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## Form 990-PF

#### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service

Treated as a Private Foundation

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

2010

OMB No 1545-0052

	For	caler	ndar year 2010, or ta	x year beginning			, and e	nding			
	G (	Check	call that apply	Initial return		Initial return of a f	ormer public c	harity	Fir	nal return	1
				Amended return		Address char	ige		Name change		
	Na	me of	foundation						A Employer ident	tification	number
	CERTSGROUP FOUNDATION  Number and street (or P O box number if mail is not delivered to street address)								20-4137065		
	Nur	nber a	•		address)	1		Room/suite	B Telephone num		.00
		145 CASCADE AVE							801-75		· · · · ·
	City	or to	own, state, and ZIP c ALPINE,						C If exemption applied 1. Foreign orga		
,	H (	_	type of organization	` `			-4		2. Foreign organiz check here and	ations me attach co	peting the 85% test, proputation
	<u>└</u> I Fá			exempt charitable trust ts at end of year   J   Accounti		ixable private found	Accr	 ual	E if private found under section 5	ation sta	tus was terminated
	(fi	om l	Part II, col (c), line		her (sp						60-month termination
	_▶	\$	<b>-</b>	112 . (Part I, colu	mn (d)	must be on cash	basis)		under section 5		
	Pá	ırt i	☐ (The total of amounts i)	ue and Expenses in columns (b), (c), and (d) may not amounts in column (a) )		) Revenue and benses per books	(b) Net inv		(c) Adjusted income	net	(d) Disbursements for chantable purposes (cash basis only)
•		1	Contributions, gifts,	grants, etc., received		3,500.			N/A		
		2	Check X If the fo	undation is not required to attach Sch. B.		······································					
<b>Q-a</b>		3	Interest on savings and cash investments	temporary							**************************************
2011		4	Dividends and intere	est from securities							
		5a	Gross rents								
G)		b	Net rental income or (los	ss)						1	
	Revenue	6a b	Net gain or (loss) from s Gross sales price for all assets on line 6a	ale of assets not on line 10							
SCAINNED NOV	eve	7	Capital gain net income	(from Part IV, line 2)	*****			0.	······································	**********	**************************************
	Œ	8	Net short-term capit	al gain							
		9	Income modification								
		10a	Gross sales less returns and allowances	·							
<b>3</b>		b	Less Cost of goods sol	ld							
U)		C	Gross profit or (loss								
		11	Other income						ļ		
		12_	Total. Add lines 1 th	rrough 11	ļ	3,500.		0.	ļ		
		13	•	rs, directors, trustees, etc		0.		0.			0.
		14	Other employee sala	•	ļ						
	Š	15	Pension plans, empl	loyee benefits		<del></del>			<del></del>		<u> </u>
	ınse	1	Legal fees								
	xpe		Accounting fees — Other professional fe	RECEIVED	E E				<del></del>		
	ē		Interest	ees The second	)S	- <del></del>	<del></del>				<del> </del>
	aţi	18		Si NON 1 4 2011					<del> </del>		<del></del>
	istr	19	Depreciation and de	(-)1 (10)	(O)		<del></del>	<del></del>			
	nin.	20	Occupancy	pietion	12		<u> </u>	<del></del>			
	Adr	21	Travel conferences	and meetingsDEN. UT							
	5	22	Printing and publica	tions							
	g	23	Other expenses								
	Operating and Administrative Expenses		Total operating and	administrative							
	per		expenses. Add lines			_ 0.		0.			0.
	0	25	Contributions, gifts,	-		3,500.					3,500.
		26	Total expenses and	disbursements.							
		<u>L</u> .	Add lines 24 and 25			3,500.		0.			3,500.
		27	Subtract line 26 from	m line 12		_					
		a	Excess of revenue over	expenses and disbursements		0.		······································		********	<u></u>
		b	Net investment inco	ome (if negative, enter -0-)	ļ			0.			
	1235	<u> </u>	Adjusted net incom	6 (if negative, enter -0-)			L		N/A		Form 000 DE (2010)

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

(2010)

	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of	year	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	112.	112.		
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less allowance for doubtful accounts			<del></del>	
	4	Pledges receivable ►				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable				
		Less allowance for doubtful accounts			<del></del> _	
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ř	10a	Investments - U S and state government obligations				
	b	Investments - corporate stock			<del></del>	
	C	Investments - corporate bonds			······································	
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other		·····		
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation				
	15	Other assets (describe			<del></del>	
			112	112.	112.	
_	-	Total assets (to be completed by all filers)	112.	112.	112•	
	17	Accounts payable and accrued expenses	<u> </u>			
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>[a</u>	21	Mortgages and other notes payable				
_	22	Other liabilities (describe				
		T-Ast tisk littles (add lines 47 through 99)	0.	0.		
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.	1			
es	24	·				
Š	1	Unrestricted Temporarily restricted				
lala	25	Temporarily restricted				
or Fund Balanc	26	Permanently restricted  Foundations that do not follow SFAS 117, check here		<del></del>		
Ē						
6	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds	0.	0.		
ets	27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.		
Assets	28	Retained earnings, accumulated income, endowment, or other funds	112.	112.		
Net/	29	Total net assets or fund balances	112.	112.	,	
Z	30	TOTAL HEL 255615 OF INHA DELEMBES				
	21	Total liabilities and net assets/fund balances	112.	112.		
_			Palanoos			
F	art	Analysis of Changes in Net Assets or Fund E				
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		110	
	(mu	st agree with end-of-year figure reported on prior year's return)		1	112.	
2		r amount from Part I, line 27a		2	0.	
3	Oth	er increases not included in line 2 (itemize)		3	0. 112.	
4		lines 1, 2, and 3		4	0.	
5		reases not included in line 2 (itemize)		5	112.	
6	Tota	il net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	Form <b>990-PF</b> (2010)	

	and Losses for Tax on I		t Income	(b) How acquired	(0) 004		(4) 0-4
	cribe the kind(s) of property sold (e q arehouse, or common stock, 200 sh			P - Purchase D - Donation	(c) Date ac (mo., day	y, yr)	<b>(d)</b> Date sold (mo , day, yr )
1a				2 201141011			
b NO	NE						
<u>c</u>				<del></del>			
<u>d</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	<u> </u>	(h) Gair (e) plus (i	or (loss) f) minus (	
a		<u> </u>					
b							
<u>c</u>		<del> </del>				<del></del>	
<u>d</u> e	<del></del>	<del> </del>					<del></del>
<del></del>	ng gain in column (h) and owned by	the foundation	on 12/31/69		(I) Gains (Col	(h) gain	minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (J), If any	C	of (k), but not Losses (fr		
a		<u> </u>					
<u>b</u>							
<u>c</u> d		<del> </del>		<del>-  </del>			
8				<del>-  </del>	-		
2 Capital gain net income or (net ca	apital loss)   If gain, also ente	er in Part I, line O- in Part I, line	7 7	} 2			
Net short-term capital gain or (lo	ss) as defined in sections 1222(5) a				· · · · · · · · · · · · · · · · · · ·		
If gain, also enter in Part I, line 8,	column (c)	(0)		<b>}</b>			
If (loss), enter -0- in Part I, line 8	Inder Section 4940(e) for	r Baduaad	Toy on Not	J 3			<del></del>
<del></del>	e foundations subject to the section						
•	·	1010(0) tax 011	1100 1111000111011011	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
f section 4940(d)(2) applies, leave t	nis part biank						
	tion 4942 tax on the distributable ar		•	nod?			Yes X No
	lify under section 4940(e) Do not co each column for each year, see insti						
(a)	(b)	140110113 001010	Thaking any onto	(c)		D. A. A.	(d)
Base periód years Calendar year (or tax year beginni	Advisabad assalté una du	stributions	Net value of no	ncharitable-use asse			utión ratio ded by col (c))
2009		0.	···········	11			.000000
2008		0.			6. 5.		.000000
2007		0.			0.		.000000
2006 2005					-		.00000
				·		-	<del></del>
? Total of line 1, column (d)					2		.000000
	5-year base period - divide the total	on line 2 by 5,	or by the number	of years			00000
the foundation has been in existe	ence if less than 5 years			•	3		.000000
Enter the net value of noncharital	ble-use assets for 2010 from Part X,	, line 5			4		110.
Muttiply line 4 by line 3					5		0.
Enter 1% of net investment incor	ne (1% of Part I, line 27b)				6		0.
7 Add lines 5 and 6					7		0.
B Enter qualifying distributions from					8		3,500.
If line 8 is equal to or greater that See the Part VI instructions	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ng a 1% tax rate.			

P	art 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 application?	13	X	
	Website address ► N/A			
14	The books are in care of ► KENT TASSO  Telephone no ►801-75	5-8	802	
	Located at ► 145 CASCADE AVE, ALPINE, UT ZIP+4 ►84	004		
15	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	N	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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 the name of			
	the foreign country	<u> </u>		L
P	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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 )			
0	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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 page 22 of the instructions)?  N/A	۱. ا		
		1b		
_	Organizations relying on a current notice regarding disaster assistance check here			
G	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?	4.		Х
2		1c		
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))			
9	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
٠	before 2010?  X Yes No			
	If "Yes," list the years ▶ 2008 , 2007 ,,	[		
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 all years listed, answer "No" and attach			
	statement - see instructions )	2b	Х	
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>•</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
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 foundation had excess business holdings in 2010.) N/A	3b	l	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	]	X
b	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 2010?	4b		X
	For	m <b>990</b>	-PF(	2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	<del></del>	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
<del></del>		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities	<del></del>	· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	n such as the	Expenses
	<del></del>	<del>`</del>
1 N/A		
<u> </u>		
2		
<del></del>		
3		<del></del>
<u> </u>		
<u> </u>		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0.
	F	orm <b>990-PF</b> (2010)

1 Fa	ir market value of assets not used (or held for use) directly in carrying out charital	ble, etc , purposes <sup>.</sup>			
a Av	rerage monthly fair market value of securities			1a	0.
b Av	rerage of monthly cash balances .			1b	112.
c Fa	ır market value of all other assets	•		10	
d To	stal (add lines 1a, b, and c)			10	112.
e Re	eduction claimed for blockage or other factors reported on lines 1a and				
10	(attach detailed explanation)	1e	0.		
2 Ac	equisition indebtedness applicable to line 1 assets			2	0.
<b>3</b> Su	ibtract line 2 from line 1d			3	112.
4 Ca	ish deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amoun	t, see instructions)		4	2.
5 Ne	et value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and c	on Part V, line 4		5	110.
6 M	inimum investment return. Enter 5% of line 5			6	6.
Parl	Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here		oundations an	d certain	
1 M	inimum investment return from Part X, line 6			1	6.
<b>2a</b> Ta	x on investment income for 2010 from Part VI, line 5	2a			
<b>b</b> Inc	come tax for 2010 (This does not include the tax from Part VI)	2b			
c Ad	ld lines 2a and 2b			_2c	0.
3 D	stributable amount before adjustments. Subtract line 2c from line 1			3	6.
4 Re	coveries of amounts treated as qualifying distributions			4	0.
<b>5</b> Ad	ld lines 3 and 4			5	6.
6 De	eduction from distributable amount (see instructions)			6	0.
<u>7 Di</u>	stributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	t XIII, line 1		7	6.
	Qualifying Distributions (see instructions)  nounts paid (including administrative expenses) to accomplish charitable, etc., pu	rnosas			
	penses, contributions, gifts, etc total from Part I, column (d), line 26	10000		1a	3,500.
	ogram-related investments - total from Part IX-B			1b	0.
	nounts paid to acquire assets used (or held for use) directly in carrying out charita	ible atc nurnoses	-	2	
	nounts set aside for specific charitable projects that satisfy the	10.0, 0.00 , purpodes			
	utability test (prior IRS approval required)			3a	
	ish distribution test (attach the required schedule)			3b	
	ralifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, 2	and Part XIII line 4		4	3,500.
	undations that qualify under section 4940(e) for the reduced rate of tax on net inv				
	come Enter 1% of Part I, line 27b			5	0.
	ljusted qualifying distributions Subtract line 5 from line 4			6	3,500.
	ste. The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether th	e foundation (		
	4940(e) reduction of tax in those years				

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	( <b>c</b> ) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				6.
2 Undistributed income, if any, as of the end of 2010			_	
a Enter amount for 2009 only			6.	<del>'131.4'   '131111311311311311411'   '14113113111'   '1</del>
<b>b</b> Total for prior years		_		
<u>2008</u> , <u>2007</u> ,		7.		
3 Excess distributions carryover, if any, to 2010				
a From 2005				
<b>b</b> From 2006				
<b>c</b> From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			·····
4 Qualifying distributions for 2010 from				
Part XII, line 4 ▶\$ 3,500 .			_	
a Applied to 2009, but not more than line 2a			6.	
<b>b</b> Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		· ·
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	·····		6.
d Applied to 2010 distributable amount	2 400			0.
e Remaining amount distributed out of corpus	3,488.			0.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,488.			
b Prior years' undistributed income Subtract	·			
line 4b from line 2b		7.		
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		7.		
e Undistributed income for 2009 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011 .		***************************************		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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.	2 400			
Subtract lines 7 and 8 from line 6a	3,488.			
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010 3,488.	<u> </u>	L	<u>.t</u>	Form <b>990-PF</b> (2010)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year MOONRIDGE ACADEMY 145 CASCADE AVE ALPINE, UT 84004	N/A	N/A	EDUCATION	3,500.
		;		
<u>Total</u>		<del></del>	<u>▶ 3a</u>	3,500.
b Approved for future payment				
NONE				
Total		<u> </u>	<b>▶</b> 3b	0.

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

Enter gross amounts unless otherwise indicated	Unrelated	business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	Code				
ab	-	<del></del>	+-	<u> </u>	
·	-	<del></del>	-	<del></del>	
	1 1		+		<del></del>
			+-	<u> </u>	
f	-		+		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property			7 7		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					<del></del>
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory		_			
1 Other revenue			7 7		
a					
b					
C	1				
d					
e					
2 Subtotal Add columns (b), (d), and (e)		0	•	0.	0.
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations )				13	0.

# Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
1	

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1102-081

Part XVIII	Information Re Exempt Organ	egarding Transfers To a	and Transactions a	nd Relations	hips With Nonchar	itable	)	
1 Did the on		rectly engage in any of the followin	o with any other organization	n described in sect	ion 501(c) of	1588	Yes	No
					(0)		3 25 3 255	
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to poldical organizations?  a Transfers from the reporting foundation to a noncharitable exempt organization of:							
	(1) Cash							
(2) Other assets								X
b Other tran								45
(1) Sales	of assets to a noncharita	ble exempt organization				16(1)		X
(2) Puich	lases of assets from a no	ncharltable exempt organization ,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15(2)		X
(3) Renta	il of facilities, equipment,	or other assets				16(3)		X
(4) Reimi	bursement arrangements		*****		.,,,,,,	10(4)		X
						1b(5)		Х
(B) Perfo	rmance of services or me	mbership or fundraising solicitatio	ns,			1b(8)		X
c Sharing of	f facilities, equipment, ma	iling lists, other assets, or pald em	ployees			1c		<u> </u>
or service:	s given by the reporting fo	"Yes," complete the following sche oundation. If the foundation receive					ets,	
***	(b) Amount involved	other assets, or services received. (c) Name of noncharitable	anitralacaya tamaya	(d) December	of transfers, transactions, and s			
Val Fato IOV	IN WHITHIN HANDIAGA	N/A	Avenut or Asums	(u) Description	I VI GAIDIOIS, HANSECHORS, AND S	wanuti in		**(*
		M/A		~ <del> </del>				
	· · · · · · · · · · · · · · · · · · ·	<del></del>		<u> </u>				
				<del>- </del>		*		
	······································		· · · · · · · · · · · · · · · · · · ·					
					·		· · · · · ·	
				<u> </u>				
in section	501(c) of the Code (othe omplete the following sch		lan 527?				[X	] No
	(a) Name of org	ganization	(b) Type of organization		(c) Description of relationsh	пÞ		~
****	N/A							
<del></del>				·				
Sign Here	or penalties of porfury, I destar complete Declaration of prepri	re that I have examined this rotum, includerer (other than toxpayor or fiduciary) is be	ing accompanying schedules an ased on all information of which UNITY L Date	preparer has any knowl	e best of my knowledge and best edge. That have	lef, it is to	ue, com	ict,
<u>* · · · · · · · · · · · · · · · · · · ·</u>	Print/Type preparer's na	arne Preparet's s	İgnature	Date	Check If PTIN			
		(  _ \/	1/1	7:14:11	self- employed			
Paid	RANDY SELI			<u> </u>				
Preparer Use Only	1 7	ESS ADVISORS	, LLC	Firm's EIN				
	Firm's address > 17	Firm's address ► 1706 SOUTH 500 WEST, SUITE 200					106	0
		<u> </u>				rm 990		

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NOV/15/2011/TUE 12:56 PM La Europa Academy

### Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

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

▶ File a separate application for each return.

OMB No 1545-1709

			<del></del>			
	are filing for an Automatic 3-Month Extension, comple					X
	are filing for an Additional (Not Automatic) 3-Month Ex		=			
	complete Part II unless you have already been granted					
	nic filing (e-file). You can electronically file Form 8868 if					
	to file Form 990-T), or an additional (not automatic) 3-mo					
	o file any of the forms listed in Part I or Part II with the ex					
	Benefit Contracts, which must be sent to the IRS in par		(see instructions). For more details on t	he elec	tronic filing of this	form,
	w irs gov/efile and click on e-file for Charities & Nonprofits				<del></del>	
Part I						
	ration required to file Form 990-T and requesting an autor	matic 6·mo	onth extension - check this box and con	nplete		
Part I on	•				•	· []
	corporations (including 1120-C filers), partnerships, REM come tax returns	1ICs, and t	rusts must use Form 7004 to request ar	n exten	sion of time	
Type or	Name of exempt organization			Empl	oyer identification	n number
orine	REINS OF CHANGE FOUNDATION			2	0-4039314	
file by the due date fo	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions			
filing your return See	145 CASCADE AVE.	<del>.</del>			· · · · · · · · · · · · · · · · · · ·	
instruction	City, town or post office, state, and ZIP code For a for ALPINE, UT 84004	oreign add	fress, see instructions			
Enter the	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applica	lion	Return	Application			Return
ls For		Code	Is For			Code
Form 99	0	01	Form 990-T (corporation)			07
Forni 99		02	Form 1041-A			08
Form 99		03	Form 4720			09
Form 99		04	Form 5227			10
Form 99	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870		1	12
	KENT TASSO					
	pooks are in the care of   145 CASCADE AV	E	ALPINE, UT 84004			
Telep	phone No ► 801-755-8802		FAX No. ▶			
	organization does not have an office or place of busines				•	· 🗀
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit	_			r the whole group,	
box 🕨	If it is for part of the group, check this box				ers the extension is	s for
<b>1</b> Ir	equest an automatic 3-month (6 months for a corporation					
		ot organiza	tion return for the organization named a	above	The extension	
	for the organization's return for:					
	X calendar year 2010 or					
	tax year beginning	, an	id ending		<u> </u>	
0 14	the territory and and the line to favile a three 10 months of	-haak raaa	on Initial return Fin	al retur	n	
2 If	the tax year entered in line 1 is for less than 12 months, on the tax year entered in accounting period	check reas	initial retorn initial retorn	arretti	11	
ŧ.,	Change in accounting period					
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
<u>nc</u>	onrefundable credits. See instructions			3a	\$	<u>0.</u>
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	, enter any	refundable credits and	1		_
	stimated tax payments made. Include any prior year over			3b	S	0.
	alance due. Subtract line 3b from line 3a. Include your pa				)	
by	using EFTPS (Electronic Federal Tax Payment System)	See instru	uctions	3c	\$	<u>0.</u>
Caution	. If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Form	1 8879·	EO for payment ins	structions
LLIA	For Bungayerk Reduction Act Notice see Instructions				Form 8868 (F	

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Form 8868 (Rev. 1-2011)				<del></del>	Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this b	юх		· [X]
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously file	d Form 8	3868.	
If you are filing for an Automatic 3-Month Extension, comple					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no	copies n	eeded).	
Type or Name of exempt organization		'	Emple	oyer identification	number
print CERTSGROUP FOUNDATION		1 .	20	0-4137065	
Number, street, and room or suite no. If a P.O. box, so due date for filling your	ee instruc	tions.			
retum. See City, town or post office, state, and ZIP code. For a foinstructions. ALPINE, UT 84004	oreign add	ress, see instructions.			
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			[0]4]
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990	01	<u> </u>		1777 6	<u> </u>
Form 990-BL	02	Form 1041-A		· · · · · · · · · · · · · · · · · · ·	08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted KENT TASSO  • The books are in the care of ▶ 145 CASCADE AVE		LPINE, UT 84004	usly filed	d Form 8868.	
Telephone No. ► 801-755-8802 FAX No. ►					
<ul> <li>If the organization does not have an office or place of business</li> </ul>					
If this is for a Group Return, enter the organization's four digit (					
box ▶ . If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs of a	l membe	ers the extension is	for.
	10VEM	BER 15, 2011.			
5 For calendar year 2010, or other tax year beginning		, and ending			·
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Lilinitial return	Final re	eturn	
Change in accounting period		, '			
7 State in detail why you need the extension INFORMATION NEEDED TO PREPARE	AN A	CCURATE RETURN NOT	YET A	AVAILABLE	
- 1611			$\top$	<del></del>	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, on nonrefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax payments made. Include any prior year overpayment all			14.7		
previously with Form 8868.	0.,00 00		8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your pa	vment wit	h this form if required by using	1 55		
EFTPS (Electronic Federal Tax Payment System). See instru			8c	\$	0.
		d Verification			
Under penalties of perjucy, I declare that Lhave examined this form, including it is true, correct, and complete, and that I am authorized to prepare this form.				(7/6/ //	oelief,
Signature Title			Date		1 0011)
		•		Form 8868 (R	ev. 1-2011)
V		s (			
		. 1			