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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 calendar year 2009, or tax year beginning . 2009, and ending Final return Initial return Initial Return of a former public charity G Check all that apply Address change Name change Amended return Employer identification number Use the THE STEVE YOUNG FAMILY FOUNDATION 87-0517242 IRS label Otherwise. 559 WEST 500 SOUTH В Telephone number (see the instructions) print BOUNTIFUL, UT 84010 or type. С If exemption application is pending, check here See Specific Instructions. n 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Н Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Accounting method X Cash Fair market value of all assets at end of year under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here 26,141 Part:I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in for charitable income income expenses per books columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) J. Tiller - 2 - 1 PAL Contributions, gifts, grants, etc, received (att sch) 1,21,000 4 9 . Ξ X if the foundn is not req to att Sch B Interest on savings and temporary 15 15 15 cash investments 547 547 547 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) **宣言是《图》本《张音** 33 -49,789 6a Net gain/(loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 医海水外的 经管理的 an out of other 129,519. **经现代的基础的** 0 Capital gain net income (from Part IV, line 2) Barrell Car 8 Net short-term capital gain Sec. 1375 10 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gress-profit/(less) (att-sch) Other income (att-sch) seifedule) ٠.,٠ . 562 1,562 Total. Add lines 1 through 11 ensalibri di officers diredibi il trustees O 13 Other employee salaries and wages 14 15 Pension plans employee t 16a Legal fees (attable the big) UT 2,332 2,332 2,332 **b** Accounting fees (attach sch) c Other prof fees (attach sch) INISTRAT OPERATING Interest 17 81 81 81 SEE STM 2 Taxes (attach schedule X see instr.) ---, Depreciation (attach ·, . sch) and depletion Occupancy Travel, conferences, and meetings 21 Printing and publications Other expenses (attach schedule) 1,402 1,402 SEE STATEMENT 1,402 Total operating and administrative 24 .815 815 3.815 expenses. Add lines 13 through 23 118,750 118. 750 25 Contributions, gifts, grants paid PART XV Total expenses and disbursements. 122,565 3,815 3,815 118,750. Add lines 24 and 25 Subtract line 26 from line 12: Ľ. -, 7 . a Excess of revenue over expenses -170,792 and disbursements Õ b Net investment income (if negative, enter 0-) 0 C Adjusted net income (if negative, enter -0) TEEA0504L 02/02/10

5

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

26,141

5

6

(a) List and describe	the kind(s) of property sold (e.g.,	real estate,	(b) How ac		(C) Date acquired (month day, year)	(d) Date sold (month, day year)
2-story brick warehous	ation	(month day, year)				
1a S-T CAP GAIN SEE AT		VARIOUS	VARIOUS			
b L-T CAP GAIN SEE A		VARIOUS	VARIOUS			
c TIME WARNER CABLE I	NC		P		4/27/09	4/27/09
d						
<u>e</u>		· · · · · · · · · · · · · · · · · · ·			<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a 37,169.			8,473.			-11,304.
b 92,348.		13	0,835.			-38,487.
c2.						2.
d						
e						
·	ing gain in column (h) and owned b				(I) Gains (Colu	
(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		g th:	gain minus column (k an -0-) <mark>or</mark> Losses (fr), but not less om column (h))
а				-		-11,304.
_ b						-38,487.
c			_			2.
d						
e						
2 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		-49,789.
3 Net short-term capital gain or (loss) as defined in sections 1222(5)	_				
, -	•					
if gain, also enter in Part I, line in Part I, line	e 8, column (c) (see the instructions) if (loss), enter -u-		3		-11,302.
Part₩₩ Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Inco	me	<u> </u>	
Was the foundation liable for the sec If 'Yes,' the foundation does not qual	ify under section 4940(e) Do not co	omplete this part			Yes	X No
	n each column for each year, see th		g any entr	ies_		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(col	(d) Distribution umn (b) divided	
2008	88,166.	23	9,525.			0.368087
2007	87,676.		5,859.			0.239644
2006	78,406.	38	7,520.			0.202328
2005	98,756.	47	6,454.	_		0.207273
2004	135,367.	53	6,641.			0.252249
9 Total of line 1 actions (A)				2		1 260501
2 Total of line 1, column (d)	e 5-year base period – divide the to	otal on line 2 by 5 or by the			-	1.269581
3 Average distribution ratio for the number of years the foundation	n has been in existence if less than	5 years		3		0.253916
4 Enter the net value of nonchar	table-use assets for 2009 from Part	X, line 5		4		78,243.
5 Multiply line 4 by line 3				5_		<u>19,867.</u>
6 Enter 1% of net investment inc	ome (1% of Part I line 27h)			6		
	55 (170 51 1 GIV 1, III 16 27 0)		Ì			10.003
7 Add lines 5 and 6						19,867.
8 Enter qualifying distributions from			1	8		118,750.
If line 8 is equal to or greater to Part VI instructions	han line 7, check the box in Part VI	, line 1b, and complete that	part using	ja 19	% tax rate See t	he

	1 990-PF (2009) THE STEVE YOUNG FAMILY FOUNDATION 87-051	1242			age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the i	instruc	tions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here	~	٠ ـ		•
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
k	Domestic foundations that meet the section 4940(e) requirements in Part V,	<u> </u>			0.
	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, column (b)	-	1		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	_		t	
	foundations only Others enter -0-)				0.
3	Add lines 1 and 2.	<u> </u>			<u>0.</u>
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-	<u> </u>			0.
6	Credits/Payments	1.0			٠
a	2009 estimated tax pmts and 2008 overpayment credited to 2009		. '		
Ŀ	Exempt foreign organizations — tax withheld at source 6b		, ,		<u>.</u>
C	Tax paid with application for extension of time to file (Form 8868)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			<u> </u>
C	Backup withholding erroneously withheld	,, -	21 11	- <u>- </u>	
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>0.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax				
Par	t 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			Yes	No
	participate or intervene in any political campaign?		1 a		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 1a or 1b, attach a detailed description of the activities and copies of any materials publish or distributed by the foundation in connection with the activities	ed	in the second	ļ !	37
c	Did the foundation file Form 1120-POL for this year?		1 c		X
c	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	_	31		-
	(1) On the foundation \$\ 0. (2) On foundation managers \$\ \\$	0.	37	27	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • \$ 0.		4	_ : ;	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ਕੀਨ : 2	, "	X
_	If 'Yes,' attach a detailed description of the activities		1.5	\$¢ ;{``4	A
_			3		7.
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
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N	/A
	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/	1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			- : .	.[
	By language in the governing instrument, or		٠٠,٠٠		, '
				٠.	l
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflic with the state law remain in the governing instrument? 	I	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	
	Enter the states to which the foundation reports or with which it is registered (see the instructions)				· ·
	N/A		[· '		/ " "
	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 General Instruction G ⁷ If 'No,' attach explanation		8ь	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV)?	2(j)(5) rt XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name	:S			<u> </u>
	and addresses		10		(2000)
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	n 990-PF (2009) THE STEVE YOUNG FAMILY FOUNDATION	87-	051724	2	Р	age
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		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	on applica	tion?	13	X	
	Website address N/A			===		
14	The books are in care of ► HANSEN, BRADSHAW, MALMROSE Telephoid ocated at ► 559 WEST 500 SOUTH. BOUNTTFUL, UT		801-2	96-0	200	
15			10			<u> </u>
, ,	and enter the amount of tax-exempt interest received or accrued during the year	-	15	IV/ F	•	N/A
Par	t 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.			7.	Yes	No
1 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	7,		
	(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		e (* 1	1.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Yes	X No		' ,	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	XNo			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the			371.3	- ,	. 1 12
	foundation agreed to make a grant to or to employ the official for a period after termination	Yes	X No	- 4	1.54	-
	of government service, if terminating within 90 days)	ш	V 140		,	٠, ۲,
t	o 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 instruction	ions)?		1 b	N	/A_
	Organizations relying on a current notice regarding disaster assistance check here	•		77."	,	
Ć	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 2009?	,		1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				r a st	
ā	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	°('à)		•
	If 'Yes,' list the years ► 20 , 20 , 20 , 20					75-
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 494	2(a)(2)				* · · ·
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942	(a)(2) to		2 b	-`` "	/ N
	all years listed, answer 'No' and attach statement — see the instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	hore		20	IN	/ A
`	► 20, 20, 20	Here		, ,		``````````````````````````````````````
2-				. :]	. *
32	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		,	, .
Ł	of 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation	า		,,		٠. ١
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approv by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or	ed		, , ,	,	; .
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4/20, to				AT	** A. / 70
	determine if the foundation had excess business holdings in 2009)			3 b	N	/ A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		Х
Ł	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			,		
-	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?			4b		X
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Form 990-PF (2009) THE STEVE YOUNG FA	AMILY FOUNDATIO	N	87-05	17242 Page 6
Part VII-B- Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued)	
5a During the year did the foundation pay or incu	r any amount to			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	1 4955), or to carry	Yes X	No -
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No State of the st
(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 instr	rganization described uctions)	Yes X	No
(5) Provide for any purpose other than religio educational purposes, or for the preventio	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 except ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ _	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible 'Yes,' attach the statement required by Regulary 1.	sibility for the grant?		N/A Yes	No Garage
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premiums	Yes X	No
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal benef		6b X
7a At any time during the tax year, was the found				No The state of th
b If yes, did the foundation receive any proceed				7b N/A
Part VIII: Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	imployees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
J. STEVEN YOUNG	TRUSTEE	0.	0.	0.
559 WEST 500 SOUTH BOUNTIFUL, UT 84010	0			
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1 – see ir	structions). If none, e	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
			<u> </u>	
Total number of other employees paid over \$50,000		07/05/00	-	0 Form 990-PF (2009)
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Partiville Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,	
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) Compensa	ation_
NONE		
		_
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A: Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	
1 N/A		
2		
<u> </u>		
3		
4		
Part IX-B. Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2 Amount	
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.
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Form 990-PF (2009) THE STEVE YOUNG FAMILY FOUNDATION

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Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foi	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		41 000
a Average monthly fair market value of securities	1 a	41,922.
b Average of monthly cash balances	1 b	37,513.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	79,435.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	<u>.</u>	
2 Acquisition indebtedness applicable to line 1 assets.	2	0.
3 Subtract line 2 from line 1d	3	79,435.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,192.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	78,243.
6 Minimum investment return. Enter 5% of line 5	6	3,912.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► and do not complete this p		ndations
1 Minimum investment return from Part X, line 6	1	3,912.
2a Tax on investment income for 2009 from Part VI, line 5		
b Income tax for 2009 (This does not include the tax from Part VI) 2b	7	
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	3,912.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	3,912.
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	3,912.
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	118,750.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	118,750.
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	118,750.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who	ether the fou	indation

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	2009
Distributable amount for 2009 from Part XI, line 7		(1) · (1)	j),	3,912.
2 Undistributed income, if any, as of the end of 2009	Maria Caraca Car	1914 Jan 19 19 19 19 19 19 19 19 19 19 19 19 19		
a Enter amount for 2008 only	in minimum in the state of the	ي	0.	-
b Total for prior years 20, 20, 20	And Market St.	0.	<i>*</i>	***
3 Excess distributions carryover, if any, to 2009	建一种工作	A LANGE OF		
a From 2004 108, 891.	the property of	والمراجع والمعارض والمتعارض		The state of the state of
b From 2005 75, 769.			The state of the s	
c From 2006 59, 618.				
d From 2007 70,631.				
e From 2008 76, 298.	,			٠, ۥ٠, ٠٠,
f Total of lines 3a through e	391,207.		* '	
4 Qualifying distributions for 2009 from Part	·	<i>'</i>		
XII, line 4 ► \$ 118,750.	, ਝੌ	'	0.	
a Applied to 2008, but not more than line 2a				
 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 2009 distributable amount.	:	-	,	3,912.
e Remaining amount distributed out of corpus	114,838.	-		
5 Excess distributions carryover applied to 2009	0.		·	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:			The state of the s	African State of Stat
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	506,045.	12 E	The state of the s	The state of the state of the
b Prior years' undistributed income Subtract line 4b from line 2b	THE RESERVE THE PROPERTY OF THE PARTY OF THE	0.		4 40
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 instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2010	,,	, ,	N	0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)		1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(see instructions)	0.	and have a market pro-	1 - 1 - 1 - 1	·
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	108,891.	reduction of the second		, _
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	397,154.	The second second	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
10 Analysis of line 9			,	
a Excess from 2005 75,769.	` , ` ՝ ՝ , ՝ , , , , , , , , , , , , ,			
b Excess from 2006 59, 618.	1	7 1	1 , , , , , , , , , , , , , , , , , , ,	,
c Excess from 2007 70,631.		4 - 4		
d Excess from 2008 76, 298.		1 3 1 1 m - 7 18 1	1 4 - 1 4 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	, ,
e Excess from 2009 114,838	\$ # S	· ' '	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Form 990-PF (2009)

Form 990-PF (2009) THE STEVE YOUNG				87-0517242		
Part XIV- Private Operating Foundation					N/A	
1 a If the foundation has received a ruling or one is effective for 2009, enter the date of the	ruling			_	4942(j)(5)	
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or						
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	#1.0000	Prior 3 years	4 5 0005	.	
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(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.					ı	
a 'Assets' alternative test — enter						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c 'Support' alternative test — enter						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)	·					
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Part XV Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or mor	e in	
assets at any time during th		structions.)				
a List any managers of the foundation who have none in they have NONE	ave contributed mo	ore than 2% of the t than \$5,000) (See	otal contributions re section 507(d)(2))	ceived by the found	lation before the	
b List any managers of the foundation who c	own 10% or more o	f the stock of a corp	poration (or an equa	Ily large portion of t	he ownership of	
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater intere	est ·		·	
2 Information Regarding Contribution, Gran	t Citt Loop Saha	Jarohin etc Progra				
Check here I If the foundation only makes	nakes contributions	to preselected char	ritable organizations			
a The name, address, and telephone number	r of the parcan to:	whom applications a	hould be addressed		** ** <u></u>	
a The name, address, and telephone number	r or the person to v	whom applications s	illould be addressed			
SEE STATEMENT 4						
b The form in which applications should be s	submitted and infor	mation and materia	ls they should include	le		
SEE STATEMENT FOR LINE 2A						
c Any submission deadlines						
SEE STATEMENT FOR LINE 2A						
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charital	ble fields, kinds of in	nstitutions, or other	factors	
SEE STATEMENT FOR LINE 2A						
BAA	TE	EA0310L 07/06/09		F	orm 990-PF (2009)	

Page 11

Part XV Supplementary Information (continued)	una Pauman		
3 Grants and Contributions Paid During the Y	If respect to an industrial	ure Paymen	•	
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
	substantial contributor	recipient		
Name and address (home or business) a Paid during the year SEE STATEMENT 5	substantial contributor	recipient		
Total			<u>► 3a</u>	118,750.
b Approved for future payment				
Total			► 3b	

	m 990-PF (2009) THE STEVE YOUNG F		DATION		87-05172	42 Page 12
Par	t XVI-A Analysis of Income-Produc	ing Activities				
Ente	er gross amounts unless otherwise indicated	Unrelati	ed business income	Excluded	by section 512, 513, or 514	
	Program service revenue	(a) Business code	(b) Amount	Exclusion code	(d) Amount	(e) Related or exempt function income (see the instructions)
	b					
(с					
	d					
	e			11	<u> </u>	
f	f					
ç	g Fees and contracts from government agencie	es		1		
2	Membership dues and assessments			 _		
3	Interest on savings and temporary cash investments	ļ <u>.</u>		14	15.	
4	Dividends and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	1,547.	
5	Net rental income or (loss) from real estate			1 / 1	<u></u>	and the second second
	a Debt-financed property			 		
_	b Not debt-financed property			╅╼╼┷		
6 7	Net rental income or (loss) from personal property Other investment income			 		
8	Gain or (loss) from sales of assets other than inventory			+		-49,789.
9	Net income or (loss) from special events.			1		15, 705.
10	Gross profit or (loss) from sales of inventory			1		
11	Other revenue	The safe And the safe and	BATTAN TON	1 1	2" 24 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the state of the
a	a					
b	b					
C	c					
d						
е	B			 		
	Subtotal Add columns (b), (d), and (e)	- '		<u> </u>	1,562.	-49,789.
	Total. Add line 12, columns (b), (d), and (e)				13	-48,227.
(See	e worksheet in the instructions for line 13 to ver	rify calculations)				
Par	t XVI-B Relationship of Activities to	the Accompl	ishment of Exemp	t Purpos	ses	
	Explain below how each activity for whaccomplishment of the foundation's explain N/A	ich income is repr empt purposes (o	orted in column (e) of ther than by providing	Part XVI-A funds for s	contributed important such purposes) (See the	y to the ne instructions)

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

									İ	Yes	No
1	descr	ne organization directly libed in section 501(c) on ling to political organization	of the Code (o	engage in any of the other than section !	ne following with 501(c)(3) organ	n any othe izations) o	r organizatio r in section !	n 527,	·	103	,
		fers from the reporting		a noncharitable e	xempt organiza	tion of					
	(1) C	ash							1 a (1)		Х
	(2) C	Other assets							1 a (2)		X
	b Other	transactions.								٠,	
	(1) S	ales of assets to a non	ncharitable exe	empt organization					1 b (1)		X
	(2) P	urchases of assets fror	m a noncharita	able exempt organ	ization				1 b (2)	L	X_
	(3) R	tental of facilities, equip	oment, or othe	er assets					1 b (3)		X
	(4) R	leimbursement arrange	ments					•	1 b (4)		X
	(5) L	oans or loan guarantee	es						1 b (5)		X
		erformance of services							1 b (6)		X
	c Shari	ng of facilities, equipme	ent, mailing lis	sts, other assets, o	or paid employe	es			1 c		X
	the a	answer to any of the a oods, other assets, or s ransaction or sharing a	services given	by the reporting for	oundation If the	e foundatio	n received le	ess than fair mar	ket value in	ue of	
•	Line no	(b) Amount involved	(c) Name	of noncharitable exemp	t organization	(d) De	scription of tran	isfers, transactions, a	nd sharing arrai	<u>igement</u>	ts
1/	<u>'A</u>										
_											
_							<u> </u>				
									<u></u>		
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						 -					
		<u> </u>									
											
					-						
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			 					·			
			 								
			·		· 						
			<u> </u>					· - ·			
_			 								
2	descr	foundation directly or ibed in section 501(c) on s,' complete the following	of the Code (o	ated with, or relate ther than section	ed to, one or m 501(c)(3)) or in	ore tax-exe section 52	empt organiz 7?	ations	Yes	. X	No
		(a) Name of organizati		(b) Type	of organization		(c) Description of r	elationship		
N/	<u>'A</u>										
_											
											
_											
				<u></u>							
	complete	alties of perjury, I declare that Declaration of greparer (other, the property of the perjury of	I have examined the than taxpayer or find the taxpayer or find the taxpayer or find the taxpayer of taxpayer or find taxpayer	nis return, including accorduciary) is based on all in	ompanying schedules information of which	and statement preparer has a	nts, and to the beany knowledge	Title	lee.	e, corre	ct, and
	Paid Pre-	Preparer's signature	Henn	CIA		Date NOV	1 2 2010	Check if (S	reparer's Identify See Signature in		
	parer's	Firm's name (or HANS	EN, BRADS	SHAW, MALMRO	SE & ERIC	KSON, P	.C.	EIN N/A			
	Use Only		WEST 500	SOUTH							
		address, and ZIP code BOUN	TIFUL, UI	84010				Phone no ► (801) 296	-02C	0
βA	Α								Form 99	0-PF	(2009)

2009	FEDERAL STATEMENTS	PAGE 1
CLIENT 001	THE STEVE YOUNG FAMILY FOUNDATION	87-0517242
11/09/10		02 28PM
STATEMENT 1 FORM 990-PF, PART I, LINE 16E ACCOUNTING FEES	3	
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME	ME PURPOSES
ACCOUNTING FEES	TOTAL $\frac{$}{2,332}$. $\frac{$}{2,332}$. $\frac{$}{2,332}$. $\frac{$}{2,332}$. $\frac{$}{2,332}$.	32. 32. \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME	ME_ PURPOSES
FEDERAL TAXES FOREIGN TAXES PAID	2626	55. 26. 31. \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTE PER BOOKS INCOME NET INCOME	

TOTAL \$

100. \$

1,302. 1,402.

100. \$ 1,302. 1,402. \$

100.

1,302. 1,402.

0.

STATEMENT 4 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:	
NAME:	N/A
CARE OF:	
STREET ADDRESS:	N/A
CITY, STATE, ZIP CODE:	N/A
TELEPHONE:	N/A
FORM AND CONTENT:	N/A
SUBMISSION DEADLINES:	N/A
RESTRICTIONS ON AWARDS:	N/A

BANK FEES PORTFOLIO MANANGEMENT FEES

2009	FEDERAL STA	TEMENTS			PAGE 2
CLIENT 001	THE STEVE YOUNG FAM	ILY FOUNDAT	ION		87-0517242
11/09/10				-	02 28PM
STATEMENT 5 FORM 990-PF, PART XV, LINE 3/	<u> </u>				
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT

NONE

NONE

NONE

NONE

BAY AREA SPORTS HALL OF

201 SPEAR STREET, SUITE

SAN FRANCISCO, CA 94105

NFL PLAY 60 PO BOX 27279 NEW YORK, NY 10087

GAZELAM FOUNDATION

LIAHONA CHILDREN'S

NUTRITION & EDUCATION 274 NORTH 550 EAST LINDON, UT 84042

360 SUMAC LN PROVO, UT 84604

FAME

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2,000. TOTAL \$ 118,750.

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CHARITY

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5,000.

5,000.

100,000.



STEVEN YOUNG FAMILY FOUNDATION

2009 CAPITAL GAIN AND LOSS TRANSACTIONS

Security Description	Ouantity	Date Acquired Cover of Short	Date Liquidated Amortization/Accretion Short Sale Year-to-Date Life-to-Date	Sales Price	Cost Basis	Gain or (Loss)
SHOPT TEPM CAPITAL GAINS						
AIR PRODUCTS&CHEM	10.0000	03/11/09 03/11/09 Security Subsortal	09/18/09 09/18/09	1,078.55 800 18 1.878.73	892.79 496.00 1.388.79	185.76 304.18 489.94
BECTON DICKINSON CO	14.0000	60/80/90	09/18/09	979.13	940.49	38.64
DONALDSON CO INC	43.0000	11/06/08	09/18/09	1,548.39	1,434 21	114.18
KIMBERLY CLARK	57.0000 34.0000	02/17/09 02/17/09 Security Subtotal	04/02/09 09/18/09	2,824,90 1,969,57 4,794.47	2,775.10 1,655.33 4,430.43	49.80 314.24 364.04
SMITH-NPHW PLC SPADR NEW	25.0000	10/30/08	09/18/09	1,140.97	1,119.88	21.09
STAPLES INC	40.0000	03/09/09 03/09/09 Security Subtotal	04/02/09 09/18/09	792 39 531.36 1,325.75	583 99 335 81 919.80	208.40 197 55 40 5.95
TIME WARNER INC SHS	30.0000	10,09/08	09/18/09	683 18	731 57	151.61
TIME WARNER CABLE INC	7.0000	10/09/08	09/18/09	292.80	224.97	67.83



;	:	2009 CAPITAL Date Acquired	2009 CAPITAL GAIN AND LOSS TRANSACTIONS Date Acquired Date Liquidated Amortization/Accretion	S TRANSACTIONS Amortization/Accretion		9	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Security Description	Quantity	-11	Short Sale Year-to	Year-to-Date Life-to-Date	Sales Price	COSC BASIS	ज्यात क्र 1. (५५५५)
TELEFONICA SA SPAIN ADR	15.0000	04/28/09	09/18/09		1,238.52	867.51	10.17.6
		Short Term Capital Gains	al Gains		14,081.94	12,057.65	2,024.29
SHORT TERM CAPITAL LOSSES							
BAXTER INTERNIL INC	12.0000	03/77/08	01/14/09		645.59	65.699	(24 00)
DONALDSON CO INC	24.0000 72.0000	11/06/08 11/06/08 Security Subtobal	01/14/09 04/02/09		743.27 2,163.58 2,906.85	800 48 2,401 45 3,201,93	(57 21) (237 87) (295,08)
ENBRIDGE INC COM	21.0000 62.0000	06/03/08 06/03/08 Security Subtota	01/14/09 04/02/09		670.31 1,846.96 2,517.27	959.14 2,831.77 3,790.91	(288.83) (984.81) (1,273.64)
HALLIBURTON COMPANY	23.0000	03/26/08	01/14/09		397.66	886.10	(488 44)
HEWLETT PACKARD CO DEL	24.0000 71.0000	05/06/08 05/06/08 Security Subtotal	01/14/09 04/02/09		840.71 2,475.75 3,316.46	1,165.95 3,449.28 4,615.23	(325 24) (973 53] (1,298.77)
INTL BUSINESS MACHINES	7.0000	07/23/08 07/23/08 Security Subtota	01/14/09 04/02/09		576.93 1,934.75 2,511.68	909.32 2.468.15 3,377.47	(332.39) (533.40) (865.79)
STARWOOD HOTELS AND	20.0000 93.0000	05/06/08 05/06/08 Security Subtota	01/14/09 03/09/09		338.39 899.91 1,238.30	1,084,32 5,042,11 6,126,43	(745.93) (4,142.20) (4,888.13)
SMITH-NPHW PLC SPADR NEW	15.0000 43.0000	10/30/08 10/30/08 Security Subtotal	01/14/09 04/02/09		502.34 1,431.89 1,934.23	671.92 1,926.17 2,598.09	(169.58) (494.28) (663.86)



		2009 CAPITAL	2009 CAPITAL GAIN AND LOSS TRANSACTIONS			
Security Description	Quantity	Cover of Short	Short Sale Year-to-Date Life-to-Date	Sales Price	Cost Basis	Gain or (Loss)
TIME WARNER INC NEW	49.0000	80/60/01	01/14/09	453.73	529.52	(75.79)
TIME WARNER INC SHS	50.0000	10/09/08	04/02/09	1,103.49	1,219.27	(115 78)
TIME WARNER CABLE INC	13.0000	10/09/08	04/02/09	334.74	417.80	(83 06)
TORCHMARK CORP COM	17 0000 49.0000	04/29/08 04/29/08 Security Subtotal	01/14/09 04/02/09	650.75 1,346.51 1,997.26	1,106,31 3,188,78 4,295.09	(455.56) (1,842.27) (2,297.83)
WASTE MANAGEMENT INC NEW	33.0000 101.0000	04/16/08 04/16/08 Security Subtotal	01/14/09 04/02/09	1,035.86 2,693.70 3,729.56	1,154.53 3,533.51 4,688.02	(118 65) (839.81) (958.46)
		Short Term Capital Losses	ral Losses	23,086.82	36,415.45	(13,328.63)

LONG TERM CAPITAL GAINS						
FPL GROUP INC	10.0000	03/06/03	01/14/09	471.69	285.99	185.70
	28.0000	03/06/03	04/02/09	1,454.87	800.77	654.10
	16.0000	03/06/03	60/81/60	880.14	457.59	422 55
		Security Subtotal		2,806.70	1,544.35	1,262.35
STILL STILLS	24.0000	01/07/08	01/14/09	1,404.47	1,359.25	45.22
	42,0000	01/07/08	09/18/09	2,519.52	2,378 70	140.82
		Security Subtotal		3,923.99	3,737.95	186.04
SAP AG SHS	37.0000	01/07/08	60/18/09	1,654.02	1.795.25	58.77
		Long Term Capital Gams	Gams	8,584.71	7,077.55	1,507.16



STEVEN YOUNG FAMILY FOUNDATION

2009 ANNUAL STATEMENT SUMMARY

	Sales Price Cost Basis Gain or (Loss)
2009 CAPITAL GAIN AND LOSS TRANSACTIONS	Date Acquired Date Liquidated Amortization/Accretion Scription Year-to-Date Life-to-Date
	Security De

LONG TERM CAPITAL LOSSES AVON PROD INC	34.0000 103.0000 62.0000	01/07/08 01/07/08 01/07/08 Security Subtotal	01744/09 04/02/09 09/18/09	711 61 2,208.35 1,988.91 4,908.87	1,322.17 4,005,42 2,411.04 7,738.63	(610 56) (1.797.07) (422.13) (2,829.76)
BANK NEW YORK MELLON	28.0000 134.0000	01/07/08 01/07/08 Security Subtotal	01/14/09	665.55 3,838.94 4,505,49	1,350.14 6,461.41 7,811.55	(684.59) (2,621.47) (3,306.06)
BAXTER INTERNTL INC	34.0000	03/17/08 03/17/08 Security Subtotal	04/02/09	1,730.59 940.17 2,670.76	1,897.20 7,116.01 3,013.21	(166.61) (175.84) (342.45)
DU PONT E I DE NEMOURS	16.0000 74.0000	01/07/08 01/07/08 Security Subtotal	01/14/09	387.51 1,349.11 1,736.62	688.48 3,184.22 3,872.70	(300.97) (1,835.11) (2,136.08)
ENBRIDGE INC COM	37.0000	90/603/08	09/18/09	1,393.75	1,689.93	(296.18)
GENERAL MILLS	71.0000	01,07/08	04/02/09	3,667.83	4,021.13	(353 30)
HALLIBURTON COMPANY	68.0000	03/26/08 03/26/08 Security Subtotal	04/02/09 09/18/09	1,121.31	2,519.78 1,541.05 4,160.83	(1.498.47) (428.68) (1,927.15)
HONEYWELL INTL INC DEL	23.0000 70.0000 7.0000 34.0000	03/20/07 03/20/07 03/20/07 01/07/08 Security Subtotal	01/14/09 04/02/09 09/18/09 09/18/09	735.53 2,162.28 281.67 1,368.13 4,547.61	1,081,08 3,290,24 3290,24 1,949,72 6,650.07	(345.55) (1,127.96) (47.36) (581.59) (2,102.46)
HEWLETT PACKARD CO DEL	42 0000	05/06/08	09/18/09	1,949.17	2,040.43	(91.26)



		2009 CAPITAL Date Acquired	GAIN AND L	OSS TRANSAC			
Security Description	Ovantity	Cover of Short	Short Sale	Year-to-Date Life-to-Date	Sales Price	Cost Basis	(Sain or (Loss)
INTL BUSINESS MACHINES	10.0000	07/23/08	09/18/09		1,223.07	1,299.04	(75.97)
MCKESSON CORPORATION COM	21.0000 63.0000 37.0000	01/07/08 01/07/08 01/07/08 Security Subtotal	01/14/09 04/02/09 09/18/09		871.70 2,226.40 2,137.81 5,235.91	1,344.46 4,033 41 2,368 83 7,746.70	(472 74) (1.807 01) (231 02) (27.10.72)
MCDONALDS CORP COM	18.0000 52.0000 31.0000	01/07/08 01/07/08 01/07/08 Secunty Subtotal	01/14/09 04/02/09 09/18/09		1,018.25 2,957.74 1,750.53 5,726.52	1,037.59 2,997.50 1,786.98 5,822.07	(19.34) (39.76) (36.45) (95.55)
NOKIA CORP SPON ADR	38.0000 116.0000 69.0000	01/07/08 01/07/08 01/07/08 Security Subtotal	01/14/09 04/02/09 09/18/09		517 93 1,576 73 1,085.34 3,180.00	1,325,43 4,046.08 2,496.72 7,778.23	(807.50) (2,469.35) (1,321.38) (4,598.23)
PPL CORPORATION	13.0000 38.0000 22.0000	01/07/08 01/07/08 01/07/08 Security Subtota	01/14/09 04/02/09 09/18/09		398 05 1,117.57 675.60 2,191.22	680.64 1,989.57 1,151.86 3,822.07	(282 59) (872.00) (476.26) (1,630.85)
PEPSICO INC	17.0000 52.0000 31.0000	01/07/08 01/07/08 01/07/08 Security Subtota	01/14/09 04/02/09 09/18/09		860 36 2,767.94 1,848.48 5,476.78	3,312.12 4,013.54 2,392.70 7,718.36	(451 76) (1,245.60) (544.22) (2,241.58)
PROCTER & GAMBLE CO	18.0000 88.0000	01/07/08 01/07/08 Security Subtota	01/14/09 02/17/09		1,040.39 4,410.08 5,450.47	1,303.64 6,373.38 7,677.02	(263.25) (1.963.30) (2,226.55)
SAP AKGSLTT SPONSORD ADR	21.0000 62.0000	01/07/08 01/07/08 Security Subtota	01/14/09 04/02/09		713.78 2,324.98 3,038.76	1,018.92 3,008.24 4,027.16	(305.14) (683.26) (988.40)



	2009 CAPITA	L GAIN AND L	2009 CAPITAL GAIN AND LOSS TRANSACTIONS	
٤	Date Acquired Cover of Short	Date Acquired Date Liquidated Cover of Short Short Sale	Date Acquired Date Liquidated Amortization/Accretion Cover of Short Short Sale Year-to-Date Life-to-Date	Sales
g	01/07/08	01/14/09		
000	01/07/08	04/05/09		<u>,</u>
900	01/02/08	09/18/09		1
				ě

Security Description	Quantity	Date Acquired Cover of Short	Date Liquidated Short Sale	Amortization/Accretion Year-to-Date Life-to-Da	a/Accretion Life-to-Date	Sales Price	Cost Basis	Gain or (Loss)
SCHLUMBERGER LTD	14,0000 42,0000 24,0000	01/07/08 01/07/08 01/07/08 Security Subtota	01/14/09 04/02/09 09/18/09			568.81 1,879.06 1,483.40 3,931.27	1,355.05 4,065.16 2,322.95 7,743.16	(786.24) (2,186.10) (839.55) (3,811.89)
TORCHMARK CORP COM	29.0000	04/29/08	09/18/09			1,331.94	1,887.24	(555.30)
UNITED TECHS CORP COM	18.0000 53 0000 32.0000	01/07/08 01/07/08 01/07/08 Security Subtota	01/14/09 04/02/09 09/18/09			890.99 2,448.05 2,017.87 5,356.91	1,338.07 3,939.87 2,378.80 7,656.74	(447.08) (1,491.82) (360.93) (2,299.83)
VODAFONE GROUP PLC NEW	27.0000 82.0000 49.0000	01/07/08 01/07/08 01/07/08 Security Subtotal	01/14/09 04/02/09 04/26/09			530.27 1,569.47 884.79 2,984.53	994.37 3 019.94 1,804 60 5,818.91	(464.10) (1,450.47) (919.81) (2,834.38)
WADDELL & REED FINL A	31.0000 92.0000 55.0000	01/07/08 01/07/08 01/07/08 Security Subtotal	01/14/09 04/02/09 09/18/09			437.09 1,769.15 1,544.91 3,751.15	1,023 00 3,036.00 1,815.01 5,874.01	(1,266.85) (1,266.85) (270.10) (2,122.86)
WASTE MANAGEMENT INC NEW	60.0000	04/16/08	09/18/09			1,811.35	2,099.12	(77.782)
WYETH	23 0000 1 <i>0</i> 7.0000	01/07/08 01/07/08 Security Subtota	01/14/09 04/01/09			864.79 4,595.34 5,460.13	1,024.17 4,764.64 5,788.81	(159.38) (169.30) (328.68)
		Long Term Capital Losses	lal Losses			83,763.79	123,757.12	(39,993.33)

OMB NO	1040-0150
For IRS	tice Only

Form 2848	1	Power of Attorney and Declaration of Representative			·	NO 1343	
(Rev June 2008)	and				For IRS Use Only		
Department of the Treasury Internal Revenue Service	 	► Type or print. ► See the separate instructions.			Received by		
			Name Telephone				
Partile Power of Atte	representation before the IRS.		Function				
		and date this form on pag			Date -		
Taxpayer name(s) and add			Social security number(s)	Employ	yer identifi	cation	number
(c)							
				87-05	517242		
THE STEVE YOUNG	FAMILY FOUNDATION	าห		Plan nu	ımber (ıf a	pplicat	ole)
559 WEST 500 SOU		JN .	Daytime telephone number		•		
BOUNTIFUL, UT 840			L	<u> </u>			
hereby appoint(s) the follow	wing representative(s) as	s attorney(s)-ın-fact.					
2 Representative(s) mu	ist sign and date this for	m on page 2, Part II					
Name and address			<u> </u>		1596R		
E. LYNN HANSEN			Telephone No _8		~		 _
559 WEST 500 SOU			_ _	(801) 296-1218			
BOUNTIFUL, UT 840	010		Check if new: Address	Telepho	ne No	Fax	No
Name and address			CAF No				
			Telephone No				. .
			Fax No			<u>-</u> -	-
	 		Check if new: Address	Telepho	ne No	Fax	No
Name and address			CAF No _				
			Telephone No _				· -
			Fax No.			1	
to represent the taxpayer(s) hefers the Internal Po	uppus Carupa for the follow	Check if new Address	Telepho	ne No	Fax	140
to represent the taxpayer(s	b) before the internal Rev	vertue Service for the follow	ring tax matters.				
3 Tax matters							
Type of Tax (Income, En	informent Excise etc)	Tay Fo	orm Number	,	Year(s) or	Period	(e)
or Civil Penalty (see the	instructions for line 3)	(1040, 941, 720, etc)		(see the instructions for line 3)			
INCOME		990 PF		2008 2009 2010			
				2011			
				1 2 2 2 2			
		<u></u>		<u> </u>			
4 Specific use not reco	orded on Centralized Au	thorization File (CAF). If the	e power of attorney is for a spe	cific use	not record	ded	
on CAF, check this be	ox See the instructions	for Line 4. Specific Uses N	ot Recorded on CAF				
5 Acts authorized. The	representatives are auth	horized to receive and inspe	ect confidential tax information	and to p	erform any	y and a	ıll acts
that I (we) can perfor	m with respect to the tax	x matters described on line	3, for example, the authority to refund checks (see line 6 belo	sign an	y agreeme	ents, co	onsents,
representative or add	additional representativ	es, the power to sign certa-	in returns, or the power to exec	cute a re	quest for d	lisclosi	ire of tax
returns or return info	rmation to a third party	See the line 5 instructions	for more information				
Exceptions. An unen	rolled return preparer ca	innot sign any document for	r a taxpayer and may only repr	esent tax	payers in	limited	roudod
in section 10 3(d) of 7	Treasury Department Cir	cular No 230 (Circular 230)	led actuary may only represent) An enrolled retirement plan a	administr	ator may o	only rep	resent
taxpavers to the exte	nt provided in section 10) 3(e) of Circular 230. See t	he line 5 instructions for restrict (for example, they may only p	ctions on	tax matter	rs partr	ners In
another practitioner)	ent practitioners (levels	n and it administry is infilled	tion example, they may only p	active u	nuci lile St	apei viz	וט ווטו
List any specific addi	tions or deletions to the	acts otherwise authorized in	n this power of attorney:				
- '							
							. .
C. Develop () ()	to the second to the		- O	000000	CACH		
N Receipt of refund chec	KS. If VALL WANT TO AUTHORIZE	a representative named on lit	ne 2 in receive. BUT NOT TO END!	ひれろと ひだ	LASH, [P]	ILIU	

Name of representative to receive refund check(s)

checks, initial here _____ and list the name of that representative below

Form 2848 (Rev 6-2008)	ਸਮਸ	CTEVE	VOUNC	PAMTIV	FOUNDATION
rorm 2848 (Rev 6-2008)	TUL	DIEAE	IUUNG	LWMTTI	LOONDATION

UTAH

87-0517242

Page 2

						
7 Notices and com representative lis		notices and other written communi	cations will be sent to you and a copy	to the first		
•	•	ative listed to receive a copy of no munications sent to your represen	tices and communications, check this	box		
8 Retention/revoca of attorney on file you do not want	ation of prior power(s) of the with the Internal Reverse to revoke a prior power	of attorney. The filing of this powe nue Service for the same tax matt of attorney, check here	of attorney automatically revokes all ers and years or periods covered by t	earlier power(s) his document If		
YOU MUST ATT	ACH A COPY OF ANY F	POWER OF ATTORNEY YOU WAN	T TO REMAIN IN EFFECT.			
otherwise, see the or trustee on bel	ne instructions If signed half of the taxpayer, I ce	I by a corporate officer, partner, g ertify that I have the authority to e	pand and wife must sign if joint repre uardian, tax matters partner, executor recute this form on behalf of the taxp	receiver, administrator.		
► IF NOT SIGNI	ED AND DATED, THIS P	OWER OF ATTORNEY WILL BE F	RETURNED			
/ (X-T	MANNI D		4/29/09 T	rustee		
~	Signatur		t-pt	Title (if applicable)		
()			•			
J. STEVEN	YOUNG		THE STEVE YOUNG FAMILY	FOUNDATION		
	Print Name	Pin Number	Print name of taxpayer from line			
		,				
	Signatur	e	Date	Title (if applicable)		
	Print Name	Pin Number				
Partill Declaration	on of Representativ	/e				
Caution: Students with (levels k and l), see the	n a special order to repr ne instructions for Part I	resent taxpayers in qualified Low I I	ncome Taxpayer Clinics or the Studer	nt Tax Clinic Program		
Under penalties of per	jury, I declare that					
 I am not currer 	ntly under suspension o	r disbarment from practice before	the Internal Revenue Service,			
 I am aware of of attorneys, co 	regulations contained in ertified public accountar	Circular 230 (31 CFR, Part 10), a nts, enrolled agents, enrolled actua	s amended, concerning the practice aries, and others;			
 I am authorize 	d to represent the taxpa	yer(s) identified in Part I for the ta	ax matter(s) specified there; and			
I am one of the	e following:					
a Attorney — a	a member in good stand	ling of the bar of the highest court	of the jurisdiction shown below			
b Certified Public Accountant — duly qualified to practice as a certified public accountant in the jurisdiction shown below						
c Enrolled Age	ent — enrolled as an age	ent under the requirements of Circ	ular 230			
d Officer — a	oona fide officer of the t	axpayer's organization				
e Full-Time En	nployee – a full-time er	mployee of the taxpayer				
f Family Meml	per — a member of the	taxpayer's immediate family (for e	example, spouse, parent, child, brothe	r, or sister)		
g Enrolled Acti practice befo	uary — enrolled as an a ore the Internal Revenue	ctuary by the Joint Board for the less Service is limited by section 10 3	Enrollment of Actuaries under 29 U S. (d) of Circular 230).	C 1242 (the authority to		
10 7(c)(1)(vii	Return Preparer — the a i) You must have preparer arer in the instructions	uthority to practice before the Inte ared the return in question and the	rnal Revenue Service is limited by Ci e return must be under examination b	rcular 230, section y the IRS See Unenrolled		
k Student Atto 10 7(d) of Ci	rney – student who rec rcular 230	eives permission to practice befor	e the IRS by virtue of their status as a	a law student under section		
	- student who receive	s permission to practice before th	e IRS by virtue of their status as a CF	A student under section		
r Enrolled Ret practice befo	irement Plan Agent – e ore the Internal Revenue	nrolled as a retirement plan agen Service is limited by section 10 3	under the requirements of Circular 2 (e))	30 (the authority to		
► IF THIS DECLARATE See the Part II instruc	TION OF REPRESENTA	TIVE IS NOT SIGNED AND DATE	, THE POWER OF ATTORNEY WILL	BE RETURNED.		
Designation — Insert above letter (a - r)	Jurisdiction (state) or identification	/) Sig	nature	Date		
	 					

Form 8868	(Rev 4-2009)			Page 2	
• If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete on	ly Part II and check	this box	>	
Note. Only	complete Part II if you have already been granted an automatic 3-month ext	ension on a previous	sly filed Form 8868		
• If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page	= 1)			
Part !!!	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original	(no copies needed).		
	Name of Exempt Organization		Employer identification number		
Type or					
print	THE STEVE YOUNG FAMILY FOUNDATION		87-0517242		
	Number, street, and room or suite number. If a P.O. box, see instructions		For IRS use only		
File by the extended	HANSEN, BRADSHAW, MALMROSE & ERICKSON, P.C.				
due date for filing the	559 WEST 500 SOUTH			ment and	
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions				
	BOUNTIFUL, UT 84010		然是是國際國際的	用能逐	
Check type	of return to be filed (File a separate application for each return)				
Form 9	90 X Form 990-PF	Form 1041-A	Form 60	169	
Form 9	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720	Form 88	70	
Form 9	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 e	xtension on a previ	ously filed Form 8868.		
	ks are in care of HANSEN, BRADSHAW, MALMROSE	<u></u>			
	ine No ► 801-296-0200 FAX No. ►				
•	ganization does not have an office or place of business in the United States	, check this box		▶ □	
	for a Group Return, enter the organization's four digit Group Exemption Nui		. If this i	s for the	
			th the names and EINs of	all	
members ti	ne extension is for	•			
4 I requ	est an additional 3-month extension of time until $11/15$, 20	10			
		, and ending	, 20		
	tax year is for less than 12 months, check reason: Initial return	Final return	Change in accounting	period	
	in detail why you need the extension TAXPAYER RESPECTFULLY			•	
	HER INFORMATION NECESSARY TO FILE A COMPLETE AND				
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tent	tative tax less any			
nonre	fundable credits. See instructions		8a \$	0.	
b If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable	credits and estimate	d tax		
paym	ents made. Include any prior year overpayment allowed as a credit and any a form 8868	amount paid previou	Isly 8b\$	0.	
c Balar	ce Due. Subtract line 8b from line 8a. Include your payment with this form, on the Coupon or, if required, by using EFTPS (Electronic Federal Tax Payment).	or, it required, depos (System) See instra	8c \$	0.	
	Signature and Verification		<u></u>		
Under penaltie	s of perjury, I declare that I have examined this form, including accompanying schedules and statemen implete, and that I am authorized to prepare this form		nowledge and belief, it is true,		
correct, and co	mplete, and that I am authorized to prepare this form	·	AL 1		
Signature >	Title > CPA		Date ► 613 15	G_{i}	
BAA	F(F70502) 03/11/09		Form 8868 (R	ev 4-2009	

INTERNAL REVENUE SERVICE W & I FIELD ASSISTANCE SALT LAKE CITY, UT 84111

AUG 09 2010

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