TOTAL \$	35. \$ 35. 35. \$	35. \$ 0	\$ 0.	
STATEMENT 3 FORM 990-PF, PART VII-A, LINE 1 SUBSTANTIAL CONTRIBUTORS	0 DURING THE TAX	YEAR		*_ <u>*</u>	
NAME OF SUBSTANTIAL CONTRIBUTOR		ADDRESS OF SUBSTANTIAL CONTRIBUTOR			
		P.O. BOX 95410 SOUTH JORDAN, U	TT 84095		