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Department of the Treasury

Return of Private Foundation

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

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

2009

OMB No 1545-0052

			be able to use a copy of this		orting requirements	<u> </u>
		dar year 2009, or tax year beginning		, and ending	Frank setus	
G C	heck	all that apply Initial return	· Initial return of a fo	ormer public charity	Final return	1
		Amended return	- L Address chan	ge 🗀	A Employer identification	n number
	the				A chiployer identification	i iidiiibei
	abel	MULL GOOD GRUCE GURDIO	PARLE FOUNDAT	TON	46-0498957	7
	erwi print	**,		Room/suite	B Telephone number	
	typ	,	,		801-451-92	200
See		p , , b			C If exemption application is	
Insti	ucti	KAYSVILLE, UT 84037			D 1. Foreign organization	
H C	heck	type of organization X Section 501(c)(3) e	xempt private foundation		Foreign organizations m check here and attach c	eeting the 85% test,
	_	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	E If private foundation sta	
l Fa			ting method. X Cash	Accrual	under section 507(b)(1	
		· 1 —	Other (specify)		F If the foundation is in a	60-month termination
Ì			umn (d) must be on cash	basis.)	under section 507(b)(1	
Pa	rt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessanly equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	80,000.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)			· · · · · · · · · · · · · · · · · · ·	
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10				
Revenue	b	Gross sales price for all assets on line 6a				.[
ě	7	Capital gain net income (from Part IV, line 2)		0.	•	
_	8	Net short-term capital gain		11'		
	9	Income modifications Gross sales less returns				
	10a	and allowances				
	l	Less Cost of goods sold				
	l	Gross profit or (loss)				
	Ι.	Other Income	80,000.	0.		
	12	Total. Add lines 1 through 11	543.	0.		
	13	Compensation of officers, directors, trustees, etc	743.			
	14	Other employee salaries and wages Pension plans, employee benefits				
es	15	Legal fees		RECEIVED		
		Accounting fees			21	
×	l	Other professional fees			Ö	
Ш	17		84	SEP 0 1 2010	IRS-OSK	
aţį	18	Taxes			Ľ	
istr	19	Depreciation and depletion		OGDEN. UT		
듩	20	Occupancy				
Ą	21	• •				
2	22	-				
စ္မ	23	Other expenses				
rating	24					
perating and Administrative Expens	ĺ .	expenses. Add lines 13 through 23	543.	0	•	
Ö	25	Contributions, gifts, grants paid	80,500.			80,50
	26					
		Add lines 24 and 25	81,043.	0	•	80,50
do	27					
J Š		Excess of revenue over expenses and disbursements	-1,043.			
		Net investment income (if negative, enter -0-)	, , , , , , , , , , , , , , , , , , ,	0		
		Adjusted net income (if negative, enter -0-)			N/A	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2009)

_	
Dar	' מו
гαι	10

Dale Bale	Attached schedules and amounts in the description	beginning of year	Ena o	r year
Part II Bala	Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - no	n-interest-bearing .	1,098.	55.	
1 ,	nd temporary cash investments		,	
3 Accounts				
	vance for doubtful accounts 🕨			
4 Pledges re				
	vance for doubtful accounts ▶			
5 Grants red	l l			
	es due from officers, directors, trustees, and other		-	
	d persons			
7 Other notes an	·			
	vance for doubtful accounts		•	
	s for sale or use			
5	on sale of use charges			·
100 Investmen	its - U.S. and state government obligations			
l.	its - corporate stock			
	•			
1	its - corporate bonds		***************************************	
ļ	and, buildings, and equipment basis	•		İ
1	ated depreciation			
	its - mortgage loans		· · · · · · · · · · · · · · · · · · ·	·
13 Investmen	_			
	dings, and equipment basis	i i		
	ated depreciation			
15 Other ass	ets (describe –)			
		1 000	55.	55
	ets (to be completed by all filers)	1,098.	33.	33
	payable and accrued expenses			
18 Grants pa				
ဖ္ထု 19 Deferred ၊	evenue			
20 Loans from	officers, directors, trustees, and other disqualified persons			
7	s and other notes payable .			
22 Other liab	lities (describe 🕨)			
			^	
23 Total liab	ilities (add lines 17 through 22)	0.	0.	
1	ons that follow SFAS 117, check here			
and comp	lete lines 24 through 26 and lines 30 and 31.			
24 Unrestrict	ed .			1
25 Temporai	ıly restricted .		<u> </u>	1
26 Permanei	itly restricted		· ·	1
Ĕ Foundati	ons that do not follow SFAS 117, check here			!
and comp	lete lines 27 through 31.		_	
င္အ 27 Capital st	ock, trust principal, or current funds	0.	0.	4
28 Paid-in oi	capital surplus, or land, bldg , and equipment fund	0.	0.	1
25 Temporal 26 Permanel Foundati and com 27 Capital st 28 Paid-in oi 29 Retained 30 Total net	earnings, accumulated income, endowment, or other funds	1,098.	55.	1
🖁 30 Total net	assets or fund balances	1,098.	55.	
			_	
31 Total liab	ilities and net assets/fund balances	1,098.	55.	
	alysis of Changes in Net Assets or Fund B	alances		
				1
	or fund balances at beginning of year - Part II, column (a), line	30		1 000
	th end-of-year figure reported on prior year's return)		1	1,098 -1,043
	rom Part I, line 27a		2	
	not included in line 2 (itemize)		3	0
4 Add lines 1, 2,	_		4	55
	ncluded in line 2 (itemize)			0
6 Total net assets	or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	55

Page 3

THE GOOD CAUSE CHARITABLE FOUNDATION

Pá	ert IV Capital Gains a	nd Los	ses for Tax on In	vestment	Income						
•			d(s) of property sold (e g r common stock, 200 shs			` P	How ac - Purch - Dona	nase	(c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo , day, yr)
1a											
b	NON	ΙE		_		_					
C						<u> </u>					
<u>d</u>						<u> </u>					
<u>e</u>		-				<u> </u>					
	(e) Gross sales price	٠,,	epreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss (f) minus	
<u>a</u>								<u>.</u>			
b											<u></u>
_ <u>C</u> _											
<u>d</u>											····
<u>e</u>	0		aluma (h) and aumad hu	ha fa undahan	on 10/01/60					-1 (5)	
	Complete only for assets showing		. 1					(I) COL) Gains (C . (k), but n	ol (h) gain iot less tha	ı mınus n -0-) ar
	(i) F M V. as of 12/31/69) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		_		Losses	(from col	(h))
<u>a</u>											
<u>_b</u>											
<u>C</u> _				 -							<u></u>
							ļ				
<u>e</u>						_					
2 (Capital gain net income or (net cap	oital loss)	If gain, also enter If (loss), enter -0-	in Part I, line ' in Part I, line	7 7	}	2	<u> </u>			
3 1	Net short-term capital gain or (loss	s) as defin	ed in sections 1222(5) an	d (6):							
	f gain, also enter in Part I, line 8, c			- (-)		Ì					
1	f (loss), enter -0- in Part I, line 8						3				
P	ert V Qualification U	nder Se	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		·
(For	optional use by domestic private	foundatio	ns subject to the section 4	1940(a) tax on	net investment ii	ncom	e)				
If co	ction 4940(d)(2) applies, leave th	ic nart hla	nk								
11 20	ction 4340(0)(2) applies, leave th	is pait via	IIK								
Was	the foundation liable for the secti	on 4942 t	ax on the distributable am	ount of any ye	ear in the base pe	rıod?					Yes X No
	es," the foundation does not quali										
1	Enter the appropriate amount in e	ach colum		actions before	making any entri					-	(d)
_	(a) Base period years	, [(b) Adjusted qualifying dist	tributions	Net value of no	(C) nocha		use assets	-		bution ratio
	alendar year (or tax year beginnin	g in)		4,808.	Net value of the	7110110		1,023		(cor (b) ar	vided by col (c)) 82.901271
_	2008			0,000.				$\frac{1,023}{1,949}$			30.785018
	2007			5,592.				984			5.682927
	2006			6,155.				$\frac{304}{1,306}$			4.712864
	2005		-	267.				$\frac{1,300}{1,487}$.179556
_	2004			207.		-		1,407	•		•17550
	Fatal of has 4								,		124.261636
	Fotal of line 1, column (d)		a annual - duuda tha tetal -	 na lina A hii F	ar hu tha aumha		0010		2		121.201030
	Average distribution ratio for the 5			on time 2 by 5,	or by the numbe	ı vı yı	caiş		3		24.852327
1	the foundation has been in existen	ice ii iess	than 5 years .						3		24.032327
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5					4		3,038.				
5 !	5 Multiply line 4 by line 3					5		75,501.			
6 Enter 1% of net investment income (1% of Part I, line 27b)					6		0.				
U	ruter 1 % of the his estiment meani	IV (1 /0 UI I	(U.C. 1, 11110 & F.O.)								
7	Add lines 5 and 6								7		75,501.
8	Enter qualifying distributions from	Part XII,	line 4						8		80,500.
	If line 8 is equal to or greater than See the Part VI instructions	line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	1% tax	rate			

Form **990-PF** (2009)

Form	990-PF (2009) THE GOOD CAUSE CHARITABLE FOUNDATION 46-049			Page 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctior	15)	
1'a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			0.	
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%				
of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			_	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			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				
а	2009 estimated tax payments and 2008 overpayment credited to 2009				
b	Exempt foreign organizations - tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868)				
đ	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			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 2010 estimated tax ▶ Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities		,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	ļ	Yes		
	any political campaign?	1a		<u>X</u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	ļ	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	1c		X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ 0 .	1			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ļ	X	
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3	-	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	ļ	Х	
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	 	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ	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	i			
	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?	7	<u> </u>	Х	
	If "Yes," complete Part II, col. (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	.			
		.			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1	
	of each state as required by General Instruction G? If "No," attach explanation	8b	ļ	ļ	
9	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					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	<u> </u>	X	
	F	orm 99 (ノーピト	(2009)	

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X

3ь

Yes X No

N/A

statement - see instructions)

during the year?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	'NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
	†	
	· · · · · · · · · · · · · · · · · · ·	
	1	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	1.6.11	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on $\ln N/A$	ies 1 and 2	Amount
1N/A		
2		
All other program-related investments See instructions	J	
3		
Total. Add lines 1 through 3	•	0.
		Form 990-PF (2009)

Page 8

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. a Average monthly fair market value of securities 1a 16 b Average of monthly cash balances c Fair market value of all other assets 10 3,084. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 18 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 3 Subtract line 2 from line 1d 4 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 6 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part) 152. Minimum investment return from Part X, line 6 2a Tax on investment income for 2009 from Part VI, line 5 2a 2b Income tax for 2009 (This does not include the tax from Part VI) 2c c Add lines 2a and 2b 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 5 Add lines 3 and 4 6 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 80,500. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the 3a a Suitability test (prior IRS approval required) 3b **b** Cash distribution test (attach the required schedule) 80,500. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4

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

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				152.
2 Undistributed income, if any, as of the end of 2009		**************************************		
a Enter amount for 2008 only			0.	
b Total for prior years				
,		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 193.				
b From 2005 6,090.				
c From 2006 5,543.				
d From 2007 59,903.				
e From 2008 84,757.	156 406			
f Total of lines 3a through e	156,486.			·····
4 Qualifying distributions for 2009 from				
Part XII, line 4. ► \$ 80,500.			0.	
a Applied to 2008, but not more than line 2a	hilandani		V •	######################################
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	<u> </u>	U •		inna i da en
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				152.
d Applied to 2009 distributable amount e Remaining amount distributed out of corpus	80,348.			
5 Excess distributions carryover applied to 2009	0.	' ', ',11,11***414**1**11**1		0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	236,834.			
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.		
e Undistributed income for 2008 Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010	<u></u>		***************************************	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	100			
not applied on line 5 or line 7	193.			
9 Excess distributions carryover to 2010.	226 641			
Subtract lines 7 and 8 from line 6a	236,641.			
10 Analysis of line 9				
a Excess from 2005 6,090. b Excess from 2006 5,543.				
b Excess from 2006 5,543.				
c Excess from 2007 59,903.				
d Excess from 2008 84,757.				
e Excess from 2009 80,348.	l			Form 000 DE (2000)

923581 02-02-10

10421 SOUTH JORDAN PARKWAY #660 SOUTH JORDAN, UT 84095 CORD & LISA PACK PO BOX 321 EDEN, UT 84310 N/A MEDICAL EXPENSES FOR 50,0 JOSH SPINAL INJURY	Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor recipient		Amount
Name and address (home or business) a Paid during the year CAUSE FOR HOPE FOUNDATION 10421 SOUTH JORDAN PARKWAY #660 SOUTH JORDAN PARKWAY #660 SOUTH JORDAN PARKWAY #660 SOUTH JORDAN POR AUTHORIST CREDIT POR BOX 321 EDEN, UT 84310 AMERICA FIRST CREDIT UNION 326 N MAIN KAYSVILLE, UT 84037 NONE N/A **ISSIONARY DONATION **ISSIONARY DONATION **ISSIONARY DONATION **ISSIONARY DONATION **IDIOAL EXPENSES FOR D	Name and address (home or business) Show any relationship to any foundation manager or substantial contributor recipient		Amount
a Paid during the year CAUSE FOR HOPE FOUNDATION 10421 SOUTH JORDAN PARKWAY #660 SOUTH JORDAN, UT 84095 CORD & LISA PACK PO BOX 321 EDEN, UT 84310 AMERICA FIRST CREDIT UNION 326 N MAIN KAYSVILLE, UT 84037 Total b Approved for future payment NONE NONE EXEMPT CHARITY 30,0 AUTHOR SOUTH SALITY 30,0 THAT IN IN ITEM SOUTH SOUTH SALITY NONE N/A MISSIONARY DONATION 50,0 5		CHARITY	
10421 SOUTH JORDAN PARKWAY #660 SOUTH JORDAN, UT 84095 CORD & LISA PACK PO BOX 321 EDEN, UT 84310 AMERICA FIRST CREDIT UNION 326 N MAIN KAYSVILLE, UT 84037 NONE N/A **ISSIONARY DONATION 5 Approved for future payment		CHARITY	20 000
PO BOX 321 EDEN, UT 84310 AMERICA FIRST CREDIT NONE N/A MISSIONARY DONATION 5 UNION 326 N MAIN KAYSVILLE, UT 84037 Total > 3a 80,5	10421 SOUTH JORDAN PARKWAY #660 SOUTH		30,000.
UNION 326 N MAIN KAYSVILLE, UT 84037 Total b Approved for future payment	PO BOX 321 EDEN, UT	1	50,000.
b Approved for future payment	UNION 326 N MAIN KAYSVILLE,	MISSIONARY DONATION	500.
b Approved for future payment			00 500
		<u> </u>	80,500.
NONE	u Approved for future payment		
Total ▶ 3b			0

923611 02-02-10

iter gross amounts unless otherwise indicated		d business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue	code		Code	7	
			_		
<u> </u>	_ []		_		
					
					
B					· · · · · · · · · · · · · · · · · · ·
			_		
Fees and contracts from government agencies					
Membership dues and assessments	<u> </u>				
Interest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property				·	
Net rental income or (loss) from personal	-		_		
property				1	
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·		·	·
Gross profit or (loss) from sales of inventory					
Other revenue.	•		\dashv		
a	1 1		-		
b					
c					-
d		<u>-</u>	_		
B		() .	0.	
Total. Add line 12, columns (b), (d), and (e)	<u> </u>		· · · · · · · · · · · · · · · · · · ·	 _	
	ione \			10_	
e worksheet in line 13 instructions to verify calculate			_		
art XVI-B Relationship of Activi	ties to the Acco	omplishment of	Exemp	t Purposes	
ne No. Explain below how each activity for whi	ich income is reported i	n column (e) of Part XV	'I-A contrib	outed importantly to the accord	nplishment of
▼ the foundation's exempt purposes (oth	er than by providing fui	nds for such purposes)			
				·	<u></u>
					·

Form **990-PF** (2009)

923621 02-02-10

_	rm 990-l		GOOD CAUSE CHAR			0498957	Page 13
•	art A	• Exempt Organ		and transactions a	and Relationships With No	ncnantable	
1	Did ti		rectly engage in any of the followi	ing with any other organization	on described in section 501/c) of		res No
•	•	*	c)(3) organizations) or in section 5			-	
•			lation to a noncharitable exempt o		incutions.		
	(1) (· · · · · · ·	ation to a nonchantable exempt o	ngumzudon ot.		1a(1)	X
	• •	Other assets	**	•		1a(1)	X
	• •	r transactions	•	•		10(2)	
'			ble everent executation			1b(1)	x
		Sales of assets to a noncharita	oncharitable exempt organization			1b(2)	X
			• •	•		1b(3)	X
		Rental of facilities, equipment,		•			$\frac{x}{x}$
		Reimbursement arrangements	,	•	•	1b(4)	X
		Loans or loan guarantees	 amharahin ar fundraisina ealieitet	1000	••	1b(5)	X
			embership or fundraising solicitati		•	1b(6)	$\frac{x}{x}$
		-	ailing lists, other assets, or paid er		vario ab an the fair module value of the	. <u>1c </u>	
•		-			ways show the fair market value of the		15,
					ie in any transaction or sharing arrange	ement, snow in	
(2)	Line no	(b) Amount involved	other assets, or services received (c) Name of noncharitab		(4)		
(4)	Une no	(b) Amount myorveu	 	ne exempt organization	(d) Description of transfers, transacti	ons, and shanng arra	ngements
			N/A				
				· · · · ·			
_			 				
_		<u> </u>					
_					<u> </u>		
			<u> </u>				
_							
				·			
	ın sec		ctly affiliated with, or related to, on or than section 501(c)(3)) or in sec pedule		zations described	Yes	X No
	. 11 16	(a) Name of org		(b) Type of organization	(c) Description of i	elationship	
_		N/A		1			
						,	
						•	
					nents, and to the best of my knowledge and b	elief, it is true, correc	ţ
	and cor	inplete Declaration of preparer (oth	er than taxpayer or frouciary) is based or	on all information of which preparer	has any knowledge		
	l X	~7×4		18/29/10	Trustee		
9	S	gnature of onicer or trustee	· · · · · · · · · · · · · · · · · · ·	Date	Tritle		
Here		Preparer's	$\overline{}$		Date Check if	Preparer's identifyl	ng number
	r's ≥	signature	1	\ 7	self- employed ► □		
n	Paid epare se On	TENT	ESSIONAL BUSINE	ESS ADVISORS,		<u> </u>	
	Paid Preparer's Use Only	if self-employed), 1706			LINF		
	رية		TIFUL, UT 8401		Phone no 8	801-296-1	1060

Form **990-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

Employer identification number Name of the organization 46-0498957 THE GOOD CAUSE CHARITABLE FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ _ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Employer identification number

THE GOOD CAUSE CHARITABLE FOUNDATION

46-0498957

		 	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BRIAN & JANA WATTS CHARITABLE REMAINDER UNITRUST 977 S WIND RIVER WAY KAYSVILLE, UT 84037	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Omnocash Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(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)

Form **8868** (Rev. April 2009) Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Re	venue Service 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 are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the complete Part II unless you have already been granted an automatic 3-month extension on a previously	•	m 8868.	► X
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			•
A corpo Part I or	ration required to file Form 990-T and requesting an automatic 6-month extension - check this box and co ily	mplete		>
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request come tax returns	an exten	sion of time	
noted be (not auto you mus	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or (at submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic gov/efile and click on e-file for Charities & Nonprofits.	onically if consolida	(1) you want ited Form 99	the additional 0-T. Instead,
Type or print	Name of Exempt Organization	Empl	oyer identifi	cation number
•	THE GOOD CAUSE CHARITABLE FOUNDATION	4	6-04989	57
File by the due date for filing your	977 S WIND RIVER WAY			=-
return See instruction				
Check t	ype of return to be filed (file a separate application for each return):			
Fo	orm 990 Form 990-T (corporation) Form 990-T (sec. 401(a) or 408(a) trust) Form 990-EZ Form 990-T (trust other than above) Form 990-F (form 990-F) Form 1041-A Form Form Form Form Form Form 1041-A	5227 6069		
Telep If the	BRIAN J. WATTS books are in the care of ▶ 977 S WIND RIVER WAY - KAYSVILLE, UT 8 books hone No. ▶ 801-451-9200 FAX No. ▶ corganization does not have an office or place of business in the United States, check this box is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of a	this is foi	_	-
ıs	equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time of AUGUST 15 , 2010 , to file the exempt organization return for the organization named for the organization's return for: $ X \text{ calendar year } 2009 \text{ or } \\ 1 \text{ tax year beginning } \\ 2 \text{ and ending } \\ 3 \text{ and ending } \\ 4 and e$		The extensio	n
2 If	this tax year is for less than 12 months, check reason: Initial return Final return		Change in ac	counting period
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			0.
_	onrefundable credits. See instructions. this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	\$	
<u>ta</u>	x payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
	alance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			0
	ee instructions.	3c		0.
Caution	i. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and For	m 8879-l	EO for payme	ent instructions.
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form (3868 (Rev 4-2009)