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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

Dep	artmei mai Re	nt of the Treasury	lote. The foundation may	Treated as a Privat be able to use a copy of this	te Founda return to satis	ation sty state repo	rting requirements	2011
For	cale	ndar year 2011 or tax year			, and e			
Na	me o	f foundation					A Employer Identification	number
	J &	J HADFIELD	FOUNDATION				20-2067329	
		ond street (or PO box number of N 600 E	of mail is not delivered to street	t address)		Room/suite	8 Telephone number 801-768-45	45
		own, state, and ZIP code	3		·- ·		C If exemption application is p	ending, check here
_		k all that apply	Initial return	Initial return of a f	ormer public c	harity	D 1. Foreign organizations	s, check here
			Final return Address change	Amended return Name change			Foreign organizations me 2. check here and attach co	eeting the 85% test,
H	Checl	type of organization	X Section 501(c)(3) ex				E If private foundation sta	
		ection 4947(a)(1) nonexem	npt charitable trust	Other taxable private found	ation		under section 507(b)(1)	
		arket value of all assets at e	· —	=	Accr	ual	F If the foundation is in a	
	rom∶ ►\$	Part II, col (c), line 16)		ther (specify) imn (d) must be on cash i	basis.)		under section 507(b)(1)	(B), check here
	art		nd Expenses	(a) Revenue and expenses per books	(b) Net in		(c) Adjusted net	(d) Disbursements for chantable purposes
_	1	Contributions, gifts, grant				······································	N/A	(cash basis only)
	2	Check X If the foundation	n is not required to attach Sch. B					
	3	Interest on savings and tempo cash investments	orary	4.		4.		STATEMENT 1
	4	Dividends and interest fro	om securities					<u></u>
	1 .	Gross rents						
	62	Net rental income or (loss) Net gain or (loss) from sale of			******	· · · · · · · · · · · · · · · · · · ·	1 A	
Revenue	b	Grace calee ance for all	assets not on line 10			***************************************	67	46777
eve	7	Capital gain net income (from	Part IV, line 2)	· · · · · · · · · · · · · · · · · · ·		0.	14 000	100
Œ	8	Net short-term capital gail	n		1111	· · · · · · · · · · · · · · · · · · ·	120	15 70/
	9	Income modifications Gross sales less returns	1				000	<012 /3/
	10a	and allowances			······ · · · · · · · · · · · · · · · ·		306	A /A/
	1	Less Cost of goods sold			······			11/2/14
	11	Gross profit or (loss) Other income						
	12	Total. Add lines 1 through	h 11	4.		4.		
	13	Compensation of officers, dire		0.		0.		0.
	14	Other employee salaries a	•					
Š	15	Pension plans, employee	benefits					
Sus	1162	Legal fees Accounting fees	STMT 2	500.		0.		0.
Š	ם ו	Other professional fees	01111 2	300.				<u>·</u>
Ve E	17	Interest						
trati	18	Taxes						
inist	19	Depreciation and depletio	n					
mb	20	Occupancy						L
βĀ	21 22	Travel, conferences, and r	meetings					
g	23	Printing and publications Other expenses						
Operating and Administrative Expenses	24	Total operating and adm	inistrative		-			
per		expenses. Add lines 13 th		500.		0.		0.
0	25	Contributions, gifts, grant	s paid	0.				0.
	26	Total expenses and disbu	ursements.	[^		•
	07	Add lines 24 and 25	40	500.		0.		0.
	27	Subtract line 26 from line Excess of revenue over expens		-496.				
	1	Net investment income (if			·	4.		
_	C	Adjusted net income (if ne					N/A	
1235 12-0	01 2-11		eduction Act Notice, see	instructions.				Form 990-PF (2011)

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Decreases not included in line 2 (itemize)

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

		osses for Tax on In and(s) of property sold (e g or common stock, 200 shs			(b) How acquired P - Purchase D - Donation	1 (4)	Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
					 -			
b NO	ONE					\perp		
<u>c</u>						+		
e e	-					+-		
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale	- ,,,		(h) Gain or (loss)) plus (f) minus (
a								
<u>b</u>	 			<u> </u>				
<u>c</u>								
d e	 							
Complete only for assets show	ring gain in	column (h) and owned by t	he foundation	on 12/31/69		(I) Ga	ns (Col (h) gain i	minus
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (I) col (J), if any		col (k)	but not less than sses (from col. ()	-0-) or
a								
b								
<u> </u>							· · · · · ·	
<u>d</u>								
<u>e</u>	ــــــــــــــــــــــــــــــــــــــ				$\overline{}$			
? Capital gain net income or (net o	capital loss	if gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7) 2			
Net short-term capital gain or (le	oss) as defi	ned in sections 1222(5) and	d (6)					
If gain, also enter in Part I, line 8	3, column (•					
Part V Qualification		section 4940(e) for	Paducad	Tay on Net	Investment	Incon		
For optional use by domestic priva								
•			340(a) tax on	net mvostment m	,ome ,			
f section 4940(d)(2) applies, leave	this part bi	ank						
Vas the foundation liable for the se	ction 4942	tax on the distributable am	ount of any ye	ar in the base peri	od?			Yes X No
f "Yes," the foundation does not qu								
Enter the appropriate amount in	each colu		ictions before	making any entrie				(d)
Base period years Calendar year (or tax year begini	ning in)	(b) Adjusted qualifying dist	ributions	Net value of nor	(c) icharitable-use as:	sets	Distribi	útión ratio
2010	mig mj		0.		2,6	11	(00) (0) (1)	
2009					2,0	T 42 0		ded by col (c))
2008			0.		1,3	05.		• 0 0 0 0 0 0 • 0 0 0 0 0 0
			0.		1,3	05.		.000000
2007			0.		1,3	05. 0.		.000000 .000000 .000000
2007 2006	<u>-</u>		0.		1,3	05.		.000000
2006			0.		1,3	05. 0.	2	.000000 .000000 .000000 .000000
2006 2 Total of line 1, column (d)	a 5-vear has	se period - divide the total o	0. 0. 0.	or by the number	1,3	05. 0.	2	.000000 .000000 .000000
	-		0. 0. 0.	or by the number	1,3	05. 0.	2 3	.000000 .000000 .000000 .000000
2006 ? Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist	ence if less	than 5 years	0 • 0 • 0 •	or by the number (1,3	05. 0.		.000000 .000000 .000000 .000000
2006 ? Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist 3 Enter the net value of noncharita	ence if less	than 5 years	0 • 0 • 0 •	or by the number (1,3	05. 0.	3	.000000 .000000 .000000 .000000 .000000 .000000
2006 ? Total of line 1, column (d) 8 Average distribution ratio for the the foundation has been in exist in the foundation been in exist in the foundation between the foundation has been in exist in the foundation between the foundation has been in exist in the foundation has been	ence if less	than 5 years sets for 2011 from Part X, I	0 • 0 • 0 •	or by the number (1,3	05. 0.	3	.000000 .000000 .000000 .000000 .000000 .000000
2006 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist	ence if less	than 5 years sets for 2011 from Part X, I	0 • 0 • 0 •	or by the number	1,3	05. 0.	3 4 5	.000000 .000000 .000000
2006 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist in the foundation has been in exist. In the foundation has been in exist.	ence if less able-use as: ome (1% of	than 5 years sets for 2011 from Part X, II Part I, line 27b)	0 • 0 • 0 •	or by the number o	1,3	05. 0.	3 4 5 6	.000000 .000000 .000000 .000000 .000000 .000000

Forn	1990-PF(2011) J & J HADFIELD FOUNDATION 20-206			Page 4
<u> </u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see Instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			0.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2			0.
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-			0.
6	Credits/Payments			
a	2011 estimated tax payments and 2010 overpayment credited to 2011			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			•
	Total credits and payments Add lines 6a through 6d			<u>0.</u>
	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 2012 estimated tax ▶ Refunded ▶ 11			
	rt VII-A Statements Regarding Activities		TV	NI.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Tes	No
	any political campaign?	1a_	├	X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	ļ	
	If the answer is "Yes" to 1sor 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			v
	Did the foundation file Form 1120-POL for this year?	16		<u>X</u>
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation \$\Bigsim \\$ 0 \cdot (2) On foundation managers \$\Bigsim \\$ 0 \cdot \\$			
_	· · · · · · · · · · · · · · · · · · ·	Ì		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0 •			
2	managers \$ O . Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ĺ	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		X
-	If "Yes," attach the statement required by General Instruction T.		1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6		X
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			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation N/A	8b	ļ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	<u> </u>	X
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Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be	Requirea (contir	nued)	
 5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section) (2) Influence the outcome of any specific public election (see section 4955), 		rectly,	es X No	
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes			es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53 4945 or in a current notice regarding disaster assistance (see instru	uctions)?	iii Regulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check to a lift the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?	irom the tax because it mainta	nined N/A		
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?		Y0	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.	personal benefit contract?			6b X
7a At any time during the tax year, was the foundation a party to a prohibited tax s b if "Yes," did the foundation receive any proceeds or have any net income attribu		Yo	es X No N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	y	
List all officers, directors, trustees, foundation managers and their	compensation.		 	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN L. HADFIELD	PRESIDENT			_
2360 N 600 E	0.00			
LEHI, UT 84043	0.00	0.	0.	0.
JANE HADFIELD 2360 N 600 E	VICE PRESIDEN	IL.		
LEHI, UT 84043	0.00	0.		_
JAMIE HADFIELD	TRUSTEE	<u> </u>	0.	0.
9060 S 2100 E	IKOSIEE			
SANDY, UT 84094	0.00	0.	0.	0.
SAND1, 01 04074	0.00			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			ı	
				<u> </u>
Total number of other employees paid over \$50,000			Form	990-PF (2011)
				, , ,

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All other program-related investments. See instructions

Total. Add lines 1 through 3

Form 990-PF (2011) J & J HADFIELD FOUNDATION Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities 1a 1b b Average of monthly cash balances c Fair market value of all other assets 10 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 3 3 Subtract line 2 from line 1d 4 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here > and do not complete this part) 119. 1 Minimum investment return from Part X, line 6 Tax on investment income for 2011 from Part VI, line 5 b Income tax for 2011 (This does not include the tax from Part VI) c Add lines 2a and 2b 20 3 Distributable amount before adjustments Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 4 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 119. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 7 Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 0. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 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 Amounts set aside for specific charitable projects that satisfy the 3 a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 0. income Enter 1% of Part I, line 27b 5

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7				119.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			. 131 •	***************************************
b Total for prior years		_		
2009	H.,	65.	······································	HIII
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 > \$ 0.				
a Applied to 2010, but not more than line 2a	1		0.	1.11.1.1' ······························
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.	14, · · · · · · · · · · · · · · · · · · ·	··· '''	
d Applied to 2011 distributable amount				0.
e Remaining amount distributed out of corpus	0.	······································		
5 Excess distributions carryover applied to 2011 (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	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		65.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				······································
amount - see instructions		65.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			131.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				119.
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 2006	_			
not applied on line 5 or line 7	0.			······································
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2007		[
b Excess from 2008				
c Excess from 2009				
d Excess from 2010		j		
e Excess from 2011				- 200 DE

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3 Grants and Contributions Paid During the		Payment		
Recipient Recipient	If recipient is an individual,			
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 grant or contribution	Amount
a Paid during the year				
NONE				
NONE		ĺ		
		ł		
				
Total			▶ 3a	0.
b Approved for future payment		ŀ		
	•			
NONE				
				
	-			·- ·- · · ·
Total			▶ 3b	0.
			Foi	rm 990-PF (2011)

into a nance a manufactual and a different and a district and	Unrelate	d business income	Exclu	ided by section 512, 513, or 514	(2)
inter gross amounts unless otherwise indicated	(a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a	_ }		 		
b			↓ —		
C	J		-		
d	_ 		 		
e	- }		┼		
			┼	 	
g Fees and contracts from government agencies	 - 		+		
2 Membership dues and assessments 3 Interest on savings and temporary cash			╁		
investments			14	4.	
Dividends and interest from securities		<u> </u>	+		
5 Net rental income or (loss) from real estate	···········		1		
a Debt-financed property			1		
b Not debt-financed property			 		
6 Net rental income or (loss) from personal					
property	, ,				
7 Other investment income					
B Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b	_				- <u>-</u> -
C	_				
d	-		<u> </u>		
e					
2 Subtotal Add columns (b), (d), and (e)	L1	0.			0 4
3 Total. Add line 12, columns (b), (d), and (e)				13	4
See worksheet in line 13 instructions to verify calculations					
Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in	come is reported ii	n column (e) of Part XVI-A			nplishment of
the foundation's exempt purposes (other th					
▼ the foundation's exempt purposes (other th					
the foundation's exempt purposes (other th					
the foundation's exempt purposes (other th					
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the foundation's exempt purposes (other th					
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Pan		Information R Exempt Organ		ers To and Transactions ar	nd Relationships With None	charitable	•
1 D				ne following with any other organization	described in section 501(c) of		Yes N
				section 527, relating to political organiz			
a T	ransfers fron	the reporting found	lation to a noncharitable (exempt organization of			
(1	l) Cash					1a(1)	X
•	?) Other ass					1a(2)	Х
	ther transact						
•	•		able exempt organization			1b(1)	X
•	•		oncharitable exempt orga	nization		1b(2)	X
-	-	facilities, equipment, ement arrangements				1b(3) 1b(4)	$-\frac{\lambda}{\lambda}$
•	-	oan guarantees	•			1b(5)	X
	•	-	embership or fundraising	solicitations		1b(6)	X
•	•		ailing lists, other assets, o			10	X
	-		• •	, , , ,	iys show the fair market value of the god	ods, other ass	ets.
		•		•	in any transaction or sharing arrangement		
CC	olumn (d) the	value of the goods,	other assets, or services	received			
(a) Line	no (b) /	Amount involved	(c) Name of nor	icharitable exempt organization	(d) Description of transfers, transactions	, and shanng an	angements
				N/A			
							
			ļ <u> </u>				
							
			<u> </u>				
							
							
	 						
	+						
			 				
2a Is	the foundati	on directly or indirec	tly affiliated with, or relate	ed to, one or more tax-exempt organiza	tions described		
ın	section 501	c) of the Code (othe	r than section 501(c)(3))	or in section 527?		Yes	X No
b If	"Yes," compl	ete the following sch	edule				
		(a) Name of org	ganization	(b) Type of organization	(c) Description of relat	ionship	
		N/A_	 		·		
					·		
					_		
	- Library	Δ	Abala				
Sign	and belief it	1 1 1 1 1	•	um, including accompanying schedules and str		May the IRS d	

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Preparer Use Only

Paid

SUITE 200

Form **990-PF** (2011)

Date

Preparer's signature

Signature of office or trustee

Print/Type preparer's name

RANDY SELLERS

Firm's name ▶ PROFESSIONAL BUSINESS

Firm's address ▶ 1706 SOUTH 500 WEST,

BOUNTIFUL, UT 840

Title

Date

ADVISORS, LLC

Check _____ f

self- employed

Phone no

PTIN

Firm's EIN ► 20-3153167

P01260180

801-296-1060

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
INTERST INCOME					4.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			4.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	2
FORM 990-PF DESCRIPTION	ACCOUNTI (A) EXPENSES PER BOOKS	(B) NET INVEST-		(D) CHARITA	BLE
	(A) EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED NET INCOM	(D) CHARITA	BLE

Form 886	68 (Rev. 1-2012)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		▶ X
	ly complete Part II if you have already been granted an a				8868.	
If you	are filing for an Automatic 3-Month Extension, comple					
Part I	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies I	needed).
	· · · · · · · · · · · · · · · · · · ·		Enter filer's	identifyir	g numb	er, see instructions
Type or	Name of exempt organization or other filer, see Instru	ctions		Employe	dentific	cation number (EIN) or
print	T C T HARRIED FOUNDAMENT				2.0	0067000
File by the due date for	J & J HADFIELD FOUNDATION			X		2067329
filing your return See	Number, street, and room or suite no. If a P.O. box, s 2360 N 600 E	ee instruc	tions.	Social se	curity ni	umber (SSN)
instructions	City, town or post office, state, and ZIP code. For a for LEHI, UT 84043	oreign add	Iress, see instructions.			
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Annlinet		Return	Application			D-A
Applicat Is For	ion	Code	Is For			Return Code
Form 990		01	13 7 01		······	Code
Form 990		02	Form 1041-A			08
Form 990		01	Form 4720			09
Form 990		04	Form 5227			10
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	0-T (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	d Form	8868
	JOHN L. HADFIE					
	ooks are in the care of \triangleright 2360 N 600 E $-$	LEHI				
•	none No. ► 801-768-4545		FAX No. ►			_
	organization does not have an office or place of business				. 41 45	-1
_	is for a Group Return, enter the organization's four digit	•				
box ►	. If it is for part of the group, check this box		ach a list with the names and EINs of BER 15, 2012.	all memb	ers the c	extension is for.
	equest an additional 3-month extension of time until $\frac{1}{1}$	IO V EM	, and ending	^		
	he tax year entered in line 5 is for less than 12 months, c	hack reas		Final r	eturn	·'
	Change in accounting period	HECK IGAS	on.		Cluiii	
7 Sta	ate in detail why you need the extension					
	NFORMATION NEEDED TO FILE RE	TURN I	NOT AVAILABLE			
8a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			_
	nrefundable credits. See instructions.			8a	\$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,					
	c payments made. Include any prior year overpayment al	lowed as a	a credit and any amount paid			0
	eviously with Form 8868.			8b	\$	0.
	lance due. Subtract line 8b from line 8a. Include your pa	-	th this form, if required, by using			0
EF	TPS (Electronic Federal Tax Payment System). See instr	uctions.	ust be completed for Part II	only.	\$	0.
Under pe	enalties of perium, I declare that I have examined this form, incli	udina accor			t of my kı	nowledge and belief,
it is true	, correct, and complete, and that I am authorized to prepare this	torm.	0 KA			
Signatur	e Title ▶		MIN	Da	te 🕨	8-3-12
	17		1			Form 8868 (Rev. 1-201)

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	rutomatic te only Paxtension te only Paxtension te instructions rections Return Application Code Is For 01 02 Form 1041-A 01 Form 4720 04 Form 5227 05 Form 6069 06 Form 8870 an automatic 3-month extension on a previously file the origin LEHI, UT 84043 FAX No. Sin the United States, check this box Group Exemption Number (GEN) and attach a list with the names and EINs of NOVEMBER 15, 2012. heck reason: Initial return PURN NOT AVAILABLE or 6069, enter the tentative tax, less any enter any refundable credits and estimated lowed as a credit and any amount paid enter must be completed for Part II enter of the complete	te only Part I (on page 1). Intersion of Time. Only file the original (no content filer's identifying the instructions. Intersion address, see instructions. Intersion address address and estimated and ending address and estimated and ending	Attension of Time. Only file the original (no copies needed). Enter filer's identifying number, see insections Employer Identification number (SSN preign address, see instructions. Enter filer's identifying number, see insections Employer Identification number (SSN preign address, see instructions. Employer Identification number (SSN preign address) security number (SSN preign address) se	

Form 8868 (Rev. 1-201