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Form 990-PF

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

			e able to use a copy of this		rting requirements						
For	alen	dar year 2010, or tax year beginning		, and ending							
G C	heck	all that apply Initial return	Initial return of a fo	·	Final return	1					
		Amended return	Address chang	je <u>L</u>	Name change						
Nar	ne of	foundation			A Employer identification	number					
		THE DAVE & KATHLEEN D	ICESARIS FOUR	NDATION	46-0473605						
Nun	ber ar	nd street (or P.O. box number if mail is not delivered to street	•	Room/suite	B Telephone number						
		5 WHITE PINE CANYON R	OAD		801-566-92	01					
City	or to	wn, state, and ZIP code			C If exemption application is p	ending, check here					
		PARK CITY, UT 84060			D 1. Foreign organizations, check here						
H C	heck	type of organization X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	eeting the 85% test, proputation					
] Sec		Other taxable private founda	tion	E If private foundation sta	tus was terminated					
I Fa	ır ma	rket value of all assets at end of year J Accounting	ng method X Cash	Accrual	under section 507(b)(1)(A), check here					
(fr	om F	Part II, col (c), line 16)	her (specify)		F If the foundation is in a	60-month termination					
		170,999. (Part I, colu	mn (d) must be on cash b	pasis.)	under section 507(b)(1						
Pa	rt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements					
		(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)					
	1	Contributions, gifts, grants, etc., received	125,000.		N/A						
		Check If the foundation is not required to attach Sch B				,					
	3	Interest on savings and temporary cash investments	191.	191.		STATEMENT 1					
	4	Dividends and interest from securities									
	·	Gross rents									
		Net rental income or (loss)		·····							
_		Net gain or (loss) from sale of assets not on line 10	, , , , , , , , , , , , , , , , , , , ,		<u> </u>						
Ę		Gross sales price for all assets on line 6a		······							
Revenue	_	Capital gain net income (from Part IV, line 2)		0.	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	The state of the s					
æ		Net short-term capital gain		i							
	g	Income modifications	H ulman	 		1					
	40	Gross sales less returns and allowances		·····							
		Less Cost of goods sold				· [1.111H					
		Gross profit or (loss)		······	1	······					
	1	Other income		 							
		Total Add lines 1 through 11	125,191.	191.							
	13	Compensation of officers, directors, trustees, etcREC Other employee salaries and wages	0.	0.	<u> </u>	0.					
	14	Other employee salaries and wages	EIVED I								
		Pension plans, employee benefits	70								
ses	ľ	Legal fees & AUG 9									
ens	ı	Accounting fees	" - 411 Jul	· · · · · · · · · · · · · · · · · · ·							
ž		Other professional fees	E			 -					
ē	ı	Interest UGP	EN, LIT								
and Administrative Expens	l	Taxes									
str	19	Depreciation and depletion	-								
in	20	Occupancy									
þ	21	Travel, conferences, and meetings									
ğ	22	Printing and publications									
, ağ		Other expenses STMT 2	330.	0.		0.					
Operating	23	Total operating and administrative									
era	24	expenses. Add lines 13 through 23	330.	0.		0.					
Ö	25	· ·	36,791.	<u> </u>		36,791.					
N	25	Contributions, gifts, grants paid	30,751.			00,,,,,					
	26	Total expenses and disbursements.	37,121.	0.		36,791.					
;—	-	Add lines 24 and 25	31,121.			30,771					
;		Subtract line 26 from line 12	88,070.								
}		Excess of revenue over expenses and disbursements	00,070	191.							
•	1	Net investment income (if negative, enter -0-)	ļ	171	N/A	 					
0225		Adjusted net income (if negative, enter -0-)	1		T 14/12	5 000 DE (0040)					

THE DAVE & KATHLEEN DICESARIS FOUNDATION

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	
	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	82,929.	170,999.	170,999
2 Savings and temporary cash investments			
3 Accounts' receivable ►			
Less allowance for doubtful accounts		······	
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			<u> </u>
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock			
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			<u> </u>
15 Other assets (describe ►			
d C. Tahal accords (to be completed by all filers)	82,929.	170,999.	170,999
16 Total assets (to be completed by all filers)	02/3233	1,0/333.	= 1 0 1 2 2 2
17 Accounts payable and accrued expenses			
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe	-/		
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.		İ	
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	82,929.	170,999.	
30 Total net assets or fund balances	82,929.	170,999.	
31 Total liabilities and net assets/fund balances	82,929.	170,999.	
art III Analysis of Changes in Net Assets or Fund	d Balances		
Total net assets or fund balances at beginning of year - Part II, column (a),	line 30		
(must agree with end-of-year figure reported on prior year's return)		1	82,929
Enter amount from Part I, line 27a		2	88,070
Other increases not included in line 2 (itemize)		3	(
Add lines 1, 2, and 3		4	170,999
Decreases not included in line 2 (itemize)		5	(
Tatal and accords or fund halanous at and of year (line 4 minus line 5) - Part	II column (h) line 30	6	170,999

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Part IV Capital Gains and Losses for Tax on Investment Income (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) (b) How acquired (mo., day, yr.))-) or				
2-story brick warehouse, or common stock, 200 shs MLC Co.) 1a b NONE c (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) (g) Cost or other basis plus expense of sale (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) (g) Cost or other basis plus expense of sale (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) Gross sales price (f) Gain or (loss) (e) plus (f) minus (g) (f) Excess of col (i) over col (j), if any over col	(mo , day, yr)				
b NONE c d)-) or				
te (e) Gross sales price (1) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) plus (f) minus (g) to to the plus (f) minus (g) to to the plus (f) minus (g) to to the plus (f) minus (g) to the plus ()-) or				
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) (e) plus (f) minus (g) (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) (g) Cost or other basis (h) Gain or (loss) (e) plus (f) minus (g) (l) Gains (Col (h) gain minus (col (k), but not less than -Col (k))-) or				
(e) Gross sales price (f) Depreciation allowed (or allowable) (f) Cost or other basis plus expense of sale (e) plus (f) minus (g) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FM V as of 12/31/69 (ii) FM V as of 12/31/69 (iii) FM V as of 12/31/69 (iii) Gains (Col (h) gain minus (col (k), but not less than -C Losses (from col (h)) a b c d e 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7) (if (loss), enter -0- in Part I, line 7) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) if gain, also enter in Part I, line 8, column (c) if (loss), enter -0- in Part I, line 8)-) or				
(e) Gross sales price (f) Depreciation allowed (or allowable) (i) Gains (Col (h) gain minus (col (k), but not less than -Col (k), but not le)-) or				
(or allowable) plus expense of sale (e) plus (f) minus (g) plus expense of sale (e) plus (f) minus (g) plus expense of sale (e) plus (f) minus (g) plus expense of sale (e) plus (f) minus (g) plus expense of sale (e) plus (f) minus (g) plus expense of sale (e) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus expense of sale (i) plus (f) minus (g) plus (a) plus (a)-) or				
b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (ii) F M V as of 12/31/69 (iii) F M V as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iv) Excess of col (iv) over col (jv), if any b c d e 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8)-) or				
to de Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (ij) Adjusted basis as of 12/31/69 (iii) FMV as of 12/31/69 (iv) Excess of col (iv) over col (j), if any col (k), but not less than -C Losses (from col (h)) b c d e 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8, column (c) If gain, also enter or in Part I, line 8 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter or in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8)-) or				
to mplete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any a b c d 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 8, column (c) if (loss), enter -0- in Part I, line 8 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) if (loss), enter -0- in Part I, line 8)-) or				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) col (k), but not less than -C (losses (from col (h))) a b c d E Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) if gain, also enter in Part I, line 8, column (c) if (loss), enter -0- in Part I, line 8)-) or				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (i) F M V as of 12/31/69 (ii) F M V as of 12/31/69 (ii) F M V as of 12/31/69 (iii) F M V as of 12/31/69 (iv) Excess of col (i) over col (j), if any (iv) Excess of col (i) over col (j), if any (iv) Excess of col (i) over col (j), if any (iv) Excess of col (ii) over col (j), if any (ii) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (j), if any (iv) Excess of col (ii) over col (ii) ov)-) or				
(i) F M V as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any (k) Excess of col (i) over col (j) over c)-) or				
(i) F M V as of 12/31/69 (ii) F M V as of 12/31/69 (iii) F M V as of 12/31/69 (iv) Excess of cor (i) over col (j), if any (iv) Excess of cor (i) over col (j), if any Losses (from col (h)) (iv) Excess of cor (i) over col (j), if any (iv) Excess of cor (i) over col (j), if any (iv) Excess of cor (i) over col (j), if any (iv) Excess of cor (iv) over col (j), if any (iv) Excess of					
t C d E Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8 Also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8					
t d E Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8					
t Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8 3					
2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8					
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8					
2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8					
If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8					
If (loss), enter -0- in Part I, line 8					
Part v : Qualification under Section 4940(e) for Reduced Tax on Net Investment Income					
	**				
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)					
If section 4940(d)(2) applies, leave this part blank					
	¬., [ʊ].,				
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?	Yes X No				
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part 1 Enter the appropriate amount in each column for each year, see instructions before making any entries					
(a)	· · · · · · · · · · · · · · · · · · ·				
Base period years (u) Distributi	Distribution ratio				
6 000	.081131				
05 000 100	.204598				
2008 25,000. 122,191. 2007 40,637. 149,594.	.271649				
2006 26,000. 78,273.	.332171				
2005 8,350. 55,904.	.149363				
2000					
2 Total of line 1, column (d)	1.038912				
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years					
the foundation has been in existence if less than 5 years	.207782				
the foundation has been in existence in less than 5 years					
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	88,437.				
5 Multiply line 4 by line 3	10 276				
	10,3/0.				
6 Enter 1% of net investment income (1% of Part I, line 27b)	18,376.				
l !	2.				
7 Add lines 5 and 6	2.				
7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4					

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Form **990-PF** (2010)

	990-PF (2010) THE DAVE & KATHLEEN DICESARIS FOUNDATION 46-047 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4						
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1									
•••	Date of ruling or determination letter (attach copy of fetter if necessary-see instructions)									
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			2.						
_	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)									
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.						
3	Add lines 1 and 2			2.						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.						
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			2.						
	Credits/Payments Credits/Payments	***************************************								
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a									
	Exempt foreign organizations - tax withheld at source 6b									
	Tax paid with application for extension of time to file (Form 8868) 6c 2.									
	Backup withholding erroneously withheld 6d 6d									
	Total credits and payments Add lines 6a through 6d			2.						
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8									
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.						
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-								
	Enter the amount of line 10 to be Credited to 2011 estimated tax									
	rt VII-A Statements Regarding Activities									
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1	Yes	No						
	any political campaign?	1a		X						
h	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?									
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10		X						
u	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers \blacktriangleright \$									
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation									
6	managers > \$ 0 •									
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х						
-	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		х						
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X						
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		<u> </u>						
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х						
-	If "Yes," attach the statement required by General Instruction T.		<u> </u>							
R	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either									
J	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		х						
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х							
•	If "Yes," complete Part II, col. (c), and Part XV.	1	1							
Rэ	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE									
Ja	and the election to mind the regulation reports of min minor it is registered for introduction of .	1								
h	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	Х							
g	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	9		x						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х						
		orm 99 0)-PF	(2010)						

12-07-10

Х

Form **990-PF** (2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Form **990-PF** (2010)

Form 990-PF (2010)

Total. Add lines 1 through 3

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	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	<u>0.</u> 89,784.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	89,784.
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	O.
3	Subtract line 2 from line 1d	3	89,784.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,347.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	88,437.
6	Minimum investment return. Enter 5% of line 5	6	4,422.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	4,422.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,420.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,420.
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	4,420.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	36,791. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
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	36,791.
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	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	36,789.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	or 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	(d) 2010
1 Distributable amount for 2010 from Part XI,	· · · · · · · · · · · · · · · · · · ·			
line 7				4,420.
2 Undistributed income, if any, as of the end of 2010	**************************************	illinilliabili milandulumilin di		
a Enter amount for 2009 only			0.	
h Total for prior years	**************************************	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		0.		
3 Excess distributions carryover, if any, to 2010				7 man 7 m m m m
a From 2005 5,582.				
b From 2006 22, 153.				
c From 2007 33,305.				
d From 2008 18,947.				
e From 2009 2,650.				
f Total of lines 3a through e	82,637.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ►\$36,791.				
a Applied to 2009, but not more than line 2a			0.	
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.		111	·
d Applied to 2010 distributable amount				4,420.
e Remaining amount distributed out of corpus	32,371.			later to the graph,
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	115,008.			
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		0.		
assessed d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
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	5,582.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	109,426.			
10 Analysis of line 9				
a Excess from 2006 b Excess from 2007 22, 153. 33, 305.				
b Excess from 2007 33, 305.				
c Excess from 2008 18,947.				
d Excess from 2009 2,650.				
B Excess from 2010 32,371.				- 000 57
				Form 990-PF (2010)

	E & KATHLEE				73605 Page II
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · · · · ·			
foundation, and the ruling is effective fo		-	▶		
b Check box to indicate whether the foun-		ng foundation described		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0000	Prior 3 years	(4) 0007	(a) Takal
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for		ļ			
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
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 alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying	1				
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross		,			
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			<u> </u>		
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi			tributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed i	more than \$5,000) (See s	section 507(d)(2))			
NONE					
b List any managers of the foundation wi			(or an equally large portion	on of the ownership of a pa	artnership or
other entity) of which the foundation ha	is a 10% or greater intere	st			
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here 🕨 🔲 if the foundation					
the foundation makes gifts, grants, etc	(see instructions) to indi	viduals or organizations	under other conditions, co	omplete items 2a, b, c, and	l d
a The name, address, and telephone nun	nber of the person to who	m applications should b	e addressed		
DAVE DICESARIS					
SAME					
b The form in which applications should	be submitted and informa	ition and materials they s	should include		
WRITTEN	- <u> </u>	·			
c Any submission deadlines					
NONE					
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields	, kinds of institutions, or o	other factors	
NONE					
023601 12-07-10		 _			Form 990-PF (2010)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	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	Contribution	
a Paid during the year				
				i
	1			
SEE STATEMENT 3				
Total			▶ 3a	36,791.
b Approved for future payment				
NONE		i		
Total			▶ 3b	0.
<u>Total</u> 023611 12-07-10			- 30 F	orm 990-PF (2010)

Part XVI-A	Analy	sis of Ind	come-Pro	ducina /	Activities
				~~~	101111100

Enter gross amounts unless otherwise indicated.	Omoiatea t	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
1 Program service revenue.	code	Amount	code	Amount	function income
a					<del></del>
					<del></del>
d	-				
е				·	
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	191.	
4 Dividends and interest from securities		-			
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</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			_		
9 Net income or (loss) from special events		<u></u>			
10 Gross profit or (loss) from sales of inventory				<u> </u>	
11 Other revenue					
a					<del></del>
b			<del></del>		
<u> </u>	ļ <del></del>	···			
0					
8			<b>.</b>	191.	0
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)			0 0 1	13	101
(See worksheet in line 13 instructions to verify calculations.)	•			13	

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)  INTEREST EARNED IS USED TO FURTHER THE FOUNDATION CHARITABLE GIVING												
3	INTEREST	EARNED	IS	USED	TO	FURTHER	THE	FOUNDATION	CHARITABLE	GIVING			
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023621 12-07-10

Form **990-PF** (2010)

Form 990		)10) <b>T</b> H	HE D	AVE 8	<u> </u>	ATI	HLE!	EN	DIC	CESA	RIS	FC	DUND.	ATIC	N		4	<u>6-0</u>	4736	<u> 505</u>	Pa	ge 13
Part )	XVII	Informati		•	_	rans	sfers	То	and	Trans	sactio	ons a	and R	lelatio	onst	nips \	With I	None	charit	able	В	
		Exempt C	<u>Organi</u>	zation	s																1	r
1 Did	the org	anization directly	y or indir	ectly enga	age in .	апу о	of the fo	ollowi	ing with	h any ot	her orga	anızatı	ion desc	ribed in	sectio	on 501	(c) of				Yes	No
		other than section								-	political	l orga	nizations	5?								
		rom the reporting	g founda	ition to a r	noncha	arıtab	ile exer	npt o	rganiza	ation of												.,
	Cash	•			-	-														1a(1)	1	X
٠,	Other																		-	1a(2)		X
	er trans																		l			v
		of assets to a nor		-	-			_											r	1b(1)	ļ	X
		ases of assets fro				npt or	rganiza	tion											г	1b(2)		X
1-7		of facilities, equi		or other as	ssets														Г	1b(3)		X
		ursement arrang																	T I	1b(4)	<del> </del> -	X
		or loan guarante				- d													r	1 <u>b(5)</u> 1b(6)		X
٠,		mance of service		•			-												-	10(0) 1c	<del> </del>	X
	-	facilities, equipm er to any of the a		-							/h) ch/	ould a	huave ch	ow the	fair m	arkat v	alua of	the ac	L ade ath		L	
		given by the rep																			, ,	
		the value of the	-							,5 (11411 1	un muir	vot vai		y transa	01.011	0. 0	ing uni	ungum	J., J., J.,			
(a) Line n		(b) Amount involv								mpt orga	anization	1		d) Descr	notion	of transf	fers, trans	sactions	s, and sha	nng a	rangeme	ents
<del>(-,-</del>	<u> </u>				<del>'</del>			/A		<del></del>				· ·	•							
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		dation directly or		-							exempt	orgar	nizations	describ	ed					1	[	] No
		501(c) of the Cod			tion 50	01(c)(	(3)) or	in sec	ction 5	277										Yes	LA	ם או
b_if "	Yes," co	mplete the follow						_	1 (6)	Type of	organia.	ration	T			c) Doc	crintion	of rola	tionship			
			N/A	anization					+ (0)	Type of	vigailiz	Lation	<del> </del>			U) Desi	Ciption	01 1010				
-			N/A	_									1	_								
									+			_	<u> </u>									
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				-					+-													
		r penalties of penury															my knov	wtedge 8	and belief	, it is t	rue, com	ect,
Sign	and c	omplete Declaration	n of prepa	rer fother th	an taxp	payero	or fiducia	ary) is	based o	on all info			_	has any				_				
Here		XII	4-1	/  (				•			18.	-18	5-11		7	Ri	ISTE	E				
	1	Signature of office	cer or tru	stee							Date	,		_ ▶	T	ıtle						-
		Print/Type prepa	arer's na	ime			Prepa	rer's	signati	ure	7		Date		$\Box$	Check		ıf F	PTIN			
							0	//	1/1.	ŊIJ	7		0	N 11		self- e	mploye	d				
Paid		RANDY S	SELL	ERS		A	1000	MA	Da		_		8.	<u>10</u> .11								
Prep	arer	Firm's name	• PRO	FESS:	ION	IAL	BU	S/II	NES	S AI	OVIS	OR	S, L	,LC		Firm'	s EIN	>				
Use	Only															<u> </u>						

Form **990-PF** (2010)

801-296-1060

Firm's address > 1706 SOUTH 500 WEST, SUITE 200 BOUNTIFUL, UT 84010

Phone no

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

THE DAVE & KATHLEEN DICESARIS FOUNDATION

OMB No 1545-0047

2010

Name of the organization

Employer identification number

46-0473605

Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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** X 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 B (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

# THE DAVE & KATHLEEN DICESARIS FOUNDATION

46-0473605

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DAVID A DICESARIS  5 WHITE PINE CANYON ROAD  PARK CITY, UT 84060	\$\$.	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
		<b>\$</b>	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
		<b>\$</b>	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
		<b> \$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

# THE DAVE & . KATHLEEN DICESARIS FOUNDATION

46-0473605

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
		<b>\$</b>	
(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
		<b></b> \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	

Schedule B (Ferm 990, 990-EZ, or 990-PF) (2010) Page of Part III Name of organization Employer identification number 46-0473605 THE DAVE & KATHLEEN DICESARIS FOUNDATION Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

023454 12-23-10

		<del></del>			
FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT	1
SOURCE .				AMOUNT	
WELLS FARGO				1	91.
TOTAL TO FORM 990-PF, PART I,	, LINE 3, CO	LUMN A		1	91.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
MISC	330.	0.			0.
TO FORM 990-PF, PG 1, LN 23	330.	0.			0.

	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 3
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
PROVIDENT FUNDING 5 WHITE PINE CANYON RD PARK CITY, UT 84060	NONE HOUSING FOR NEEDY FAMILY	N/A	13,783.
NCC-PIANO FUND 5 WHITE PINE CANYON RD PARK CITY, UT 84060	NONE EDUCATION-MUSIC	N/A	1,000.
IGOE ADMINISTRATIVE 5 WHITE PINE CANYON RD PARK CITY, UT 84060	NONE HOUSING FOR NEEDY FAMILY	N/A	7,008.
THE FOEHL CHILDREN'S FUND 299 S. MAIN ST. 7THFLR SALT LAKE CITY, UT 84111	NONE HELP NEEDY FAMILY	N/A	1,500.
YOUNG LIFE PO BOX 520 COLORADO SPRINGS, CO 80901	NONE CHARITY	ЕХЕМРТ	2,500.
POMONA COLLEGE 550 NORTH COLLEGE AVENUE CLAREMONT, CA 91711	NONE EDUCATION	EXEMPT	5,000.
MARLENE NAFTS 5 WHITE PINE CANYON RD PARK CITY, UT 84060	NONE TANZANIA ORPHANAGE	N/A	1,000.
PARK CITY DAY SCHOOL 5 WHITE PINE CANYON RD PARK CITY, UT 84060	NONE EDUCATION	N/A	2,500.

THE	DAVE	&	KATHLEEN	DICESARIS	FOUNDATION

46-0473605

WARNER HEATING & AIR
5 WHITE PINE CANYON RD PARK
CITY, UT 84060

NONE HELP NEEDY FAMILIES TO

HEAT THEIR HOME

N/A

2,500.

•

36,791.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

20

## 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

internal rie	value selvice	arate app	ilcation toi, each return.			
• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			X
<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of this	form).		
Do not d	complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previously fil	ed Fo	rm 8868.	
Electror	nic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of time to	o file (6	months for a corpo	oration
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 88	368 to request an ex	xtension
	o file any of the forms listed in Part I or Part II with the ex		1		•	
	Benefit Contracts, which must be sent to the IRS in pap	-				
	v.irs.gov/efile and click on e-file for Chanties & Nonprofits					,
Part I			bmit original (no copies needed).			
	ration required to file Form 990-T and requesting an autor			piete		
Part I on	· · · · · · · · · · · · · · · · · · ·			.р.о.о	•	
All other	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to request an	exten	sion of time	
Type or	Name of exempt organization			Employer identification number		
print	THE DAVE & KATHLEEN DICESAI	סדכ הי	OTIND A TON	1	46-0473605	
File by the	Number of the design of the DO have a		,		0-04/3003	
due date fo filing your return, See	Number, street, and room or suite no. If a P.O. box, s  WHITE PINE CANYON ROAD	ee instruc	tions.			
instructions	on,, to me of poor office, or and all the control of the	oreign add	Iress, see instructions.			
	PARK CITY, UT 84060					
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Applicat	tion	Return	Application			Return
ls For		Code	Is For			Code
Form 99	0	01	Form 990-T (corporation)			07
Form 99	0-BL	02	Form 1041-A			08
Form 99		03	Form 4720			09
Form 99		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870		·	12
10111100	DAVID A DICESAL		1.0			<del></del>
• The h	ooks are in the care of ▶ 7655 TALL OAKS		E. PARK CITY. UTAH -	8	4098	
	hone No. ► 801–566–9201		FAX No.			
	organization does not have an office or place of business	e in tha l lr	· · · · · · · · · · · · · · · · · · ·			
	is for a Group Return, enter the organization's four digit			e is for	r the whole group o	heck this
	. If it is for part of the group, check this box					
	equest an automatic 3-month (6 months for a corporation				OLO THO OXIGHOIOH IO	.01.
	•	-	tion return for the organization named a		The extension	
io	for the organization's return for:	t Organiza	inor recom for the organization haries a	2010.	THE EXICHSION	
	X calendar year 2010 or					
	tax year beginning	20	d ending			
	Lax year beginning	, an	d ending		<del>_</del> '	
2 If 1	the tax year entered in line 1 is for less than 12 months, c	hook rose	on: Initial return Fina	d retur	n	
Z	<b>—</b> ·	HECK IEAS	on	u 101011	-	
L	Change in accounting period	_				
3a If 1	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
no	nrefundable credits. See instructions.			3a	\$	0.
b If t	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	-7		
	timated tax payments made. Include any prior year overp		•	3b	\$	0.
	alance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).	-	:	3c	\$	0.
	. If you are going to make an electronic fund withdrawal v			-	EO for payment inst	
	For Paperwork Reduction Act Notice, see Instructions				Form 8868 (Re	
	· · · · · · · · · · · · · · · · · · ·				•	

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Form 8868 (Rev. 1-2011)							
Page 2  If you are filling 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, comple</li> </ul>	te only Pa	art I (on page 1).	1				
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							
File by the THE DAVE & KATHLEEN DICESAR			46-0473605				
Number, street, and room or suite no. If a P.O. box, so due date for filling your	ee instruc	tions.					
return. See City, town or post office, state, and ZIP code. For a form instructions. PARK CITY, UT 84060	oreign add	iress, see instructions.					
			<del></del>				
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				
Is For	Code	Is For	Code				
Form 990	01	3 (15 3) (S. S. S					
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		natic 3-month extension on a previou	sly filed Form 8868.				
DAVID A DICESAL		'	:				
<ul> <li>The books are in the care of ► 7655 TALL OAKS</li> </ul>	DRIV	E, PARK CITY, UTAH -	- 84098 i				
Telephone No. ► 801-566-9201		FAX No. ▶					
• If the organization does not have an office or place of business	s in the Ur	nited States, check this box	<b>&gt;</b>				
• If this is for a Group Return, enter the organization's four digit (	Group Exe	emption Number (GEN) If th	is is for the whole group, check this				
		ch a list with the names and EINs of all	members the extension is for.				
4 I request an additional 3-month extension of time until 1	1OAEW	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, confidence in accounting period	heck reas	on: Initial return	Final return				
7 State in detail why you need the extension INFORMATION NEEDED TO PREPARE	מ זגמ	CORDARE RETURN NOT V	ET AVATLABLE				
INFORMATION NEEDED TO FREE AND	AN A	SCOIGHT REPORT HOT T	1				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069. e	nter the tentative tax, less any					
nonrefundable credits. See instructions.	4000, 0		8a \$ 2.				
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and estimated	K.S.				
tax payments made. Include any prior year overpayment all							
previously with Form 8868.			8b \$ 0.				
c Balance due. Subtract line 8b from line 8a. Include your pa	yment wit	th this form, if required, by using					
EFTPS (Electronic Federal Tax Payment System). See instru	uctions.		8c \$ 2.				
Signa	ature ar	nd Verification					
Under penalties of perjury, I declare that I have examined this form, includ it is true, correct, and complete, and that Vary authorized to prepare this for	ing accomp im.	panying schedules and statements, and to the	e best of my knowledge and belief,				
Signature ► Date ► 8.9.1/							
Form 8868 (Rev. 1-2011)							
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