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## **Return of Private Foundation**

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

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

OMB No 1545-0052 2010

		CHIEC OCIVIOS	on may b	e able to use a copy of this		orting requirements	
		dar year 2010, or tax year beginning			, and ending	r. al cabaca	
G C	Check	all that apply Initial return			rmer public charity	Final return	n
_		Amended return		Address chan	<u>je                                      </u>	<del>,                                      </del>	n aumhar
Nar	me of	foundation				A Employer identification	ii iidiiinei
		LON D. & ANN B. SI	CRT	ST FOUNDATIO	N	26-2172113	3
Nur	nber a	nd street (or PO box number if mail is not delivered			Room/suite	B Telephone number	
	1100. 0.	8789 OAK VALLEY DI		·		801-566-26	500
Crb	v or to	own, state, and ZIP code			<u> </u>	C If exemption application is	pending, check here
"	, 0	SANDY, UT 84093				D 1. Foreign organization	
H C	Check		(c)(3) ex	empt private foundation	-	Foreign organizations m check here and attach c	eeting the 85% test, omputation
	] Se	ction 4947(a)(1) nonexempt charitable trust		Other taxable private founda	ition	E If private foundation sta	atus was terminated
l Fa	air ma	rket value of all assets at end of year   J /			Accrual	under section 507(b)(1	)(A), check here
(fr	rom F	Part II, col (c), line 16)		ner (specify)	<del> </del>	F If the foundation is in a	
_	- \$		t I, colui	mn (d) must be on cash l		under section 507(b)(1	4.0
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in necessarily equal the amounts in column (a))	ay not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
				90,000.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A	(cash basis only)
	1 _	Contributions, gifts, grants, etc., received		90,000.		197.7%	-
	1 -	Check if the foundation is not required to attach interest on savings and temporary cash investments	ocu a	868.	868.		STATEMENT 1
	3	Dividends and interest from securities				<u></u>	
	1	Gross rents					
	1	Net rental income or (loss)					
	1	Net gain or (loss) from sale of assets not on line 10					
evenue	b	Gross sales price for all assets on line 6a				111	
eve	7	Capital gain net income (from Part IV, line 2)			0.		
Œ	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns				ļ	
	10a	and allowances			/##** -,-!!'!!! ##+-/!!!!! !	<del>                                      </del>	
	1	Less Cost of goods sold					-
	i	Gross profit or (loss)				· <del> </del>	
	1	Other income		90,868.	868		
	12	Total. Add lines 1 through 11  Compensation of officers, directors, trustees, etc.		0.	0.		0
	14	Other employee salaries and wages		· · · · · · · · · · · · · · · · · · ·			
	1	Pension plans, employee benefits					
Ses	162	Legal fees					
ě	b	Accounting fees					
Ä	C	Other professional fees					<u> </u>
.≥	17	Interest RECEIVED	`	<u> </u>	<del> </del>		
trat	18	laxes				<del> </del>	
ī. Si	19	Depreciation and depletion	S-OSC				
Ē	20	Occupancy S NOV 03 201	ļĢ				<del></del>
₹	21	Travel, conferences, and meetings	왕			<del> </del>	
10	22	Printing and publications DEN, U'	r	<del></del>			
anc		•			<del></del>		
ting and	23			0.	0	•	0
erating and	23	Total operating and administrative expenses. Add lines 13 through 23					121,821
Operating and	23 24 25	expenses. Add lines 13 through 23		121,821.		<u> </u>	
Operating and	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid					
Operating and	25	expenses. Add lines 13 through 23		121,821. 121,821.	0		
Operating and	25 26	expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements.	·	121,821.	0	•	
Operating and	25 26 27	expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25	nts				
Operating and	25 26 27 a	expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12		121,821.	868		121,821

Part # Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	f year	
Part II Dallatice Site to column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1 Cash - non-interest-bearing	53,215.	22,262.	22,262	
2 Savings and temporary cash investments				
3 Accounts receivable ►				
Less allowance for doubtful accounts				
4 Pledges receivable ►				
Less allowance for doubtful accounts	7	1		
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	-	i		
	<del>   </del>	<del></del>		
60 )				
9 Prepaid expenses and deferred charges			<del></del>	
10a Investments - U.S. and state government obligations	<del></del>			
b Investments - corporate stock				
c Investments - corporate bonds				
11 Investments - land, buildings, and equipment basis	1			
Less. accumulated depreciation	ļ			
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment basis				
Less accumulated depreciation	7 (			
15 Other assets (describe ► )			· · ·	
16 Total assets (to be completed by all filers)	53,215.	22,262.	22,262	
17 Accounts payable and accrued expenses				
18 Grants payable				
la a confi		-		
20 Loans from officers, directors, trustees, and other disqualified persons				
20 Loans from officers, directors, trustees, and other disqualified persons				
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable				
22 Other liabilities (describe >)		<del></del>		
CO. Tabel liebitities (add less 47 Abrauch 00)	0.	0.		
23 Total liabilities (add lines 17 through 22)	<del>                                     </del>			
Foundations that follow SFAS 117, check here	1			
and complete lines 24 through 26 and lines 30 and 31.				
24 Unrestricted	<del> </del>			
25 Temporarily restricted				
26 Permanently restricted				
Foundations that do not follow SFAS 117, check here				
and complete lines 27 through 31.				
27 Capital stock, trust principal, or current funds	0.	0.		
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.		
25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or current funds 29 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	53,215.	22,262.		
30 Total net assets or fund balances	53,215.	22,262.		
31 Total liabilities and net assets/fund balances	53,215.	22,262.		
Part III Analysis of Changes in Net Assets or Fund E				
	. 20	<del></del>	<del></del>	
Total net assets or fund balances at beginning of year - Part II, column (a), line	3 30	1.1	E2 215	
(must agree with end-of-year figure reported on prior year's return)		1	53,215	
Enter amount from Part I, line 27a		2	-30,953	
Other increases not included in line 2 (itemize)		3	0	
Add lines 1, 2, and 3	•	4	22,262	
Decreases not included in line 2 (itemize)		5	0	
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	22,262	

023511

(a) List and desc	ribe the kınd	ses for Tax on in l(s) of property sold (e g common stock, 200 shs	, real estate,	<u>:_ :=</u>	P	How acquired - Purchase - Donation		te acquired , day, yr )	(d) Date sold (mo , day, yr )
1a									
	NE	<del></del>			-				
<u>C</u>		<del></del>			<del> </del>		_		<del></del>
e d			·		╂				
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale	_			Gain or (loss) lus (f) minus (	
a									
<u>b</u>								<del></del>	
<u>c</u>								<del></del>	
8			<del>-</del>	<del></del>				<del></del>	
Complete only for assets shown	ng gain in co	lumn (h) and owned by t	he foundation	on 12/31/69				(Col (h) gain	
(i) F.M V as of 12/31/69		Adjusted basis s of 12/31/69		cess of col (I) col (I), if any		C1	ol (k), bu Losse	t not less thar s (from col (	n -0-) or h)) 
<u>a</u>									
<u>b</u>				<del></del>				<del>.</del>	<del></del>
			<del></del> —-						<del></del>
8									
2 Capital gain net income or (net ca	ipital loss)	If gain, also enter	in Part I, line	7 7	}	2			
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	ss) as define	•			1				
If (loss), enter -0- in Part I, line 8						3			
Part V Qualification U	nder Se	ction 4940(e) for	Reduced	Tax on Net	Inv	estment In	come		
(For optional use by domestic private	e foundations	s subject to the section 4	940(a) tax on	net investment in	come	1)			
If section 4940(d)(2) applies, leave to	his part blank	k							
Was the foundation liable for the sec	tion 4942 tax	c on the distributable amo	nunt of any ve	ear in the base nei	rınd?				Yes X No
If "Yes," the foundation does not qua				•					
1 Enter the appropriate amount in					es.				
( <b>a)</b> Base period years	į	(b)	ubutions	Not value of no	(c)	ritable-use asset		Distrib	(d) ution ratio
Calendar year (or tax year beginni	ng In)	Adjusted qualifying distr	6,994.	ivet value of no	HICHAI	59,52		(col (b) divi	ded by col (c)) 2 • 805679
2009		100	0.				0.		.000000
2007							-		
2006									
2005								<del></del>	
2 Total of line 1, column (d)							2		2.805679
3 Average distribution ratio for the the foundation has been in existe	-		n line 2 by 5,	or by the number	of ye	ars	3		1.402840
4 Enter the net value of noncharitat	ole-use asset	s for 2010 from Part X, li	ne 5				4		128,993.
5 Multiply line 4 by line 3							5_		180,957.
6 Enter 1% of net investment incom	ne (1% of Pa	ırt I, line 27b)					6	ļ	9.
7 Add lines 5 and 6							7		180,966.
8 Enter qualifying distributions from	n Part XII, lin	e 4					8		121,821.
If line 8 is equal to or greater than	ı lıne 7, chec	k the box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax rate			

023521 12-07-10

Form **990-PF** (2010)

Form 990-PF (2010) LON D. & ANN B. SECRIST FOUNDATION 26-2172113 Page.  Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)  1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1 Date of ruling or determination letter
Date of ruling or determination letter
Date of ruling or determination letter
of Part I, line 27b  c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  3 Add lines 1 and 2  4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  6 Credits/Payments  a 2010 estimated tax payments and 2009 overpayment credited to 2010  b Exempt foreign organizations - tax withheld at source  c Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  7 Total credits and payments Add lines 6a through 6d  8 Enter any penalty for underpayment of estimated tax Check here from 17 form 2220 is attached
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)  2    Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  3    Add lines 1 and 2  4    Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  5    Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  6    Credits/Payments  a 2010 estimated tax payments and 2009 overpayment credited to 2010  b Exempt foreign organizations - tax withheld at source  c Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  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
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Credits/Payments  a 2010 estimated tax payments and 2009 overpayment credited to 2010  b Exempt foreign organizations - tax withheld at source  c Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  Total credits and payments Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached
Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Credits/Payments  a 2010 estimated tax payments and 2009 overpayment credited to 2010  b Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  Total credits and payments Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here  from 2220 is attached
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Credits/Payments  a 2010 estimated tax payments and 2009 overpayment credited to 2010  b Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  Total credits and payments Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax Check here  from 2220 is attached
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax Check here  from 2220 is attached
6 Credits/Payments a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 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
a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax Check here  from 2220 is attached  6a  6b  6c  7  0 0
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld  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  6b  6c  7  0  8
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 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  6
d Backup withholding erroneously withheld 6d 7  Total credits and payments Add lines 6a through 6d 7  8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8
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
3 10x 000. If the total of mice of the control of t
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
Part VII-A Statements Regarding Activities
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes No
any political campaign?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or
distributed by the foundation in connection with the activities.
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.
(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation
managers > \$ 0.
2 has the foundation engaged in any activities that have not provided by the more
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
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
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 doverning instrument?
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.
8a Enter the states to which the foundation reports or with which it is registered (see 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
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)? If "Yes," complete Part XIV
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X

Form 990-PF (2010) LON D. & ANN B. SECRIST			26-21721	13 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contil	nued)	
5a During the year did the foundation pay or incur any amount to:		-	-	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?		es X No	
(2) Influence the outcome of any specific public election (see section 4955), or	r to carry on, directly or indi			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	27./2	
section 53 4945 or in a current notice regarding disaster assistance (see instru		••	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h		•		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		,		
expenditure responsibility for the grant?	•	J/A Y	BS L No	
If "Yes," attach the statement required by Regulations section 53.4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	oay premiums on		es X No	
a personal benefit contract?	araanal hanafit aantraat?		ľ	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denent contract?		ļ <del></del> !	5b X
<ul><li>If "Yes" to 6b, file Form 8870.</li><li>7a At any time during the tax year, was the foundation a party to a prohibited tax s</li></ul>	haltar transaction?	v	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		11	·- —,·	7b
Information About Officers Diseases Truck		nagere Highly		<u>v 1</u>
Part VIII Paid Employees, and Contractors	co, i odiladion me	magers, mgm	•	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
		3		
SEE STATEMENT 2		0.	0.	0.
	<del> </del>		Ll	<u> </u>
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evange
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
YOYE	devoted to position	<del> </del>	compensation	allowances
NONE				
		<del> </del>		
	<del> </del>	<del> </del>		
		}		
		<del>                                     </del>		
		1		
	·	<del> </del>	<del></del>	<del></del>
		[		
Total number of other employees paid over \$50,000		<u> </u>	<b>—</b>	0
erei unumen oi ottier empioyees paid over \$30,000			Form C	90-PF (2010)
			1011110	1-0.0/

Form **990-PF** (2010)

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	DNE."	<del></del>
(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		▶ 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 in number of organizations and other beneficiaries served, conferences convened, research papers produced,	formation such as the etc.	Expenses
1 N/A		<del></del>
<del></del>	-	
2		
= <u></u>		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	I and 2	Amount
1 <u>N/A</u>		
2		
	·····	
All other program-related investments See instructions		
3		
Total, Add lines 1 through 3	▶	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а		1a ]	0.
b	Average of monthly cash balances	1b	0. 130,957.
C	Fair market value of all other assets	10	
đ	Total (add lines 1a, b, and c)	1d	130,957.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	130,957.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,964.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	128,993.
6	Minimum investment return. Enter 5% of line 5	6	6,450.
P	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	6,450.
2a	Tax on investment income for 2010 from Part VI, line 5 . 2a . 17.		
b	Income tax for 2010 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	17.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	17. 6,433.
4	Recoveries of amounts treated as qualifying distributions .	4	0.
5	Add lines 3 and 4	5	6,433.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	6,433.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		101 001
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	121,821.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<del> </del>
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	<u> </u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	121,821.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	121,821.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (	jualifies for	the section

Form **990-PF** (2010)

4940(e) reduction of tax in those years

## Part XIII Undistributed Income (see Instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d</b> ) 2010
Distributable amount for 2010 from Part XI,				
line 7		****		6,433.
2 Undistributed income, if any, as of the end of 2010			_	
a Enter amount for 2009 only	(1) 111 - 114 -	<u></u>	0.	······································
b Total for prior years		0		
,,		0.	· ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4
3 Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005				
<b>b</b> From 2006				
c From 2007				
d From 2008				
e From 2009 164,030.	164,030.			
1 Total of lines 3a through e	104,030.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ▶\$ 121,821.			0.	
a Applied to 2009, but not more than line 2a		<u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			'HHHHHHH!!!!:-:HHH.!!.!!!!!!!!	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)		**************************************	<del>                                      </del>	6,433.
d Applied to 2010 distributable amount	115,388.			
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2010	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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	279,418.			
b Prior years' undistributed income Subtract		•		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line			0.	
4a from line 2a Taxable amount - see instr			<u> </u>	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1 This amount must				0.
be distributed in 2011		·····		
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2005	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2011.	279,418.			
Subtract lines 7 and 8 from line 6a	2,7,1201			
10 Analysis of line 9 a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009 164,030.				
e Excess from 2010 115, 388.			<u> </u>	<u> </u>
				Form <b>990-PF</b> (2010)

	& ANN B. SE				172113 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of			j		
foundation, and the ruling is effective fo		•	▶ ∟		
b Check box to indicate whether the found	·	ng foundation described		4942(j)(3) or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0000	Prior 3 years	41,000	4 .,
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed			<del> </del>	·	
b 85% of line 2a			<del> </del>	<u> </u>	
c Qualifying distributions from Part XII,	[				
line 4 for each year listed			<del> </del>	<del></del>	<del> </del>
d Amounts included in line 2c not	ĺ				
used directly for active conduct of					
exempt activities	<del></del>		<del> </del>	<del></del>	
e Qualifying distributions made directly for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					<del> </del>
alternative test relied upon					
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					<del>                                     </del>
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)			<u> </u>	<u> </u>	<u> </u>
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)	ļ <u>-</u>		<del> </del>		
(3) Largest amount of support from					
an exempt organization			<del> </del>		<del> </del>
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or m	ore in assets
at any time during t			ii tiic iodiidatioi	1 11dd <del>40</del> ,000 01 111	016 111 033613
1 Information Regarding Foundation					
a List any managers of the foundation wh			tributions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000) (See s	ection 507(d)(2) )			
NONE					<del></del>
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a p	partnership or
• •	s a 10 % of greater interes	ı			
NONE Contribution	in Crant Citt Lann	Cabalambia ata D		<del></del>	
2 Information Regarding Contribution Check here ► X if the foundation of				not accept unsolicited red	usete for funde. If
the foundation makes grits, grants, etc					
a The name, address, and telephone num	ber of the person to whor	n applications should be	addressed		
<b>b</b> The form in which applications should b	e submitted and informat	ion and materials they s	hould include.		
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields	, kinds of institutions, or	other factors	
		· · · · · · · · · · · · · · · · · · ·	<del></del>		

Part XV Supplementary Information	<del></del>			
3 Grants and Contributions Paid During the	If recipient is an individual,	Payment	T	<del></del>
Recipient  Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year CAUSE FOR HOPE 10421 S JORDAN GATEWAY #660 SOUTH JORDAN, UT 84095	NONE	ЕХЕМРТ	DONATION	250.
LDS BUSINESS COLLEGE 95 NORTH 300 WEST SALT LAKE CITY, UT 84101	NONE	ЕХЕМРТ	EDUCATION	120,000.
UTAH REFUGEE COALITION 165 SOUTH MAIN STREET SALT LAKE CITY, UT 84111	NONE	EXEMPT	PURCHASED SEWING MACHINE FOR FAMILY	500.
SUE BERRY 8789 OAK VALLEY DR SANDY, UT 84093	NONE	n/A	PAY UTILITIES FOR WIDOW	1,071.
		<u> </u>		
Total	<del></del>		<u>▶ 3a</u>	121,821.
<b>b</b> Approved for future payment				
NONE				
				12
				·
Total		<u> </u>	<u>▶</u> 3b	0.

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

Enter gross amounts unless otherwise indicated	Unrelated business income		Exclud	led by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business	Amount	sion	Amount	function income
a					<del></del>
b					
c					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments		<del></del> _			
3 Interest on savings and temporary cash		· · · · · · · · · · · · · · · · · · ·			
investments			14	868.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			}		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory				<u></u>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					<del></del>
11 Other revenue					
a					· · · · · · · · · · · · · · · · · · ·
b					
C	1 1				
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		868.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	868.
(See worksheet in line 13 instructions to verify calculations	)				

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

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)

023621 12-07-10

LON D. & ANN B. SECRIST FOUNDATION 26-2172113 Form 990-PF (2010) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 10(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements  $\overline{N}/A$ 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (b) Type of organization (c) Description of relationship (a) Name of organization N/A If declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, er or fiduciary is based on all information of Sign Here 10 Signature of officer or trustee Date Title Date Check PTIN Print/Type preparer's name Prepare s signature self-employed Paid RANDY SELLERS Firm's name PROFESSIONAL RUSINES ADVISORS, Preparer Firm's EIN **Use Only** Firm's address ▶ 1706 SOUTH 500 WEST, SUITE 200 801-296-1060 BOUNTIFUL, UT 84010 Phone no Form **990-PF** (2010)

### Schedule B (Form 990, 990-FZ or 990-PF

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** ► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

Name of the organization

**Employer identification number** 

26-2172113 LON D. & ANN B. SECRIST FOUNDATION Organization type (check one): Filers of: Section: 301(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 327 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. \_\_\_\_ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. \_\_\_ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

## LON D. & ANN B. SECRIST FOUNDATION

26-2172113

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LON D. & ANN B. SECRIST CHARITABLE REMAINDER UNITRUST  8789 OAK VALLEY DRIVE  SANDY, UT 84093	\$90,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

## LON D. & ANN B. SECRIST FOUNDATION

26-2172113

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part i	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY CA	ASH INVESTMEN	NTS STAT	EMENT 1
SOURCE	Al	AMOUNT		
INTEREST INCOME				868.
TOTAL TO FORM 990-PF, PART I, LIN		868.		
	T OF OFFICERS, I		STAT	EMENT 2
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LON D. SECRIST 8789 OAK VALLEY DR SANDY, UT 84093	TRUSTEE 1.00	0.	0.	0.
ANN B. SECRIST 8789 OAK VALLEY DR SANDY, UT 84093	TRUSTEE 1.00	0.	0.	0.
RYAN L. SECRIST 1249 W MARGARET ROSE DR RIVERTON, UT 84065	TRUSTEE 1.00	0.	0.	0.
JENNY S. ROBISON 4413 SID DR SOUTH JORDAN, UT 84095	TRUSTEE 1.00	0.	0.	0.
PHILLIP L. SECRIST 5558 S BROOKRIDGE DR APT #15D MURRAY, UT 84107	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

Form 8868 (Rev. 1-2011)							
if you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box							
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously filed	Form 8868.				
<ul> <li>If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).</li> </ul>							
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).							
Type or Name of exempt organization			Employer identification number				
Glo by the	μον D. & ANN B. SECRIST FOUNDATION   26-217211						
extended due date for filing your Number, street, and room or suite no. If a P.O. box, s	extended Number, street, and room or suite no. If a P.O. box, see instructions.  due date for 18789 OAK VALLEY DRIVE						
return See Instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions.  SANDY, UT 84093							
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)	• • • • • • • • • • • • • • • • • • • •	04			
Application	Return	Application		Return			
ls For	Code	is For					
Form 990	01		% ( 2 × c				
Form 990-BL	02	Form 1041-A		80			
Form 990-EZ	03	Form 4720	10				
Form 990-PF	04						
Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above)	05 06	Form 8870					
STOP! Do not complete Part II if you were not already granted			sly filed Form 8868	12			
LON SECRIST	an auton	induo o-month extension on a previou.	siy ined i omi occo.				
• The books are in the care of ▶ 8789 OAK VALLE	Y DRIV	VE - SANDY, UT 84093					
Telephone No. ► 801-566-2600		FAX No. ►					
If the organization does not have an office or place of business		1 1					
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 ►		ch a list with the names and EINs of all	members the extension is	for.			
	NOVEM	BER 15, 2011.					
<ul> <li>For calendar year 2010, or other tax year beginning</li> <li>If the tax year entered in line 5 is for less than 12 months, c</li> </ul>	heck reas	nitial return	Final return	··			
Change in accounting period		1 1					
7 State in detail why you need the extension		<u> </u>	·	<del> </del>			
INFORMATION NEEDED TO PREPARE	AN AC	CCURATE RETURN NOT Y	ET AVAILABLE				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any					
nonrefundable credits. See instructions.	J. 0000, 0.		8a \$	0.			
<b>b</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		credit and any amount paid					
previously with Form 8868.			8b \$	0.			
c Balance due. Subtract line 8b from line 8a. Include your pa	yment wit	h this form, if required, by using		_			
EFTPS (Electronic Federal Tax Payment System). See instru			8c \$	0.			
		d Verification	_				
Under penalties of perjury. declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this fo	ing accomp	anying schedules and statements, and to the	best of my knowledge and be	elief,			
	·····	CA	Date > 8/9/U				
Signature ► Title ►			<del></del>	v 1-2011)			
Form 8868 (Rev. 1-2011)							
/1							
11		1 1	•				

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