

## 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



Department of the Treasury

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

OMB No 1545-0052

_		enue Service Note. The foundation may be able	to use a copy of this retu	rn to satisty sta	ite reporting	requirements	<u> </u>
For	calend	dar year 2010, or tax year beginning ,	and ending				
G C	heck	all that apply 🔲 Initial return 🔲 Initial re	turn of a former public	charity		Final return	
		Amended return Add	lress change	Name	change		<del> </del>
Na	me of f	oundation				loyer identification nun	nber
					20	-0552434	
		ughes Brockbank Foundation	· · · · · · · · · · · · · · · · · · ·			phone number (see page	10 of the instructions)
		nd street (or P O box number if mail is not delivered to street addre	ss) Ro	oom/suite		1-274-3255	
		Abinadi Road			1	emption application is pend	
		n, state, and ZIP code  Lake City UT 84124			D 1. Fo	oreign organizations, chec	k here
						oreign organizations meeti 5% test, check here and at	
		type of organization X Section-501(c)(3) exempt private	e-roundation = le private foundation			·	
				nual		rate foundation status was on 507(b)(1)(A), check hei	
			Lasii Acc	rual			_
	ia oi y e 16)	ear (from Part II, col (c),  \$ 0 (Part I, column (d) must	ho on coch hoois \		ſ	foundation is in a 60-mon r section 507(b)(1)(B), che	
	irt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
, .	****	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv	estment	(c) Adjusted net	for chantable
		the amounts in column (a) (see page 11 of the instructions) )	books	inco	me	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					(casir basis Offiy)
	2	Check ► X if the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments	87		87	87	
	4	Dividends and interest from securities	38,223		38,223	38,223	
	5a	Gross rents			,		
a	ь	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	10,382				
\ V	ь	Gross sales price for all assets on line 6a 10,382					
æ	7	Capital gain net income (from Part IV, line 2)			10,382		
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns & allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) Stmt 1	-18,326		18,326		
	12	Total. Add lines 1-through-1-1-	30,366	:	30,366	19,984	
S	13	Compensation of officers, directors, trustees, etc	5,500				
enses	14	Other employee salaries and wages					
эег	15	Pension plans, employee benefits Legal fees (attach schedule)					
Operating and Administrative Exp	16a						
e l	b	Accounting fees (attach schedule)					
ıţį	С	Other professional fees (attach schedule)					-, <del>-</del>
tre	17	W. Ballating					
nis	18	Taxes (attach schedule) (see page 14 of the instructions)					
, E	19	Depreciation (attach schedule) and depletion					
့် <b>မ</b>	20	Occupancy					
ַק	21	Travel, conferences, and meetings					<del></del>
a 🤅	22	Printing and publications Other expenses (att sch) Stmt 2	102		-		
- <u>i</u> i	23	. , ,	102		-		
rat	24	Total operating and administrative expenses.	5,602		o	o	o
Dei	25	Add lines 13 through 23	45,000				45,000
ō	25 26	Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and 25	50,602		0	0	45,000
$\exists$	26	Subtract line 26 from line 12	30,602			U	45,000
)		Excess of revenue over expenses and disbursements	-20,236			-	
	a b	Net investment income (if negative, enter -0-)	20,230		30,366		
	C	Adjusted net income (if negative, enter -0-)	······	•	,500	19,984	
		- ajacted net moonie (ii negative, cittel "0")	-	r	1	,-07	

4

5

6

702,355

702,355

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

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

DAA

Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income			
	be the kind(s) of property sold (e.g., real estate chouse, or common stock, 200 shs MLC Co)	,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a LPL Financial					
_b					
_ С			ļ <del></del>		
d					
<u>e</u>		<del></del>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	(h) Gain (e) plus (f)	
a 10,382					10,382
_b					
С					
_ d					
Complete only for assets showing	g gain in column (h) and owned by the fi				
(i) F M V as of 12/31/69	(j) Adjusted basis	I	ss of col (I)	(I) Gains (Col. ( col. (k), but not le	ess than -0-) or
(I) F W V 25 01 123 1709	as of 12/31/69	over col	(j), if any	Losses (fro	
a					10,382
<u>b</u>					
_ с					
				-	
_ e		<u> </u>			<del></del>
2 Capital gain net income or (net ca	apital loss)  If (loss), enter -0- in			2	10,382
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6	5)			
If gain, also enter in Part I, line 8,	column (c) (see pages 13 and 17 of the	instructions)			
If (loss), enter -0- in Part I, line 8				3	
	nder Section 4940(e) for Reduc			me	<u> </u>
(For optional use by domestic private	foundations subject to the section 4940	(a) tax on net invest	tment income)		
If section 4940(d)(2) applies, leave th	is part blank				N/A
Was the foundation liable for the sect	tion 4942 tax on the distributable amoun	t of any vear in the h	nase neriod?		Yes No
	ify under section 4940(e) Do not compl	• •	sase periou		
<del></del>	each column for each year, see page 18		pefore making any en	tries	
(a)	(b)	or the motifications a	(c)	1	(d)
Base period years Calendar year (or tax year beginning	Administration of the contract	ns Net value	of nonchantable-use ass		oution ratio vided by col (c))
2009	<del></del>				
2008	<del></del>				
2007					<del></del>
2006		<del></del>	<del></del>		<del></del>
2005		<u> </u>		<del></del>	
2 Total of line 1, column (d)				2	
	5-year base period—divide the total on li	ine 2 by 5 or by the			
<u> </u>	as been in existence if less than 5 years			3	
named of yours are roundation in	as seen in existence in less than 5 years	,			
4 Enter the net value of noncharitat	ple-use assets for 2010 from Part X, line	5		4	
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				,	
And lines 5 and 0				7	
8 Enter qualifying distributions from	Part XII, line 4			8	
If line 8 is equal to or greater than	line 7, check the box in Part VI, line 1b	, and complete that	part using a 1% tax r	ate See the	
Part VI instructions on page 18					
				Fo	orm <b>990-PF</b> (2010)

<u>Forn</u>	1990-PF (2010) W. Hughes Brockbank Foundation 20-0552434			Page 4
_Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ ☐ 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, 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			
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	2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c	. /	-	
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			
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			
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 2011 estimated tax ▶ Refunded ▶ 11	<u> </u>		
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		Yes	No
	participate or intervene in any political campaign?	1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b	<u> </u>	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			
С	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	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 ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers  \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	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	ļ	X
4a	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?  N/2	4 <u>4b</u>	<u> </u>	ļ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<b>↓</b>	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	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	├
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions)   None			
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 General Instruction G? If "No," attach explanation	8b	x	
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page		1	1
	27)? 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	1	X

orn	n 990-PF (2010) W. Hughes Brockbank Foundation 20-055243	1			Р	age <b>5</b>
P	art VII-A Statements Regarding Activities (continued)					
1	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 page 20 of the instructions)			11	l	X
2	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	
	Website address ► N/A					
4	The books are in care of ▶ Gary H. Brockbank Telep	none no 🕨	801-2	74-	325	5
	4163 Abinadi Rd.					
	Located at ▶ Salt Lake City UT	ZIP+4 ▶	84124	ļ		
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here					▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b> L	15			
6	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		_X
	See page 20_of the instructions for exceptions and filing requirements for Form-TD-F-90-22-1 If-"Yes," enter			-		1
	the name of the foreign country ▶			<u> </u>		
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<del></del>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	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			
	(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			
	(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	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons	/-			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here					
С	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 2010?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				ł	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and	п.,	T.			
	6e, Part XIII) for tax year(s) beginning before 2010?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		N/A	0.		
_	all years listed, answer "No" and attach statement—see page 22 of the instructions )		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
•-	▶ 20 , 20 , 20 , 20 Did the foundation held are at the = 200 days to see the second are seen to second are seen to see the second are seen to second are s				Ì	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	□ <b>v</b>	X No			
L	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		N/A	26	Ī	
12	foundation had excess business holdings in 2010.)  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	2	H/A	3b		X
ŧa b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes.  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	· <del>-</del>		4a		<del></del>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	102		4b	1	x
	Similario parpose that had not been removed from Jeopardy before the first day of the tax year beginning in 20		For		)-PF	
						/

orn	1990-PF(2010) W. Hughes Brockbank Foundation		552434			P:	age <b>6</b>
P	art VII-B Statements Regarding Activities for Which Form	1720 May Be R	Required (con	tinued)	····		
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?		Yes X No			
	(2) Influence the outcome of any specific public election (see section 4955), or t	o carry on,					
	directly or indirectly, any voter registration drive?			Yes X No			
	(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 than a charitable, etc., organization	described in					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instr	uctions)		Yes 🗓 No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational					
	purposes, or for the prevention of cruelty to children or animals?			Yes X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	er the exceptions d	lescribed in				
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see page 22 of th	e instructions)?	_N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check he	re		▶ 🗌			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	m the tax					
	because it-maintained expenditure-responsibility-for the-grant?		- N <del>-</del> /A -	Yes - No		·	
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)		_				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums					
	on a personal benefit contract?			Yes 🛚 X No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	act?		6b		_X_
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a party to a prohibited tax she	elter transaction?		Yes 🗓 No			
b	If Yes, did the foundation receive any proceeds or have any net income attributa	ble to the transacti	on?	N/A	7b		
P	art VIII Information About Officers, Directors, Trustees, Fo	undation Mana	agers, Highly	Paid Employ	ees,		
	and Contractors						
1	ist all officers, directors, trustees, foundation managers and their compensation.	ion (see page 22	of the instruction	ns).			
		(b) Title, and average	(c) Compensation	(d) Contributions to	1.55		
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans and deferred		ense ac r allowar	
		devoted to position	-0-)	compensation			
Se	e Statement 5						
					<u> </u>		
					<u> </u>		
				<u> </u>			
2	Compensation of five highest-paid employees (other than those included on	line 1 — see page	e 23 of the instru	ıctions).			
	If none, enter "NONE."			T	·		
		(b) Title, and average		(d) Contributions to employee benefit	(a) Ev	ense ad	oount.
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowar	
		devoted to position	L	compensation	<u> </u>		
NC	ONE CONTRACTOR OF THE CONTRACT						
					<u> </u>		
					ļ		
					ļ		
				<u> </u>	l		
ota	number of other employees paid over \$50,000				•		

Form 990-PF (2010)

Form 990-PF (2010) W. Hughes Brockbank Foundation		Page
Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	, Foundation Managers, Highly Paid Em	ployees,
3 Five highest-paid independent contractors for professional services (see	ee page 23 of the instructions). If none, enter "NON	IE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		-
Total number of others receiving over \$50,000 for professional services		 
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releval organizations and other beneficiaries served, conferences convened, research papers productions.	int statistical information such as the number of ced, etc	Expenses
1 University of Utah Hospital Foundation	on	
2		
		ĺ
3		
4		
Part IX-B Summary of Program-Related Investments (se		
Describe the two largest program-related investments made by the foundation during the tax  1 N/A	year on lines 1 and 2	Amount
1 47.24		
2		
All other program-related investments See page 24 of the instructions		
3		
otal. Add lines 1 through 3		

3

Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Enter 1% of Part I, line 27b (see page 26 of the instructions) 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 4940(e) reduction of tax in those years

Form 990-PF (2010)

45,000

45,000

135,000

135,000

3а

3b

4

5

6

d

Excess from 2006 Excess from 2007 Excess from 2008

Excess from 2009 Excess from 2010

c Any submission deadlines

N/A

Part XV Supplementary Information (C		Sutura Davesant		
3 Grants and Contributions Paid During th	If recipient is an individual,		·	
Recipient	show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
University of Utah Hospit		Charity		
540 Arapeen Dr. Ste 130		Medica	1 Charity	45,000
Salt Lake City UT 84108				
			ĺ	
i				
			]	
	,	ļ		
Total			▶ 3a	45,000
<ul><li>b Approved for future payment</li><li>N/A</li></ul>				
N/A				
Total	<del></del>	<u>L</u>	<b>.</b>	<del>-</del>
Total			▶ 3b	

Part XVI-A	Analysis of Income-Producing A punts unless otherwise indicated	i	d business income	Excluded I	by section 512, 513, or 514	(e)
		(a) Business code	(b)	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program se			-	+		the instructions )
		_	<u> </u>	+		
		_		+		
				++		<del></del>
		<del></del>				
f				<del>                                     </del>		<del></del>
g Fees an	d contracts from government agencies			1		<del>-</del> · <u>-</u> ·
_	dues and assessments					
3 Interest on s	savings and temporary cash investments					87
4Dividends-ai	nd interest from securities					<sup>-</sup> -38,223
5 Net rental in	come or (loss) from real estate					
a Debt-fin	anced property					
	t-financed property					
<ol><li>Net rental in</li></ol>	come or (loss) from personal property					
	ment income					-18,326
	s) from sales of assets other than inventory					10,382
	or (loss) from special events			<del></del>		· · · · -
	or (loss) from sales of inventory	<u> </u>				
	ue a	_		+		
		-		++		
		-		+ +		
е		_				
	d columns (b), (d), and (e)		(	0	0	30,366
	ne 12, columns (b), (d), and (e)	<del></del>	<del></del>		13	30,366
	in line 13 instructions on page 29 to verify calcula	ations)				·
Part XVI-B	Relationship of Activities to the	Accomplishm	ent of Exempt F	urposes		
Line No. ▼	Explain below how each activity for which incor accomplishment of the foundation's exempt pure	•	• •			of the
N/A	instructions )					
	······································					
AA						Form 990-PF (2010)

Print/Type preparer's name Preparer's signature Date Preparer David O. Seal, CPA 08/03/11 P00091965

Hill Robison, **Use Only** Firm's name 1366 Murray Holladay Rd Firm's address

Salt Lake City, UT

Signature of officer or trustee

84117-5050

Firm's EIN > 87-0328572 801-272-8045 Phone no

PTIN

Check if

self-employed

Here

Paid

		Federal Statements		
	Statement 1 - Form 990-PF, Part I, Line 11 - Other Income	, Part I, Line 11 - Other Ir	come	
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
Unrealized Gains/Losses		-18,	-18,	
וסרמד		, -18, 326 -18, 326	\$ -18,326	\$ -18,326
	Statement 2 - Form 990-PF, Part I,	Part I, Line 23 - Other Expenses	benses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses Annual Report Meeting Expenses	\$ 25	vs-	w	v <sub>r</sub>
Total	\$ 102	\$	\$	\(\sigma\)

8/3/2011 1:02 PM	•		Fair Market
	<b>t</b> \$		
ØΙ			
			่ ไ <sub>ผ</sub> ่ ผ
	3	sis of Jation	ke t
_	estments	Basis of Valuation	Market 
	Statement 3 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments		989 989
	oorate Sto	End of Year	258,989
ement	0b - Corp		w w
Federal Statements	II, Line 10	פֿר	249,245 249,245
edera	PF, Part	Beginning of Year	249,
	orm 990-l		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	nt 3 - Fo		
	<u>Stateme</u>		
	9)	otion	
		Description	Accounts
2434			
20-0552434			Brokerage Tota]

8/3/2011 1:02 PM

20-0552434

# **Federal Statements**

### Statement 4 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	 End of Year	_	Fair Market Value
Wells Real Estate Genius Funds	\$ 330,791	\$ 351,325 5,000	\$	-
Total	\$ 330,791	\$ 356,325	\$_	0

20-002404	Federal	Federal Statements	(0	ò	8/3/2011 1:02/8/M
Statement 5 - Form 990-PF		1 - List of Office	Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	  ees, Etc.	
Name and Address	<u>4</u> ± ⊢	Average	noite se a mo	Robelite	, oo
Lee Craig Brockbank 8515 Costa Verde Blvd #608 San Diego CA 92122	Trustee	0.25	500		0
Gary H. Brockbank 4163 Abinadi Road Salt Lake City UT 84124	Trustee	2.00	2,000	0	0
Scott H. Holcover P.O. Box 207 Silver City NV 89428	Trustee	0.25	200	0	0
Julia Craig Kelety 2858 Evergreen Street San Diego CA 92106	Trustee	0.25	200	0	0
Dale R. Gunnell 1657 North Linden Lane Bountiful UT 84010	Trustee	1.00	1,000	0	0
Bonnie J. Huish 2 Clairwood Mall Oakland CA 94618	Trustee	0.25	200	0	0
Norman L. Borckbank 2 Bowling Dr. Oakland CA 94618	Trustee	0.25	500	0	O \$

Form **8868** (Rev January 2011)

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

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

Internal Revenu	e Service	a separate	application for each retain.		ľ			
If you are	filing for an Automatic 3-Month Extension, comple	te only Part	I and check this box		•	▶ X		
<ul> <li>If you are</li> </ul>	filing for an Additional (Not Automatic) 3-Month Ex	ctension, co	mplete only Part II (on page 2 of this fo	rm)		_		
	lete Part II unless you have already been granted a				58			
Electronic fill a corporation 8868 to reque Return for Trainstructions)  Part I  A corporation  Part I only	lete Part II unless you have already been granted and sing (e-file). You can electronically file Form 8868 if y required to file Form 990-T), or an additional (not auset an extension of time to file any of the forms listed insfers Associated With Certain Personal Benefit Cofformore details on the electronic filing of this form, and tomatic 3-Month Extension of Time required to file Form 990-T and requesting an automorphic file (including 1120-C filers), partnerships, REM	n automatic ou need a 3 tomatic) 3-m in Part I or F intracts, whice visit www irs a. Only su natic 6-month	3-month extension on a previously filed -month automatic extension of time to fronth extension of time. You can electropart II with the exception of Form 8870, the must be sent to the IRS in paper form gov/efile and click on e-file for Charitie bmit original (no copies needed hextension-check this box and completes sts must use Form 7004 to request an extension-check this box and completes the extension-check the extension-check this box and completes the extension-check this box and completes the extension-check this box and completes the extension-check the extension-che	Form 88 ile (6 more inically file in information in it (see is & Nonpole).  e extension  Emplo	nths for e Form on rofits – of time	▶ □		
due date for	Number, street, and room or suite no. If a P.O. bo							
filing your return See	4163 Abinadi Road							
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions							
	Salt Lake City UT	8412	<u>4</u>					
Enter the Retu	urn code for the return that this application is for (file	a separate a	application for each return)			04		
Application		Return	Application			Return		
ls For		Code	Is For			Code		
Form 990		01	Form 990-T (corporation)			07		
Form 990-BL		02	Form 1041-A			08		
Form 990-E	, , <u>, , , , , , , , , , , , , , , , , </u>	03	Form 4720			09		
Form 990-PF		04	Form 5227			10		
Form 990-T (sec 401(a) or 408(a) trust)		05 06	Form 6069			11		
Form 990-T (trust other than above)			Form 8870					
	Gary H. Brockbank 4163 Abinadi Rd.							
• The backs	are in the care of > Salt Lake City				UT	84124		
	e No ► 801-274-3255	FAX No			OI	04124		
•	nization does not have an office or place of business					▶ □		
_	ria Group Return, enter the organization's four digit (		·	this is				
	group, check this box							
•	names and EINs of all members the extension is for	i the group,	and atta	CII				
1 I reques until 0 for the o	t an automatic 3-month (6 months for a corporation $8/15/11$ , to file the exempt organization returganization's return for calendar year $2010$ or tax year beginning , and ending			IS				
2 If this ta	x year entered in line 1 is for less than 12 months, change in accounting period	neck reason	Initial return Final return					
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					\$	0		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, er			fundable credits and		† <b>*</b> · · · · ·			
estimated tax payments made Include any prior year overpay				3b	<b> </b>	0		
c Balance due. Subtract line 3b from line 3a Include your paym				1 -	<u> </u>	<u>_</u>		
	nic Federal Tax Payment System) See instructions			3c	\$	0		
	are going to make an electronic fund withdrawal with	th this Form	8868, see Form 8453-EO and Form 88		r			

payment instructions