

### 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

OMB No 1545 0052

2009

Department of the Treasury Internal Revenue Service

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

For cale	endar year 2009, or tax year beginning	, 2009,	and ending		
<b>G</b> Che	ck all that apply   Initial return   Initia	I Return of a former pu	ublic charity	Fina	al return
	Amended return	Address c	hange Name	change	
11 11-			A	Employer identification num	nber
Use th		T FOUNDATION		31-1489773	
Otherwi		1 1001101111011	В	Telephone number (see the	instructions)
print	CENTERVILE UT 84014		ا	801-292-7069	
or type See Spec	₽ <b>.  </b>		<del>-</del>		needing shoot boss >
Instruction			c	If exemption application is	
		( ) ( ) ( ) ( )		1 Foreign organizations, chec	
<b>H</b> 안		(c)(3) exempt private for		2 Foreign organizations meet here and attach computation	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable tr				
	5 10 1 11 10	ounting method X Ca	ashAccrual   E	under section 507(b)(1)(A)	
		Other (specify)	F	If the foundation is in a 60	
<b>►</b> \$		column (d) must be on	cash basis)	under section 507(b)(1)(B)	, check here
Part I	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 neces-	expenses per books	income	income	for charitable
	sarily equal the amounts in column (a)				purposes (cash basis only)
	(see the instructions) )				(casir basis orny)
	1 Contributions, gifts, grants, etc, received (att sch)	6,250.			
	2 Ck ► if the foundn is not req to att Sch B				
ļ	3 Interest on savings and temporary	25,734.	25,734	25 724	
i	cash investments 4 Dividends and interest from securities	1,803.	1,803	. 25,734. 1,803.	
	5a Gross rents	1,003.	1,003	1,003.	
	<b>b</b> Net rental income			1,7	
R	or (loss) 6a Net gain/(loss) from sale of assets not on line 10	-1,930.			
E	b Gross sales price for all 10 007	1,330.			
_	7 Capital gain net income (from Part IV, line 2)		0		
E N	8 Net short-term capital gain			•	
ΰ	9 Income modifications				
E	10a Gross sales less returns and				
	allowances.				1
	b Less Cost of goods sold				
	c Gross profit/(loss) (att sch)				,
	11 Other income (attach schedule)				
	SEE STATEMENT 1	986.			
	12 Total. Add lines 1 through 11	32,843.	27,537	. 27,537.	
	13 Compensation of officers, directors, trustees etc	0.			
	14 Other employee salaries and wages			<u></u>	
	15 Pension plans, employee benefits		/	1 2	
A	16a Legal fees (attach schedule)			\0)	
M	<b>b</b> Accounting fees (attach sch) SEE ST 2	535.		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
ı N	c Other prof fees (attach sch)			0 /9/	
PS	17 Interest		/67/_	<u>√, / } </u>	
P S E T R R	18 Taxes (attach schedule)(see instr.)		/CY/_^	1/3/	
	19 Depreciation (attach sch) and depletion		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	V. Y	
<b>5</b> 5. ;	20 Occupancy		<del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>		
ZG VE	21 Travel, conferences, and meetings		3	.\ <i>i''</i>	
A E	22 Printing and publications		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
D P	23 Other expenses (attach schedule)		. /		
(F)					
<b>三三</b>	24 Total operating and administrative				
5 S	expenses. Add lines 13 through 23	535.			
	25 Contributions, gifts, grants paid STMT 3	52,306.			52,306.
CANNEW NOVERSOZUM AND CONTRACT	26 Total expenses and disbursements. Add lines 24 and 25	52,841.	0	. 0.	52,306.
P. F.	27 Subtract line 26 from line 12:				-
<u>v</u>	a Excess of revenue over expenses and disbursements	-19,998.			
	b Net investment income (if negative, enter -0-)	10,000.	27,537		
	C Adjusted net income (if negative, enter -0-)		2.,557	27,537.	
	,				<u> </u>

Part		Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year		of year	
ran	<u>"</u> "	Balance Sheets column should be for end-of year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash — non-interest-bearing				
	2	Savings and temporary cash investments	172,385.	137,403.	137,403.	
1	3	Accounts receivable	-		_	
		Less: allowance for doubtful accounts ▶		<u></u>		
	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 the instructions)				
	7	Other notes and loans receivable (attach sch) 51,168.				
A S E T		Less allowance for doubtful accounts ▶	1,076.	51,168.	51,168.	
Š	8	Inventories for sale or use				
F	9	Prepaid expenses and deferred charges				
S	10 a	Investments – US and state government obligations (attach schedule)				
		Investments — corporate stock (attach schedule)				
	C	: Investments — corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)	675,844.	640,736.	640,736.	
	14	Land, buildings, and equipment basis				
ļ		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe SEE STATEMENT 4	71,214.	71,214.	71,214.	
		Total assets (to be completed by all filers –	920,519.	900,521.		
	17	see instructions. Also, see page 1, item I)  Accounts payable and accrued expenses	920, 519.	900,521.	900, 521.	
Ī	l	Grants payable  Grants payable			┧ ',	
A B	19	Deferred revenue		• •	-	
Ţ	20	Loans from officers, directors, trustees, & other disqualified persons.			-	
L	21	Mortgages and other notes payable (attach schedule)				
Ţ	22	Other liabilities (describe			1	
Ė						
<u> </u>	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
N F E U	24	Unrestricted			. !	
TN	25	Temporarily restricted				
ΔD	26	Permanently restricted			-	
A B S A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
E L T A	27	Capital stock, trust principal, or current funds	920,519.	900,521		
ŚÑ	28				]	
O E	29	Retained earnings, accumulated income, endowment, or other funds			_	
RS	30	Total net assets or fund balances (see the instructions)	920,519.	900,521		
	31	Total liabilities and net assets/fund balances (see the instructions)	920,519.	900,521		
Part	111	Analysis of Changes in Net Assets or Fund Balanc	es			
1	Tota	Il net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	ımn (a), line 30 (must a	gree with	920,519.	
2		er amount from Part I, line 27a		2	-19,998.	
3		increases not included in line 2 (itemize)		3	1 22,230.	
4		lines 1, 2, and 3		4	900,521.	
5		eases not included in line 2 (itemize)		5		
6	000 501					

Form 990-PF (2009) FRED & CHERYL HALE SUPPORT FOUNDATION

	Losses for Tax on Investmen		-21.5			
(a) List and describe 2-story brick warehous	(b) How acc P — Purch D — Dona	nase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)		
1a 419.237 ORTIMUM FXD	INCOME FD I		P		10/18/04	1/12/09
b 25.827 OPTIMUM FXD			P		10/18/04	5/18/09
c 465.793 OPTIMUM LG		<u> </u>	P		10/18/04	7/20/09
d 354.304 OPTIMUM LG	CAP GROWTH I		P		10/18/04	5/18/09
е	<del></del>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal	е		(h) Gain or (e) plus (f) m	
a 3,286.			3,774.			-488.
<b>b</b> 207.			233.			-26.
c 3,721.			4,632.			-911.
d 2,883.		<u> </u>	3,388.			-505.
e					· <del>-</del> ·	
	ring gain in column (h) and owned by			0.	(1) Gains (Colu ain minus column (k	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	ny	tha	in -0-) or Losses (fr	om column (h))
a b						-488. -26.
c		· · · · · · · · · · · · · · · · · · ·				-911.
d						-505.
e						
2 Capital gain net income or (ne	t capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7		2		-1,930.
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)	į			
If gain, also ontor in Part I, line	e 8, column (c) (see the instructions)	If (loss) enter .0.				
in Part I, line 8	s o, column (c) (see the manuchons)	) II (1033), elitel 303		3		0.
Part V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investme	ent Inco	me		
If 'Yes,' the foundation does not qua	this part blank Stion 4942 tax on the distributable an Lify under section 4940(e) Do not co In each column for each year, see th	mplete this part		ies	Yes	X No
_ (a)	(b)	(c)	3 -		(d)	· · · · · · · · · · · · · · · · · · ·
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as:	sets	(colu	Distribution umn (b) divided	
2008	46,359.	90	6,711.			0.051129
2007	57,972.	92	1,839.			0.062887
2006	17,748.	93	4,820.			0.018985
2005	16,915.		8,822.			0.018211
2004	9,720.	91	3,346.			0.010642
2 Total of line 1, column (d)				2		0.161854
3 Average distribution ratio for the	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	;	3		0.032371
number of years the foundation	Thas been in existence in less than :	o years		3		
4 Enter the net value of nonchar	itable-use assets for 2009 from Part	X, line 5		4		887,013.
5 Multiply line 4 by line 3			1			
3 Muniphy line 4 by line 3				5		28,713.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)			5 6		28,713. 275.
	come (1% of Part I, line 27b)					
6 Enter 1% of net investment inc	,			6		275.

Form	990-PF (2009) FRED & CHERYL HALE SUPPORT FOUNDATION 31-1489773		P	age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruc	tions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			- 1
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		2	275.
	check here ► X and enter 1% of Part I, line 27b			-
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			i
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		2	275.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		2	275.
6	Credits/Payments			1
	2009 estimated tax pmts and 2008 overpayment credited to 2009			Ì
	Exempt foreign organizations – tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld  6d			
7	Total credits and payments Add lines 6a through 6d			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			<u> 275.</u>
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
<u></u>	Enter the amount of line 10 to be Credited to 2010 estimated tax.			
Pan	VII-A Statements Regarding Activities			
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	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
С	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   (3) 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			Ì
	foundation managers \$ 0.			
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		- <u>-</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?	4 b	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			
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, column (c), and Part XV	7	Х	<del></del> -
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	N/A			
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 <i>General Instruction G<sup>2</sup> If 'No,' attach explanation</i> :	8b	Χ	
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 2009 or the taxable year beginning in 2009 (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		<u>x</u>
BAA	Fo	rm <b>99</b>	0-PF	(2009)

Form	990-PF (2009) FRED & CHERYL HALE SUPPORT FOUNDATION	31-148977	3	Pa	age <b>5</b>
Par	t VII-A   Statements Regarding Activities Continued				
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 acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	ore	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and ex Website address  N/A	emption application?	13	Х	
14		lephone no ► 801-29	95-94	71	
	Located at ► 63 WEST 1750 NORTH CENTERVILLE UT ZIF	9+4► 84014			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Chec		N/A		
<u> </u>	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Require	<u>red</u>	1	u T	<del></del>
_	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	a 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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			•
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		ļ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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 X No			i
	(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 XNo		:	
ŀ	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions descr Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the ii	ibed in nstructions)?	1 b	N	Ã
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted that were not corrected before the first day of the tax year beginning in 2009?	ed acts,	 1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation we private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	as a			
á	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			ı
	If 'Yes,' list the years ► 20 , 20 , 20 , 20				}
I	Are there any years listed in 2a for which the foundation is not applying the provisions of section (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section)	on 4942(a)(2)			
	<b>all</b> years listed, answer 'No' and attach statement — see the instructions )	n 4942(a)(2) to	2b	N	/A
(	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 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>				
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 No			
ı	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the four disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequired.	approved est, or			
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedulé Č, Form 472 determine if the foundation had excess business holdings in 2009).	υ, το	3b	N,	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
	h Did the foundation make any investment in a pressure of the factor December 21, 1000 that are	uld.			
I	b Did the foundation make any investment in a prior year (but after December 31, 1969) that coupeopardize its charitable purpose that had not been removed from jeopardy before the first day the tax year beginning in 2009?		4b	-	- x

BAA

Form **990-PF** (2009)

Form 990-PF (2009) FRED & CHERYL HALE			31-148	9773	Page 6
Part VII-B Statements Regarding Activiti		n 4720 May Be Requ	uired (continued)	<del></del>	<del></del>
5a During the year did the foundation pay or incu	•		□ •	_	
(1) Carry on prepaganda, or otherwise attemp	ot to influence legislatio	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ition drive?		Yes X	1 1	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	☐ Yes X	No	,
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, oi 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No	;
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exception disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ []		1
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible. If 'Yes,' attach the statement required by Region 1.	sibility for the grant?	•	N/A Yes	No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premium	S Yes X	No	
<b>b</b> Did the foundation, during the year, pay premi	iums, directly or indirec	ctly, on a personal bene	fit contract?	6Ь	X
If 'Yes' to 6b, file Form 8870	dation o martir to a con-	whited toy abolts - t	ection? Yes X	No	
7a At any time during the tax year, was the found b If yes, did the foundation receive any proceed				7b	N/A
Part VIII Information About Officers, D				, ,	
and Contractors		· · · · · · · · · · · · · · · · · · ·			<u> </u>
1 List all officers, directors, trustees, foundation	T		·		<del></del>
(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 other allo	
SEE STATEMENT 5					
		0.	0.		0.
2 Compensation of five highest-paid employee	oc (other than these in	cluded on line 1— see in	nstructions) If none a	nter '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	(c) compensation	employee benefit plans and deferred compensation	other allo	
NONE					
Total number of other employees paid over \$50,00	0		,		0
BAA	TEEA0306L	07/06/09		Form <b>99</b> 0	-PF (2009)

Part VIII. Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services — (see i enter 'NONE.'	nstructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(7)
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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part X B Summary of Program-Related Investments (see Instruc		
Describe the two largest program-related investments made by the foundation during N/A	ng the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions  3		
Total. Add lines 1 through 3		0.
roten rida anco i tilibugiro	*	υ.

**BAA** Form **990-PF** (2009)

see instructions.)	part. Foreign to	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purpos	ses	711 000
a Average monthly fair market value of securities	1 a	711,950.
b Average of monthly cash balances	1b	137,403.
c Fair market value of all other assets (see instructions)	1c	51,168.
d Total (add lines 1a, b, and c)	1 d	900,521.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	_
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	900,521.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	13,508.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	887,013.
6 Minimum investment return. Enter 5% of line 5	6	44,351.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations check here ► and do not complet		ındatıons
1 Minimum investment return from Part X, line 6	1	44,351.
2a Tax on investment income for 2009 from Part VI, line 5	275.	· · · · · · · · · · · · · · · · · · ·
b Income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	275.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	44,076.
Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	44,076.
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	44,076.
		11,0.0.
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	52,306.
<b>b</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. purpo		<del></del>
		·
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
<b>b</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	52,306
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)	ne <b>5</b>	275
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	52,031.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculates for the section 4940(e) reduction of tax in those years	lating whether the fo	oundation

Form **990-PF** (2009)

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				44,076.
2 Undistributed income, if any, as of the end of 2009:	<del></del>			11/0/0.
a Enter amount for 2008 only			23,006.	,
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				,
<b>a</b> From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
<b>d</b> From 2007				•
<b>e</b> From 2008				
f Total of lines 3a through e	<u> </u>			
4 Qualifying distributions for 2009 from Part				ţ
XII, line 4 ► \$ 52,306.				
a Applied to 2008, but not more than line 2a			23,006.	
<ul> <li>b Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus	•			1
(Election required – see instructions)	0.			00 200
d Applied to 2009 distributable amount				29,300.
e Remaining amount distributed out of corpus	0.			0
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the	0.		<u> </u>	0.
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.			í L
	<u> </u>			1
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
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.		PAGE MERCEN
e Undistributed income for 2008 Subtract line 4a from				
line 2a Taxable amount — see instructions.			0.	
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2010				14,776.
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.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions).	0.			Į
9 Excess distributions carryover to 2010.	0.			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				! 
a Excess from 2005				
<b>b</b> Excess from 2006				\ !
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Part XIV Private Operating Foundation			VII-A guestion 9	31-140 <i>911</i> .	N/A
1 a If the foundation has received a ruling or on is effective for 2009, enter the date of the	determination letter				14/11
<b>b</b> Check box to indicate whether the foundate	ion is a private ope	erating foundation of	described in section	4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a			<u> </u>		
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					h
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	
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		<del> </del>			
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 assets at any time during th	(Complete this e year — see in	part only if the structions.)	organization ha	ad \$5,000 or mo	re in
Information Regarding Foundation Manage a List any managers of the foundation who close of any tax year (but only if they have NONE	nave contributed m	ore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the foun	dation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a co 0% or greater inte	rporation (or an equa rest	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here \( \overline{X} \) if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	arıtable organization		
a The name, address, and telephone number	er of the person to	whom applications	should be addressed	d	
<b>b</b> The form in which applications should be	submitted and info	mation and materi	als they should inclu	ıde	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charit	able fields, kinds of i	institutions, or other	factors

TEEA0310L 07/06/09

Form **990-PF** (2009)

BAA

3 Grants and Contributions Paid During the Ye	3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	substantial contributor	recipient	Contribution					
Name and address (home or business)  a Paid during the year	any foundation manager or substantial contributor	recipient	contribution	, illouin				
Total	<u>L</u>	1	► 3a					
<b>b</b> Approved for future payment								
Total			► 3b					

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

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by	section 512, 513, or 514	
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (see the instructions)
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			14	25,734.	
4 Dividends and interest from securities			14	1,803.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</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	-1,930.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue			ļ		
a SETTLEMENT INCOME		986.	14		
b					
c		· · · · · · · · · · · · · · · · · · ·			
d					
e					
12 Subtotal Add columns (b), (d), and (e)		986.		25,607.	
13 Total. Add line 12, columns (b), (d), and (e)				13	26,593.

## 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 the instructions)
N/A	
<del></del>	
-	
-	

## Pan Millian Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		•								Yes	No
•	1 Did th	ne organization directly	or indirectly e	ngage in any of	the following wi	th any ot	her organizatio	n 527		103	,,,,,
	described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?						527,		23. - 255.71	1 1 2 m	
a Transfers from the reporting foundation to a noncharitable exempt organization of								W.			
	(1) C								1 a (1)		X
	• • •	ther assets							1 a (2)		X
		transactions									
		ales of assets to a nor							1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets								1 b (2)		X	
		ental of facilities, equip eimbursement arrange	•	assets					1b (3)		X
		oans or loan quarantee							1 b (4) 1 b (5)		X
	• •	erformance of services		in or fundraising	a solicitations				1b (6)		X
		ng of facilities, equipm			•	rees			1c		X
		g or radiiior oquip	,	(0) 0(1)01 000010	, or para emprey	000				l	
	the q	answer to any of the a oods, other assets, or s ransaction or sharing a	services given	by the reporting	foundation If the	ne founda	ation received I	ess than fair marke	et value in	ue of	
(a	) Line no	(b) Amount involved		f noncharitable exer		T		sfers, transactions, and		ngemen	ts
N,	/A										
_				······································							
_						ļ					
_			ļ			ļ					
	····					<del> </del>					
						<del>                                     </del>					
_								<del> </del>			
					······································	1			<del></del>		
_	<del></del>					· <del> </del>			<del></del>	<del></del>	
						<del>                                     </del>					
_											
_											
						İ					
	2a Is the descr	foundation directly or libed in section 501(c)	indirectly affilia of the Code (of	ated with, or rel ther than sectio	ated to, one or r n 501(c)(3)) or ir	nore tax-	exempt organi 527?	zations	Yes	s [X]	No
	<b>b</b> If 'Ye	s,' complete the follow				-					
- NT	/7	(a) Name of organizat	ion	<b>(b)</b> Typ	e of organization	)	(0	Description of rel	ationship		
IN	<u>/A</u>				<u></u>						
		<del>- · ·</del>					·- · · · · · · · · · · · · · · · · · ·				
_								<del></del>			
_								····			
	Under pen	alties of perjury, I declare that Declaration of preparer (other	Inhave examined th	is return, including a	ccompanying schedule	s and stater	ments, and to the be	est of my knowledge and I	belief, it is tru	e, corre	ct, and
	complete	Declaration of preparer (other	than taxpayer or fid	uciary) is based on a	all information of which	n preparer ha	as any knowledge				
	_ /	1/1/2/17	to 0.	_		1 .	1 15 1-	<b>b b n n n n n n n n n n</b>			
S						DIR/TRUST	EE				
G N	3191	attire of officer or trustee		$\overline{}$		Date			arar's Idantifi	upa pup	abor.
빌	Paid	Preparer's signature		ノ <u>ー</u> +		İ		Check if (See	arer's Identify Signature in	the inst	trs)
HERE	Pre-	100	u	<u> </u>			/15/10	employed P P0	0997628	8	
-	parer's Use	Lugare of colf		ND & ASSO	CIATES, INC	·		EIN ► 84-13	78354		
	Only	employed), address, and	SOUTH 200		2.4				200 -	000	
		ZIP code BOUN	TIFUL, UT	84010-712	<u> </u>			Phone no ► 801	-397-1		<i>(00000</i>
B/	₹A								Form 99	7U-PF	(2009)

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

Department of the Treasury , Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization		Employer identification number
FRED & CHERYL HALE SUI	31-1489773	
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	on
	4947(a)(1) nonexempt charitable trust not	t treated as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust trea	ated as a private foundation
	X 501(c)(3) taxable private foundation	
	red by the <b>General Rule</b> or a <b>Special Rule</b> , or (10) organization can check boxes for both the General	Rule and a Special Rule See instructions
General Rule -		
For an organization filing Form contributor (Complete Parts I a	990,990-EZ,or990-PF that received, during the year, \$5,1 and II )	000 or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and rece	ation filing Form 990 or 990-EZ, that met the 33-1/3% supperved from any one contributor, during the year, a contribution of the time 1h or (ii) Form 990-EZ, line 1 Complete Parts I an	he greater of (1) \$5,000 or (2) 2% of the
aggregate contributions of more	(10) organization filing Form 990 or 990-EZ, that received to than \$1,000 for use exclusively for religious, charitable, so nor animals. Complete Parts I, II, and III	from any one contributor, during the year, centific, literary, or educational purposes, or the
contributions for use <i>exclusivel</i> this box is checked, enter here	(10) organization filing Form 990 or 990-EZ, that received the for religious, charitable, etc, purposes, but these contributions that were received during the year for the parts unless the <b>General Rule</b> applies to this organization.	utions did not aggregate to more than \$1,000 If for an exclusively religious, charitable, etc.
religious, charitable, etc, contri	butions of \$5,000 or more during the year	<b>▶</b> \$
990-PF) but it <b>must</b> answer 'No' or	ot covered by the General Rule and/or the Special Rules do n Part IV, line 2 of their Form 990, or check the box on line meet the filing requirements of Schedule B (Form 990, 990-	H of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperw for Form 990, 990EZ, or 990-PF.	ork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule Name of org	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
•	CHERYL HALE SUPPORT FOUNDATION	, ,	r identification number 489773
Part I	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	C & H TRUST  63 WEST 1750 NORTH  CENTERVILLE, UT 84014	\$6,250.	Person X Payroli 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)

Page 2

of 1

of Part II

Name of organization

FRED & CHERYL HALE SUPPORT FOUNDATION

Employer identification number

31-1489773

Part II	Noncash Property (see 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)	(b)		(d)
(a) No. from Part I	Description of noncash property given	(c) FMV (or estimate) (see instructions)	Date received
		_ <del> </del> _	
	-	\$	
(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
		\$\$	
			1

BAA

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift 2009

#### FEDERAL STATEMENTS

PAGE 1

FRED & CHERYL HALE SUPPORT FOUNDATION

31-1489773

STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME

> (A) REVENUE PER BOOKS INCOME

(B) NET INVESTMENT

(C) ADJUSTED NET INCOME

SETTLEMENT INCOME

986. TOTAL \$ 986.\$

0.

**STATEMENT 2** FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES** 

> (A) **EXPENSES** PER BOOKS

(B) NET INVESTMENT

(C) ADJÙSTED INCOME NET INCOME PURPOSES

(D) CHARITABLE

ACCOUNTING

535. TOTAL \$ 535.

0. \$

**STATEMENT 3** FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS** 

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

SALT LAKE CITY , UT 84150 NONE

DONATION

LDS CHURCH

501 (C) 3

19,125.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

DONATION

DAVIS SCHOOL DISTRICT 45 EAST STATE STREET FARMINGTON, UT 84025

50 EAST NORTH TEMPLE STREET

NONE

501 (C) 3

22,881.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

DONATION

BOY SCOUTS OF AMERICA

P.O. BOX 152079 P.O. BOX 152079, TX 75015

NONE

501 (C) 3

DONATION

300.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RODGERS MEMORIAL THEATER 292 EAST PAGES LANE

CENTERVILLE, UT 84014

NONE

RELATIONSHIP OF DONEE:

### **FEDERAL STATEMENTS**

PAGE 2

FRED & CHERYL HALE SUPPORT FOUNDATION

31-1489773

STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

ORGANIZATIONAL STATUS OF DONEE:

501 (C) 3

AMOUNT GIVEN:

\$ 10,000.

TOTAL \$ 52,306.

STATEMENT 4 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

LAND

BOOK VALUE FAIR MARKET VALUE

\*\*\* 71,214.\*\* \$ 0.

# STATEMENT 5 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		CONTRI- BUTION TO EBP & DC	
FRED HALE 63 WEST 1750 NORTH CENTERVILLE, UT 84014	DIR/TRUSTEE 0	\$ 0.	\$ 0.	\$ 0.
CHERYL HALE 63 WEST 1750 NORTH CENTERVILLE, UT 84014	DIRECTOR 0	0.	0.	0.
CRAIG SALMON 353 WEST 1600 NORTH CENTERVILLE, UT 84014	DIRECTOR 0	0.	0.	0.
MARK ALDER 294 W JENNINGS LANE CENTERVILLE, UT 84014	DIRECTOR 0	0.	0.	0.
SHERYL ALLEN P O BOX 588 FARMINGTON, UT 84025	DIRECTOR 0	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.

## Form &

Application for Extension of Time To File an **Exempt Organization Return** 

Department of the Treasury Internal Revenue Service

OMB No 1545-1709

File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box.... 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. 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. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits. Name of Exempt Organization Employer identification number Type or print FRED & CHERYL HALE SUPPORT FOUNDATION 31-1489773 File by the due date for filing your return See instructions Number, street, and room or suite number. If a P.O. box, see instructions 63 WEST 1750 NORTH City, town or post office, state, and ZIP code. For a foreign address, see instructions. CENTERVILLE, UT 84014 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 • The books are in the care of ► FRED HALE Telephone No. ► 801-295-9471 FAX No. ► 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 will cover. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time  $\frac{10}{10}$ , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 09 or tax year beginning \_\_\_\_\_, 20 \_\_\_, and ending 2 If this tax year 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|\$ b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b|\$ 0. c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). 0. See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

payment instructions.

Form 8868 (Rev. 4-2009)

Form 8868	(Rev 4-2009)			Page 2			
• If you a	are filing for an Additional (Not A	Automatic) 3-Month Extension, complete on	ly Part II and check this bo	ox ►			
Note. Only	complete Part II if you have alre	eady been granted an automatic 3-month ex	tension on a previously file	ed Form 8868.			
• If you a		nth Extension, complete only Part I (on page					
Part II	Additional (Not Automati	c) 3-Month Extension of Time. Only	file the original (no o	copies needed).			
	Name of Exempt Organization		Emplo	yer identification number			
Type or							
print	FRED & CHERYL HALE		31-1489773				
File by the	Number, street, and room or suite number	r If a P O box, see instructions.	For IR	S use only			
extended due date for filing the	BANGERTER, LUND & AS 300 SOUTH 200 WEST	SSOCIATES, INC.					
return. See instructions.		ode For a foreign address, see instructions					
	BOUNTIFUL, UT 84010	-7124					
Check type	<del></del>	arate application for each return):	The same and the same state of				
Form 9		* -	Form 1041-A	Form 6069			
Form 9	990-BL Form 990-	T (section 401(a) or 408(a) trust)	Form 4720	Form 8870			
X Form 9	990-EZ Form 990-	T (trust other than above)	Form 5227				
STOP! Do	not complete Part II if you were	not already granted an automatic 3-month	extension on a previously	filed Form 8868.			
The box	oks are in care of FRED HA	<u>LE</u>					
•	one No. ► <u>801-295-9471</u>	FAX No. ►					
		fice or place of business in the United State		►∐			
		organization's four digit Group Exemption No					
		is for part of the group, check this box $\cdot$ $ ightharpoonup$	and attach a list with the	names and EINs of all			
	the extension is for.						
		nsion of time until <u>11/15</u> , 20					
		tax year beginning , 20		, 20_ <b>_</b> _			
	<del>-</del>			hange in accounting period			
		nsion . TAXPAYER RESPECTFULL					
GA	THER INFORMATION NECE	SSARY TO FILE A COMPLETE AN	D ACCURATE TAX RI	EIUKN.			
nonre	efundable credits. See instruction	990-PF, 990-T, 4720, or 6069, enter the terns		8a \$			
payn	nents made. Include any prior ye	990-T, 4720, or 6069, enter any refundable ar overpayment allowed as a credit and any	amount paid previously	8b \$			
c Bala with	nce Due. Subtract line 8b from li FTD coupon or, if required, by us	ne 8a. Include your payment with this form, sing EFTPS (Electronic Federal Tax Paymer	or, if required, deposit nt System). See instrs.	8c \$			
		Signature and Verification					
Under penalties of perjury, I declare that it have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form							
Signature	Auld	Title ► <del>DIR/TRUS</del> TEE	CPA	Date > 8/10/10			
	7						
BAA	-	FIFZ0502L 03/11/09		Form 8868 (Rev 4-2009)			