

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

SCANNED MAY 25 2011

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

2010

OMB No. 1545-0052

	Tal Hevelic			on may be able	to use a copy							_
		r year 2010, or tax year beginni		11.			2010, and		ding_		, 20	_
G	heck all	that apply. Initial retu		۾ نسا		of a former		-		Final retu	rn	
		Amended	retur	'n	Address	change		Nam	ne change		 	_
	e of fou									-	cation number	
TH	E AR	CHER FAMILY CHAR	LTA	BLE CO	RPORAT	'ION_			87-04		···	_
		street (or P.O box number if mail is n	ot deli	vered to street a	address)		Room/si	uite	1 '		r (see instructions)	
<u>PO</u>	BOX	58031							1	<u>531-96</u>		_
,	-	, state, and ZIP code							C If exem	pt application	ıs pending, check here 🕨	Ц
<u>Sa</u>	lt L	ake City UT 8415							D 1. For	eign organiz	ations, check here	┙
H	heck typ	pe of organization: 🛮 🔀 Sectior	501(c)(3) exempt							ins meeting the 85% Id attach computation	
	Section 4	1947(a)(1) nonexempt charitable				te foundatio	n			ate toundationated attenue at the second at	on status was section	_
I Fa	ır marke	et value of all assets at end of	J	Accounting r	\mathbf{M}	Cash	Accrual		1 ' ')(1)(A), chec	L	╝
ye	ar (from	Part II, col (c), line 16)		Other (sp						roundation is lation under	n a 60-month section r	_
▶\$		496,297		art I, column	(d) must be	on cash bas	sis.))(1)(B), chec		
Pa	(Th (c), am	alysis of Revenue and Expense the total of amounts in columns (b), & (d) may not necessarily equal tounts in column (a) (see instruction	, the	(a) Reve	ses per		nvestment ome	t		sted net ome	(d) Disbursements for charitable purposes (cash basis only)	_
		ntributions, gifts, grants, etc , received tach sc <u>he</u> dule)		2	10,031							
	_	rtach schedule)	uired									
	3 Int	erest on savings and temp. cash investr	nents									_
	4 Dr	vidends and interest from securit	es		1,806		1,806	5	·			
	5 a Gr	ross rents									and adjusted to beautiful	_
_		et rental come or (loss)								Ì	のはなっていい。)=:
R E		et gain/(loss) from sale of assets not on l	ne 10		21					loof.	the state of the same of the s	 ~_
٧		oss sales price for assets on line 6a	9							, V	May is a	30
E		pital gain net income (from Part IV, line :	2)				2	1		ş,}	"', × 4 Z011	\mathbb{F}^{ζ}
N	8 Ne	et short-term capital gain) o	******	
U E	9 Inc	come modifications									いなってはいい	
_		oss sales less ns & allowances	0								waster water the party of	***
		ss Cost of ods sold										
	c Gı	ross profit or (loss) (attach sched	ule)									
	11 O	ther income (attach schedule) , ,	#1		15,629		15,629	9				•••
		otal. Add lines 1 through 11		1	96,229		13,802	2		0		
O P		ectors, trustees, etc			0			_				_
Ë	14 Ot	ther employee salaries and wage	3					_				_
R	15 Pe	ension plans, employee benefits										_
A T	16 a Le	egal fees (attach schedule)	#2	_	508		508	3			508	_
ŀ	b Ac	counting fees (attach schedule)										_
N G	c O1	ther professional fees (attach sche	dule)					_				_
&	1	terest,,,,						_				_
A	l	AXES (attach schedule) (see instruction			83		80	3			83	
D		epreciation (attach sch.) and deple	tion					\perp				
M	l	ccupancy						_			<u>-</u>	_
Ň	l	ravel, conferences, and meetings						\perp				_
E		anting and publications						_				_
X P	23 O1	ther expenses (attach schedule)						\perp				_
Ε		otal operating and administrativ			E 0.1		59:	,		0	591	
S	1	kpenses. Add lines 13 through 2	ס		591 14,400		39.	+			14,400	_
N S E S	1	ontributions, gifts, grants paid stallexp & disbursements Add lines 24 a	nd of		14,400	 	59:	1		0	14,400	-
<u> </u>		ubtract line 26 from line 12	u Z5	 	,	<u> </u>		-		······································	14,091	-
	∣ aEx	xcess of revenue over expense	s	1	81,238							
		nd disbursements et investment income (if neg , ent.	ar -N-\		22,230	 		0				
		djusted net Income (if neg , enter -				1	<u> </u>	+		0		
	<u> </u>	ajacted not modine (it neg , enter-	U- J	<u> </u>		<u> </u>		1			- 000 DE :	

For Paperwork Reduction Act Notice, see the instructions.

Form **990–PF** (2010)

JVA

Part II Balance Sheets description column should be for end-of-year amounts only (See inst.) 1 Cash hon-interest-bearing	
1 Cash hon-interest-bearing	55 10,855
2 Savings and temporary cash investments . 23,641 10,85	10,855
3 Accounts receivable ►	
Less allowance for doubtful accts ▶	
4 Pledges receivable ▶	
Less: allowance for doubtful accts ▶	j
5 Grants receivable	
6 Receivables due from officers, directors, trustees, and other	
disqualified persons (attach schedule) (see the instructions)	
7 Other notes and loans	
A receivable (attach schedule) ▶ S Less allowance for doubtful accounts ▶	
S November S November S November S November S November S November S November Novem	
S	
S 10a Investments U.S and state govt obligations (attach schedule)	
b Investments corporate stock (attach schedule) #4. 186,644 186,26	291,040
c Investments corporate bonds (attach schedule)	,
11 Investments land, buildings,	
and equipment basis Less accumulated depreciation	
(attach schedule)	
13 Investments other (attach schedule) #5	194,402
14 Land, buildings, and equipment basis >	
Less accumulated depreciation (attach schedule)	İ
(attach schedule) 15 Other assets (describe	
16 Total assets (to be completed by all filers see the	
instructions. Also, see page 1, item l) 210,285 391,52	23 496,297
L 17 Accounts payable and accrued expenses	
1 to County workly	
B 19 Deferred revenue	
L 20 Loans from officers, directors, trustees, and other disqualified persons	
T 21 Mortgages and other notes payable (attach schedule) L 22 Other liabilities (describe ►)	
S 23 Total liabilities (add lines 17 through 22)	0
Foundations that follow SFAS 117, check here	*
and complete lines 24 through 26 and lines 30 and 31	
MFI I	
E U 24 Unrestricted	
A B S A Foundations that do not follow SFAS 117, ck. here ► X and complete lines 27 through 31. T A S N Capital stock, trust principal, or current funds	
S A Foundations that do not follow 37A3 117, ck. here F A and complete lines 27 through 31.	
TA 27 Capital stock, trust principal, or current funds	23
S N 27 Capital stock, trust principal, or current trinds	
O E	
	23
30 Total net assets or fund balances (see the instructions) 210,285 391,5. 31 Total liabilities and net assets/fund balances (see the inst.) 210,285 391,5.	
Part III Analysis of Changes in Net Assets or Fund Balances	23
and of constitution was related an invariant and making the constitution of the consti	1 210,285
	2 181,238
	3
	4 391,523
4 Add lines 1, 2, and 3	5
	6 391,523
Total net assets or fund balances at end of year (line 4 minus line 5) Part II, column (b), line 30 .] JVA 10 990PF2 TWF 39329 Copyright Forms (Software Only) - 2010 TW	Form 990–PF (2010)

Part IV Capital Gains	and Losses for Tax on Inv	estment Inco	me		
• •	ne kınd(s) of property sold (e g , rea		(b) How acquired P Purchase	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr.)
1a See 'attachment		20 00)	D Donation	(mo ; day; jii)	(mon, day, ym)
b	π,			···	
c					
d		_			
e	-				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	r other basis ense of sale	• • •	n or (loss) f) minus (g)
a			_		
b					
С					
d					
е		ļ _.			
Complete only for assets sho	owing gain in column (h) and owne	d by the foundation	on on 12/31/69	(I) Gains (Col	(h) gaın mınus
(I) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 , ,	ss of col (ı) I (ı), ıf any		less than -0-) or rom col (h))
a					
b					
_ C	· <u>-</u>				
d					
<u>e</u>		<u> </u>			
2 Capital gain net income or (n	—	also enter in Part I enter -0- in Part	l, line 7	2	21
If gain, also enter in Part I, lin	r (loss) as defined in sections 1222 e 8, column (c) (see the instruction		}		0.1
If (loss), enter -0- in Part I, lii			on Not Investo	3	21
	Jnder Section 4940(e) for vate foundations subject to the sec				
	re this part blank section 4942 tax on the distributab qualify under section 4940(e). Do r			od?	Yes 🛚 No
1 Enter the appropriate amour	nt in each column for each year, se	e the instructions	before making any e	entries	
(a) Base period years	(b)		(c) Net value of	Dis	(d) stribution ratio
Calendar year (or tax year beg. in)	Adjusted qualifying distribu	tions non	icharitable-use assets	(col (b)	divided by col (c))
2009	6,4		262,02		0.024683
2008	24,7		392,74		0.063015
2007	27,5		551,63		0.050003
2006	31,6		612,47		0.051599
2005	33,9	82	593,42	8	0.057264
• Takal of load and and some (al)					0.246560
2 Total of line 1, column (d)		, , , , , , , , , , , , , , , , , , ,	by E or by the num	2	0.240300
_	r the 5-year base period divide been in existence if less than 5 yea			3	0.049312
4 Enter the net value of nonch	naritable-use assets for 2010 from	Part X, line 5		4	476,878
5 Multiply line 4 by line 3 .		• •		5	23,516
6 Enter 1% of net investment	income (1% of Part I, line 27b).			6	
7 Add lines 5 and 6				7	23,516
8 Enter qualifying distributions	s from Part XII, line 4			8	14,991
If line 8 is equal to or greate	er than line 7, check the box in Part	VI, line 1b, and co	omplete that part us	ng a 1% tax rate Se	ee the Part VI

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see the ins	tructio	ons)	
1 a	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 letter if necessary see inst.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			0
3	Add lines 1 and 2		-	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on Investment Income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a Frempt foreign organizations tax withheld at source 6b			
b	ZAOTHET TOTOIGH OF GAMELATIONS AND			
C	,			
d	Backup withholding erroneously withheld			12
7 8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpald	_		12
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 12 Refunded ▶ 11	_		
	t VII-A Statements Regarding Activities			
1 a			Yes	No
	Intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the 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	-	·	ĺ
	or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ 0 (2) On foundation managers ► \$ 0			ļ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$ 0			l
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			Į.
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4 a	J , , , , , , , , , , , , , , , , , , ,	4a	N/A	
_	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5	14/2	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	-		<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		
0	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	x	İ
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & Part XV	7	X	
8 а	The state of the s		<u> </u>	1
	▶UT			
b	• • • • • • • • • • • • • • • • • • • •		v	1
_	designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	Ī		f
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete	9		x
10	Part XIV	۲	 	1
10	and addresses #8	10	x	
	- miles manufacture () , , , , , , , , , , , , , , , , , ,			

JVA

3b

2b

X

X

Х

enterprise at any time during the year?

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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine

.

to all years listed, answer "No" and attach statement -- see instructions) ...

3a Did the foundation hold more than a 2% direct or indirect interest in any business

20 , 20 , 20

if the foundation had excess business holdings in 2010)

		Pa	age 6
Ţ	-		
5	b		X
5	b		
6	b		Χ
7	b		X
mp	lo	yees	,
xpe her	ens allo		es
xpe	ens	e acco	ount.

Par	VII-B Statements Regarding Activ	ities for Which I	Form 4/20 May Be	Requirea (con	tinued)	······································	····		
5 a	During the year did the foundation pay or incur	any amount to:							
	(1) Carry on propaganda, or otherwise attemp	t to influence legislation	on (section 4945(e))?	. U Yes	X No	•	1		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry								
	on, directly or indirectly, any voter registration drive?								
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								
	(4) Provide a grant to an organization other than a charitable, etc., organization described								
	in section 509(a)(1), (2), or (3), or section 4	1940(d)(2)? (see ınstru	ictions)	, U Yes	X No	' [
	(5) Provide for any purpose other than religiou				F-7		1		
	educational purposes, or for the prevention			∐ Yes	X No	·			
b	If any answer is "Yes" to 5a(1)-(5), did any of the						١,,		
	Regulations section 53 4945 or in a current noti			ons)?	· · · · · <u>- ·</u>	- t	X	-	
	Organizations relying on a current notice regard	•		•	•] []	1		
С	If the answer is "Yes" to question 5a(4), does the			37 / 7 D	п.,		ļ		
	because it maintained expenditure responsibilit	y for the grant?		.N/A ∐ Yes	∐ No	'	. 1		
_	If "Yes," attach the statement required by Regu								
6a	Did the foundation, during the year, receive any				X No				
	·		the on a normanal honofe	∐ Yes	Д КО	6b	X		
р	Did the foundation, during the year, pay premiu	ims, airectly of mairec	ally, on a personal benefit	Commact: . ,		60	^	.	
72	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundary	tion a party to a probi	hitod tay cholter transact	ion? Yes	X No	.			
	If "Yes," did the foundation receive any proceed				E4	7b	x		
	t VIII Information About Officers,				v Paid			-	
تست.	and Contractors	,	•	J , J	•	•	•		
1	List all officers, directors, trustees, foundation	on managers and the	elr compensation (see la	nstructions).	_				
	(b) Title, and avg (c) Compensation (d) Contributions to (e) Expense account								
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	and deferred co	mp	other allo	wances		
Se	e attachment #10								
			ļ						
					1				
		·· '=-						_	
2	Compensation of five highest-paid employe if none, enter "NONE."	es (other than those	Included on line 1 s	ee Instructions).					
	il lione, enter NONE.			(d) Contribution	s to	 -		-	
(Name and address of each employee paid	(b) Title, and avg. hours per week	(c) Compensation	employee ben	efit ((e) Expense		,	
	more than \$50,000	devoted to position	(c) Compensation	plans and defe		other allo	wances		
NO	NE.			compensatio				-	
110.									
			1						
				1					
				1					
Tota	I number of other employees paid over \$50,000					•		 o	

87-0491844

JVA

Form 990-PF (2010)THE ARCHER FAMILY CHARITAB

Form 990-PF (20					87-0491844	Pag
Part VIII	intormation	About OII	cers, Direct	ors, Trustees,	Foundation Managers,	Highly Paid Employees,

and Contractors (continued)		<u> </u>
3 Five highest-paid independent contractors for professional services	(see the Instructions). If none, enter "	NONE."
(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		
		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele		Expenses
of organizations and other beneficiaries served, conferences convened, research papers pr	oduced, etc	
1		
		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (se		
Describe the two largest program-related investments made by the foundation	on during the tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments. See the instructions.		
3		
Total. Add lines 1 through 3		

Page	8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	lations,	
	see the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purpòses		
а	Average monthly fair market value of securities	1a	271,615
b	Average of monthly cash balances	1b	18,123
c	Fair market value of all other assets (see the instructions)	1c	194,402
d	Total (add lines 1a, b, and c)	1d	484,140
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	484,140
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	the instructions)	4	7,262
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	476,878
6	Minimum investment return. Enter 5% of line 5	6	23,844
Pa	TXI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	23,844
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)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	23,844
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	23,844
6	Deduction from distributable amount (see the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1,	7	23,844
ra	Qualifying Distributions (see the 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	14,991
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	
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	14,991
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,991
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	he foundation	
	qualifies for the section 4940(e) reduction of tax in those years		
	10 000E0 TWE 2025 Coursely Source Oak 2020 TW	F	990_PE (2010

Pai	rt XIII Undistributed Income (see	the instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				23,844
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only			1	
	7 Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2010	·····			····
	From 2005				
	·				
	From 2006 .				
	From 2007				
	From 2008 . 4,859				
	From 2009				
f	Total of lines 3a through e	4,859			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$14,991				
а	Applied to 2009, but not more than line 2a			1	
t	Applied to undistributed income of prior years				
	(Election required see the instructions)				
c	Treated as distributions out of corpus				
	(Election required see the instructions)				
c	Applied to 2010 distributable amount				14,990
€	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010 .	4,859			4,859
	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income. Subtract				
٠	lung the frame lung Ob				
•	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				
(d Subtract line 6c from line 6b Taxable				
	amount see the instructions				
•	e Undistributed income for 2009 Subtract				
	line 4a from line 2a Taxable amount				
	see the instructions				
1	f Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2011				3,995
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2005	. "			
-	not applied on line 5 or line 7 (see the				
	instructions)				
9	Excess distributions carryover to 2011.				
,	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	· •				
	a Excess from 2006	1			
	b Excess from 2007 .	-			
	c Excess from 2008	1			
	d Excess from 2009	4			
- (e Excess from 2010	l l	}	3	1

JVA

Par	XIV Private Operating Found	ations (see instru	ctions and Part VII-A	A, question 9)			
1a	If the foundation has received a ruling or		•	- 1			
	foundation, and the ruling is effective for 2010, enter the date of the ruling						
þ	Check box to indicate whether the found	ation is a private op-	erating foundation d	escribed in section	4942(J)(3) or	4942(J)(5)	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total	
	income from Part I or the minimum investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	ļ , , ,	
	year listed						
b	85% of line 2a						
С	Qualifying distributions from Part XII, line 4 for each year listed	_		_			
d	Amounts included in line 2c not used directly for active conduct exempt act	· —					
е	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.						
а	"Assets" alternative test enter						
	(1) Value of all assets						
	(2) Value of assets qualifying under		•				
b	section 4942(j)(3)(B)(i) "Endowment" alternative test enter				-		
D	2/3 of min investment return shown in Part X, line 6 for each year listed					. <u> </u>	
c	"Support" alternative test enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a) (5)), or royalties)						
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3) (B)(III)						
	(3) Largest amount of support from an exempt organization						
	(4) Gross investment income						
Pa	t XV Supplementary Informat			the foundatio	n had \$5,000 or	more in assets	
	at any time during the y		instructions.)				
1	Information Regarding Foundation Ma	_					
а	List any managers of the foundation who				eceived by the found	ation before the	
	close of any tax year (but only if they have	e contributed more	than \$5,000) (See s	section 507(d)(2).)			
	None		of the stack of a son	noration (or an original	ally large parties of th	no ownorohin	
b	List any managers of the foundation who of a partnership or other entity) of which				ally large portion of the	ie ownersnip	
	None	ine iouridation rids	a 1070 or greater inte				
2	Information Regarding Contribution, G	Frant Gift Loan Sc	cholarship, etc., Pro	ograms:			
_	Check here ▶ ☐ if the foundation only				ns and does not accep	ot unsolicited	
	requests for funds. If the foundation make						
	complete items 2a, b, c, and d	3 , 3 ,	•	•			
a	The name, address, and telephone num	ber of the person to	whom applications	should be address	ed		
	e attachment 11						
b	The form in which applications should be	= submitted and info	ormation and materia	ls they should inclu	ıde		
See	e attachment 11						
С	Any submission deadlines.						
See	e attachment 11						
	Any restrictions or limitations on awards,	such as by geograp	ohical areas, charitat	ole fields, kinds of i	nstitutions, or other fa	ctors	
	e attachment 11		•				

87-0491844 THE ARCHER FAMILY CHARITAB Form 990-PF (2010) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Recipient show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See attachment #12 ▶ 3a Approved for future payment

Business Amount Excl Amount (5)	Amount Excl Amount (See the instructions)
a b c d d g Fees & contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments. 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property b Not 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 9 Net income or (loss) from sales of inventory 110 Other revenue a b See attachment #13 c d e 12 Sublotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
b c d d e e e e e e e e e e e e e e e e e	14 1,806
g Fees & contracts from government agencies g Membership dues and assessments g Interest on savings and temporary cash investments g Inter	14 1,806
d e f g Fees & contracts from government agencies R Membership dues and assessments Interest on savings and temporary cash investments Interest on savings and	14 1,806
g Fees & contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Interest on savings and interest on savings and interest on savings and interest on savings and interest on savings and interest on sa	14 1,806
g Fees & contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments. Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property. b Not debt-financed property. interest on savings and temporary cash investments. Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property. b Not debt-financed property. interest income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) 1 Total. Add line 12, columns (b), (d), and (e). 13 be worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	14 1,806
Membership dues and assessments Interest on savings and temporary cash investments. Dividends and interest from securities Not rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Other investment income Gain or (loss) from sales of assets other than inventory Not income or (loss) from special events. Gross profit or (loss) from sales of inventory Other revenue a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Subtotal Add columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) Part XVI—B Relationship of Activities to the Accomplishment of Exempt Purposes	14 1,806
Membership dues and assessments Interest on savings and temporary cash investments. Dividends and interest from securities Interest on savings and temporary cash investments. Dividends and interest from securities Interest on savings and temporary cash investments. Dividends and interest from securities Interest on savings and temporary cash investments. Interest on savings and temporary cash investments. Interest on savings and temporary cash investments. Interest on savings and temporary cash investment. Interest on savings and tempora	14 1,806
Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Collection of (loss) from personal property Collection of (loss) from personal property Collection of (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Subtotal Add columns (b), (d), and (e) Subtotal Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	14 1,806
Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Vother investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events . Gross profit or (loss) from sales of inventory Other revenue a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	14 1,806
a Debt-financed property	
b Not debt-financed property Not rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Not income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). Be worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). Be worksheet in line 13 instructions to verify calculations.) Fart XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
7 Other investment income 3 Gain or (loss) from sales of assets other than inventory 3 Net income or (loss) from special events 4 Gross profit or (loss) from sales of inventory 5 Other revenue a 5 See attachment #13 6 C 7 C 7 C 8 Subtotal Add columns (b), (d), and (e) 8 Subtotal Add columns (b), (d), and (e) 8 Total. Add line 12, columns (b), (d), and (e) 8 Relationship of Activities to the Accomplishment of Exempt Purposes	
3 Gain or (loss) from sales of assets other than inventory 3 Net income or (loss) from special events 5 Gross profit or (loss) from sales of inventory 1 Other revenue: a b See attachment #13 c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e). e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
Gross profit or (loss) from sales of inventory Other revenue: a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) Figure XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	18 21
Other revenue a b See attachment #13 c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
b See attachment #13 c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e). ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	15.600
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) Tart XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	-15,629
e Subtotal Add columns (b), (d), and (e) 0 -13,802 3 Total. Add line 12, columns (b), (d), and (e)	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e). 9 Every worksheet in line 13 instructions to verify calculations.) 13 Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
B Total. Add line 12, columns (b), (d), and (e). ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	0 -13 802
ee worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	40 13 00
art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
	constichment of Evernt Burnages
The New Hypiain below now each activity for which income is reported in column tell of Fait Avi-A continuated importantly to t	
accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the in	loses (other than by providing funds for such purposes) (See the instructions
accomplication of the real action 5000 (cities tital 2) promise and promise	

JVA

orm	990-	<u> </u>		AMILY CHA								_{je} 13
Par	t X\			ansfers To an	d Transact	ions an	d Relati	onship	s With No	ncharit	able	
1	Did 1	Exempt Orgathe organization directly		age in any of the fo	ollowing with a	nv other o	rganizatio	n describe	ed in section		Yes	No
•		c) of the Code (other the										
а	,	sfers from the reporting	• •				J 1	J				
		Cash			, ,					1a(1)		Х
		Other assets								1a(2)		X
b	Othe	er transactions										
	(1)	Sales of assets to a non	charitable exemp	ot organization						1b(1)		Х
	(2)	Purchases of assets from	m a noncharitabl	e exempt organiza	ition					1b(2)		Х
	(3)	Rental of facilities, equip	oment, or other a	ssets .			•			1b(3)		X
		Reimbursement arrange					•			1b(4)		X
	(5)	Loans or loan guarantee	es							1b(5)		Х
	(6)	Performance of services	s or membership							1b(6)		X
C	Sha	ring of facilities, equipme	ent, mailing lists,	other assets, or pa	aid employees					1c		X
2 a	Is th	ne foundation directly or	indirectly affiliate	d with, or related t	o, one or more	e tax-exem	npt organiz	zations de	escribed in			
_ a		tion 501(c) of the Code (-							Ye	s 🔯	No
b		es," complete the follow			· •=• •							1
		(a) Name of organiza		(b) Type	of organization	n		(c) Des	scription of rel	ationship		

Sign Here	Und	fer penalties of perjury, I declare that I have ef, it is true, correct, and complete Declaration of the Market Ma	examined this return, incluon of preparer (other than	ding accompanying sche i taxpayer or fiduciary) is	edules and state based on all in	ormation	nd to the best of of which prepare icer	my knowledge and er has any knowledge.
		Signature of officer or trustee	1 - 2	Date		Title	·	
Paid		Print/Type preparer's name Way Color June 1/ Caller	Preparer's signature	MALAL	Date / 8 /		Check ıf self-employed	PTIN
Prepare		Firm's name PAPANIKOLA	S CO			Fırm's	EIN ▶ 87-0	450243
Use O	าเy	Firm's address ▶ 3098 HIGH	LAND DR ST	E 325		Phone	no (801)	466-0394

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

87-0491844 THE ARCHER FAMILY CHARITABLE CORPORATION 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 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) Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

JVA

for Form 990, 990-EZ, or 990-PF.

For Paperwork Reduction Act Notice, see the Instructions

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)THE ARCHER FAMILY CHARITAB 87-0 Page 1 of **Employer Identification number**

Name of organization 87-0491844 THE ARCHER FAMILY CHARITABLE CORPORATION

Part	, Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ESTATE OF JOHN D ARCHER PO BOX 58031 SALT LAKE CITY, UT 84158	\$\$ \$	Person X 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 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.)

Form **8868**

(Rev January 2011)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal Reve	nue Service	F File a Sepa	rate applica	ation for each return.			<u> </u>	
• If you ar	e filing for an A	utomatic 3-Month Extension, comple	ete only Par	rt I and check this box				► X
If you ar	e filing for an A	additional (Not Automatic) 3-Month E	xtension, c	omplete only Part II (on page 2 o	of this	form).		
Do not con	nplete Part ΙΙ ι	inless you have already been granted	an automati	c 3-month extension on a previou	ısly fı	ed Forn	n 8868.	
corporation request an Associated	required to file extension of tir With Certain P	You can electronically file Form 8868 if e Form 990-T), or an additional (not aut ne to file any of the forms listed in Part I ersonal Benefit Contracts, which must b n, visit www irs gov/efile and click on e-	omatic) 3-n I or Part II woe sent to th	nonth extension of time. You can with the exception of Form 8870, In le IRS in paper format (see instruc	electr nform	onically ation Re	file Form 886 eturn for Tran	68 to esfers
Part I	Automatic	3-Month Extension of Time.	Only submit	original (no copies needed)	-			
		file Form 990-T and requesting an auto	matic 6-mo	nth extension check this box a	ind c	mplete		▶ []
All other co tax returns	rporations (incl	uding 1120-C filers), partnerships, REM	AICs, and tr	usts must use Form 7004 to reque	est ar	extens	ion of time to	file income
Type or	Name of exe	mpt organization			En	ployer	identificatio	n number
print	THE ARC	HER FAMILY CHARITAB	LE COR	PORATION	87	-049	91844	
File by the	Number, stre	et, and room or suite no. If a P O box,	see instruct	ions				
due date for	ро вох	58031						
filing your return See	City, town or	post office, state, and ZIP code For a	foreign addi	ress, see instructions	-			
instructions	Salt La	ke City UT 84158-00	31					
		the return that this application is for (file						04
Application	n		Return	Application				Return
Is For			Code	Is For				Code
Form 990			01	Form 990-T (corporation)				07
Form 990-1	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) o	or 408(a) trust)	05	Form 6069				11
Form 990-	T (trust other th	an above)	06	Form 8870				12
Teleph If the o If this is for the who a list with the output of the who a list with the output of the who a list with the output of the out	one No. rganization does for a Group Role group, cheche names and est an automatic AUGUST 15 organization's calendar year a tax year beginn	20 <u>1 0</u> or ning , 20	ss in the Un t Group Exe If it is for it required to f zation return	mption Number (GEN) part of the group, check this box file Form 990-T) extension of time in for the organization named above	ve Th	ne exten	-	If this is and attach
		in line 1 is for less than 12 months, che		Initial return Final ret	urn	∐ Cha	nge in accou	nting period
		r Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, ente	er the tentative tax,	_			 -
	. .	le credits. See instructions.			3a	\$		12
		r Form 990-PF, 990-T, 4720, or 6069, e	=					_
		its made. Include any prior year overpa			3b	\$		0
		ct line 3b from line 3a Include your pay		nis form, if required, by using	_			
		deral Tax Payment System) See instruc			3c	\$		12
		to make an electronic fund withdrawal	with this Foi	rm 8868, see Form 8453-EO and	Form	18879-E	<u>-</u> U	
for paymer	nt instructions							

990 SCHEDULE OF OTHER INCOME

Attachment 1: page 1 - 990-PF Page 1, Part I, Line 11 Open to Public Inspection For calendar year 2010 or tax period beginning , and ending Name of Organization **Employer Identification Number** THE ARCHER FAMILY CHARITABLE CORPORATION 87-0491844 Revenue Net Investment Adjusted Description of Other Income Net Income and Expenses Income PASS THROUGH LOSS FROM ASHLEY CREEK PROP LLC 73-1638383 -15,629 -15,629 Totals: -15,629 -15,629

990 SCHEDULE OF LEGAL FEES

Attachment 2: page 1 - 990-	PF Page 1, Pa	art I, Line	16a	
Open to Public '				_
Inspection ' For calendar year 2010, or tax per	riod beginning	_ , and e		ntification Number
Name of Organization THE ARCHER FAMILY CHARITABL	E CORPORATION	1	87-0491	
Legal Description	Amount	Net Investment	Adjusted	Disbursements for
IECAI EEEC DAID	E00	Income	Net Income	Charity
LEGAL FEES PAID	508	508	Net III.OTHE	508
Total:	508	508		508
i otal:	508			1 308

990 SCHEDULE OF TAXES PAID

	·3: page 1 - 990-	IT rage 1,	raic i, bine	10		
Open to Public Inspection	For calendar year 2010, or tax pe	eriod beginning	, and e	ndına		
ame of Organization		alod beginning	, and e	Employer Ide	ntification Number	
	" FAMILY CHARITABL	E CORPORATIO	N	87-0491		
TIE ARCHER			Net Investment	Adjusted	Disbursements for	
	Category	Amount	Income	Net Income	Charity	
NCOME TAX		83	83	Not moonio	83	
			ł			
		!				
		•				
]				
			ŀ			
		[
	Total:	83	83		8	

990 SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

Attachment 4: page 1 - 990-PF Page 2, Part II, Line 10b Open to Public Inspection ' For calendar year 2010, or tax period beginning , and ending Employer Identification Number Name of Organization THE ARCHER FAMILY CHARITABLE CORPORATION 87-0491844 FMV at **Description of Property** Cost **Book Value** Fair Market Value Year End JP MORGAN CHASE - 3,000 Х SHARES Х 49,892 127,260 Х Х 70,800 KEYCORP - 8,000 SHARES 114,877 SOUTHWEST AIRLINES - 6,000 Х Х 77,880 8,644 SHARES Х Х VERIZON - 200 SHARES 5,748 7,156 BRISTOL MYERS - 300 SHARES Х Х 7,105 7,944

Total:

186,266

990 SCHEDULE OF INVESTMENTS - OTHERS

Attachment 5: page 1 - 990-PF Page 2, E	art I	[, Line	13	
Open to Public Inspection For calendar year 2010, or tax period beginning		, and e	ondina	
Name of Organization		, and t		fication Number
THE ARCHER FAMILY CHARITABLE CORPORATION	N		87-04918	
Description	Cost	FMV at Year End	Book Value	Fair Market Value
25% INTEREST IN ASHLEY				
CREEK PROP LLC	Х		104 400	704 400
			194,402	194,402
			,	
		,		
	<u> </u>	Total:	194,402	194,402
			201/102	10 COPCOR

990 SCHEDULE OF OTHER INCREASES

Open to Public Inspection For calendar year 2010, or tax period beginning , and	
aspection i For calendar year 2010, or lay benon beginning and	d anding
	d ending
me of Organization HE ARCHER FAMILY CHARITABLE CORPORATION	87 - 0491844
Description of Increase	Total Amount
	ł
	-

990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		e 1 - 990-PF Page	3, Part I	V, line 1		 -
-	n to Public					
		year 2010 or tax period beginning		, and endin	Employer Identifi	nation Number
	of Organization	CHARITABLE CORPO	D A T T O NI		87-049184	
Inc		e the Kind(s) of Property Sold (e.g.,		(b) How Acquired	(c) Date Acquired	(d) Date Sold
	1	rehouse, or Common Stock, 200 st		P Purchase D Donation	(mo , day, yr)	(mo., day, yr.)
1	FRONTIER COMMU		is wile co)	D Donation P		11-03-2010
1	FRONTIER COMMO	NICATIONS				11 03 2010
	(e) Gross Sales Price	(f) Depreciation Allowed (or allowable)	(g) Cost or O	ther Basis	(h) Gain o (e) Plus (f)	
1	399	(or unowable)	1 103 Expe	378	(5) 1 145 (1)	21
	0	have a second and a second as	and but the foundation	2 02 10/01/60	(I) Gains (Col (h) Gain Minua
	(I) F M V. as of 12/31/69	howing gain in column (h) and owr	(k) Excess			Less Than -0-) or
	(I) F W V. as OI 12/31/09	as of 12/31/69		(j), if Any		om col. (h))
1		as of 12/31/69	Over Col	(j), if Any	Losses (Iro	21

990 SCHEDULE OF SUBSTANTIAL CONTRIBUTORS

Attachment 8: page 1 - 990-PF	Page 4, Part VII-A, Line	10
Open to Public		·
Inspection For calendar year 2010, or tax period be Name of Organization	eginning , and ending	Employer Identification Number
THE ARCHER FAMILY CHARITABLE C	ORPORATION	87-0491844
Name of Contributor	Address of Cor	
	PO BOX 58031	
	SALT LAKE CITY, UT 84158	

990 BOOKS ARE IN CARE OF

Attachment	9 - 990-PF	<u>Page 5, Part VI</u>	<u>I-A, Line 14 </u>		
Open to Public	-				
Inspection '	For calendar year 201	o, or tax period beginning	, and	ending	·
Name of Organizati				Employer Identificatio	n Number
THE ARCHER	R_FAMILY CHAI	RITABLE CORPORAT	ION	87-0491844	
Part VII-A - Line 1	4				
Individual Name			ELIZABETH A	ARCHER WILLIAMS	
or					
Business Name					
					
			DO DOM 500		
Street Address	• • • •	• • • • • • • • • • • • • • • • • • • •	. PO BOX 5803	3 1	
					
U.S Address:					
U.S Address.					
Zıp code	84158-0031	o. Calt Take	City	State UT	
•	04130-0031	c _{ity} <u>Salt Lake</u>	CICY	State <u>U'T'</u>	
or					
Foreign Address					
City					
Ony	•			· · · · · · · · · · · · · · · · · · ·	
Province of	State				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			··	 ,
Country			, , ,		
······ ,					
Postal code	e				
Phone Nun	nber				
	• •	,			
Fax Numbe	er				
	,			·· _	

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

	`10: page 1 - 9	90-PF Page 6,	Part VIII				
Open to Public							
Inspection	For calendar year 2010, or tax	period beginning	, and	ending			
Name of Organization THE ARCHER FAMILY CHARITABLE CORPOR			Employer Identification Number 87 - 0491844				
(A) Na	ame and Address	(B) Title and Average	(C) Compensation (If	(D) Cont to Employee	(E) Expense Account		
		Hrs per Week	not paid, enter 0)	Ben Plans & Def. Comp	& Other Allowances		
PO BOX 580 Salt Lake 84158-0031 LISA CHAVE	City, UT 	TRUSTEE	0	0	0		
BROOKE BEA	City, UT 84158 VES		0	0	0		
HEATHER EE	City, UT 84158 BLE-POWELL		0	0	0		
PO BOX 580 Salt Lake	031 City, UT 84158		О	o	0		

990 APPLICATION SUBMISSION INFORMATION

	•		Restrictions on Awards		10_EOPFGR01L
	Бu	Employer Identification Number 7 - 0491844	Rest	NONE	
	and ending	Employer Identifica 87-0491844	Submission Deadlines	NONE	
10, Part XV, Line 2	For Calendar year 2010, or tax year period beginning	CORPORATION	Info and Materials Included	FOR PROOF OF BLE STATUS, OF ORGANIZATION	
990-PF Page	For Calendar year 2010	CHARITABLE CORPC	Phone Number	REASON REQUEST CHARITA 801-582-2677HISTORY	010 TW L0506F
Attachment 11: page 1	Open to Public	Name of Organization THE ARCHER FAMILY CHAI	Name	PO BOX 58031 SALT LAKE CITY, UT 84158	JVA Copyright Forms (Software Only) – 2010 TW

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment · 12: page 1 990- Open to Pu		Part X			
Inspection For calendar year 2010, or tax Name of Organization	, and ending	Employer Identification Number			
THE ARCHER FAMILY CHARITAE	LE CORPORATI	ON		87-049184	
Recipient Name and Address (home or business)	If Recipient is an Individual, Show any Relationship to Any Foundation Manager or Substantial Contributor	Foundation Status of Recipient	Purpose of Gr Contributi		Amount
ST AMBROSE CHURCH	NONE		GENERAL DON	ATTON	
SALT LAKE CITY, UT CARMELITE NUNS	NONE		GENERAL DON		250
SALT LAKE CITY, UT THE HAVEN	NONE		GENERAL DON	ATION	150
SALT LAKE CITY, UT RESCUE MISSION	NONE		GENERAL DON	ATION	500
SALT LAKE CITY, UT SALVATION ARMY	NONE		GENERAL DON	ATION	250
SALT LAKE CITY, UT JUDGE MEMORIAL HIGH SCHOOL	NONE		GENERAL DON	ATION	2,000
SALT LAKE CITY, UT CATHOLIC COMMUNITY SERVICES	NONE		GENERAL DON	ATION	500
SALT LAKE CITY, UT HUNTSMAN CANCER INSTITUTE	NONE		GENERAL DON	ATION	500
SALT LAKE CITY, UT PRIMARY CHILDRENS HOSPITAL	NONE		GENERAL DON	NOITA	750
SALT LAKE CITY, UT HUMANE SOCIETY	NONE		GENERAL DON	ATION	500
SALT LAKE CITY, UT GUADALUPE CENTER	NONE		GENERAL DON	NOITA	250
SALT LAKE CITY, UT WOMENS RESOURCE CENTER	NONE		GENERAL DON	IATION	500
SALT LAKE CITY, UT THE SHARING PLACE	NONE		GENERAL DON	IATION	1,000
SALT LAKE CITY, UT AMERICAN RED CROSS	NONE		GENERAL DON	NATION	250
SALT LAKE CITY, UT YWCA	NONE		GENERAL DON	NOITA	500
SALT LAKE CITY, UT					1,000
		-		Total:	8,900
	25275				10 EOPEGR152

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment'12: page 2 990-PF Page 11, Part XV Line 3a Open to Pu Inspection For calendar year 2010, or tax period beginning , and ending **Employer Identification Number** Name of Organization THE ARCHER FAMILY CHARITABLE CORPORATION 87-0491844 If Recipient is an Individual, Foundation Purpose of Grant or Recipient Show any Relationship to Amount Status of Any Foundation Manager Contribution Recipient or Substantial Contributor Name and Address (home or business) THE ROAD HOME NONE GENERAL DONATION 1,000 SALT LAKE CITY, UT NONE GENERAL DONATION THE HOUSE OF HOPE 250 SALT LAKE CITY, UT GENERAL DONATION CLUB VISION NONE 750 SALT LAKE CITY, UT GENERAL DONATION SCHOOLS FOR THE DEAF & NONE BLIND 750 SALT LAKE CITY, UT GENERAL DONATION NONE U OF U FOUNDATION 1,000 SALT LAKE CITY, UT WESTMINSTER COLLEGE GENERAL DONATION NONE 500 SALT LAKE CITY, UT GENERAL DONATION SHRINERS HOSPITAL NONE 1,000 SALT LAKE CITY, UT GENERAL DONATION COSGRIFF CATHOLIC SCHOOL NONE 250 SALT LAKE CITY, UT

> 5,500 10_EOPFGR152

Total:

990 SCHEDULE OF OTHER REVENUE

Attachment 13: page 1 - 990-PF Page 12, Part XVI-A, Line 11

Open to Public For calendar year 2010, or tax period beginning , and ending Inspection Employer Identification Number Name of Organization THE ARCHER FAMILY CHARITABLE CORPORATION 87-0491844 Unrelated Business Income Excluded by Section 512, 513 or 514 (e) Related or Exempt Function Income (c) Excl code (a) Business Code Program Service Revenue (b) (d) Item **Amount** Amount (see instructions) PASS THROUGH LOSS FROM FORM 1065- ASHLEY CREEK 15 PROPERTIES LLC 73-1638383 -15,629 Totals: -15,629

2010 DETAIL STATEMENTS

THE ARCHER FAMILY CHARITABLE C 87-0491844	Page 1
STATEMENT #1 - Contributions, gifts, grants (EZ1 PF1 Line 1)	
RECEIVED 25% INTEREST IN ASHLEY CREEK PROP LLC FROM DECEDENTS ESTATE. SEE SCHEDULE B	
FOR CONTRIBUTOR. VALUE OF INTEREST 210,031	
TOTAL CARRIED TO EZ1 PF1 Line 1	210,031