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Form 990-PF Department of the Treasury Integral Revenue Service

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

2012

For catendar year 2012 or tax year beginning A Employer identification number Name of foundation 20-2067632 STEVEN J & PATRICIA ANDERSEN FOUNDATION B Telephone number Number and street (or P O box number if mail is not delivered to street address) 801-447-3774 671 SOMERSET ST C If exemption application is pending, check here City or town, state, and ZIP code 84025 FARMINGTON, UT D 1. Foreign organizations, check here Initial return of a former public charity Initial return G Check all that apply Amended return Final return Foreign organizations meeting the 85% test, check here and attach computation Name change Address change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here X Cash Accrual I Fair market value of all assets at end of year | J Accounting method If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) (from Part II, col. (c), line 16) 21,064. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and for chantable purposes (cash basis only) (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) income income expenses per books N/A 105,000. Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0 Capital gain net income (from Part iV, line 2) Net short-term capital gain Income modifications b Less Cost of goods sold c Gross profit or (loss) Other income 105,000 0. Total. Add lines 1 through 11 0. 0. 0 Compensation of officers, directors, trustees, etc. Other employee salaries and wages 14 15 Pension plans, employee benefits 1,913. 0. 0. STMT 1 16a Legal fees 800. 0. STMT 2 **b** Accounting fees c Other professional fees 17 IndetCEIVED Administrative -OS Depresiation and depletion Occupancy 20 21 ravel, conferences, and medting Rining and publications 22 0. 0. 21,111 23 Other expenses Operating 24 Total operating and administrative 0 23,824 expenses. Add lines 13 through 23 80,585. 80,585 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 104,409 0 80,585. Add lines 24 and 25 27 Subtract line 26 from line 12 591 3 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

Form 990-PF (2012)

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

T it	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
L	CHI L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	20,473.	21,064.	21,064.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts	l		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons			
	7	Other notes and loans receivable			
	İ	Less allowance for doubtful accounts	<u> </u>		
Ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U S and state government obligations			
	l b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land buildings, and equipment basis			······································
	1	Less accumulated depreciation	1		
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis	7-11 11 11 11 11 11 11 11 11 11 11 11 11		
		Less accumulated depreciation			
	15	Other assets (describe			
					-
_	16	Total assets (to be completed by all filers)	20,473.	21,064.	21,064.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
L	22	Other liabilities (describe			
	ļ				
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	1	Foundations that follow SFAS 117, check here			
w		and complete lines 24 through 26 and lines 30 and 31.			
Ş	24	Unrestricted			
ž	25	Temporarily restricted			
88	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31.	_		
ts	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	20,473.	21,064.	
ž	30	Total net assets or fund balances	20,473.	21,064.	
			00 470	22.254	
	31	Total liabilities and net assets/fund balances	20,473.	21,064.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	T	·
•		st agree with end-of-year figure reported on prior year's return)		11	20,473.
2	•	r amount from Part I, line 27a		2	591.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	21,064.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	21,064.
					5 000 DE (0040)

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Pane	2

Part IV Capital Gains	and Lo	sses for Tax on Ir	nvestmen	t Income								
		nd(s) of property sold (e g or common stock, 200 sh			1. b	low acqu - Purcha - Donati	se '		acquired ay, yr)	(d) Date sold (mo , day, yr)		
la							[
b NO	NE		. <u>. </u>									
<u>C</u>												
đ			<u> </u>		├							
<u>e</u>	(6)	Depreciation allowed	(n) Cos	st or other basis	┸┈┑			(h) G	ain or (loss	 		
(e) Gross sales price	("	(or allowable)		expense of sale					(f) minus			
a												
<u> </u>			ļ									
<u>C</u>	 -											
<u>d</u>												
e Complete only for assets shown	1 ng gain in	column (h) and owned by	the foundation	on 12/31/69			<u> </u>	Gains (C	ol (h) gain	minus		
(i) F M V as of 12/31/69	T	j) Adjusted basis	(k) Ex	cess of col (I)				(k), but r	ot less tha (from col. (n -0-) or		
		as of 12/31/69	over	col (j), if any		·						
a b												
C				 	\dashv		-					
d												
e							~					
Capital gain net income or (net ca	eni letine	If gain, also ente			}	2						
, ,				•	7	-						
Net short-term capital gain or (lo if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8	column (d		10 (0)		}	3						
Part V Qualification L		ection 4940(e) for	Reduced	Tax on Net	Inv	estme	nt Inco	me				
For optional use by domestic privat	e foundation	ons subject to the section	4940(a) tax on	net investment in	come)						
f section 4940(d)(2) applies, leave t	hie nart hi	ank										
										<u> </u>		
Vas the foundation liable for the sec				•	uoda					Yes X N		
f "Yes," the foundation does not qua Enter the appropriate amount in					ntries					·		
(a)		(b)		,	(c)				D. A. d	(d)		
Base period years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dis	tributions					Distrit (col (b) div	oùtion ratio vided by col. (c))			
2011			4,651.			21,350.		,		11.45906		
2010			9,839.			23,997.						3.32704
2009			8,140.			15,083.				12.47364		
2008			0,157.			10	601, 207			83.45590		
2007			8,200.			10	,207	+		3.19657		
Total of line 1, column (d)								2		113.91223		
Average distribution ratio for the	5-year bas	se period - divide the total	on line 2 by 5,	or by the number	of ye	ars						
the foundation has been in existe	nce if less	than 5 years		·	-			3		22.78244		
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5		4_		20,457								
Multiply line 4 by line 3								5		466,060		
Enter 1% of net investment incor	ne (1% of	Part I, line 27b)						6		0		
Add lines 5 and 6								7		466,060		
Enter qualifying distributions from	n Part XII,	line 4						8		80,585		
If line 8 is equal to or greater that See the Part VI instructions	n line 7, ch	eck the box in Part VI, line	1b, and comp	plete that part usin	ig a 1º	% tax rat	θ					

Form	990-PF(2012) STEVEN J & PATRICIA ANDERSEN FOUNDATION	20-	2067	7632	_ 1	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	instru	ctior	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%	1			, ,,,,	0.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) $-{\cal J}$					^
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	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	. 5			·-•·	<u> </u>
6	Credits/Payments					
	2012 estimated tax payments and 2011 overpayment credited to 2012					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d 5					0.
7	Total credits and payments. Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8_				0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9 10	<u> </u>			
10	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 2013 estimated tax	11				
	Enter the amount of line 10 to be Credited to 2013 estimated tax ► Refunded ► rt VII-A Statements Regarding Activities		l			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene				Yes	No
14	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
U	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published	ed or				**********
	distributed by the foundation in connection with the activities.	,				
r	Did the foundation file Form 1120-POL for this year?			10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
•	(1) On the foundation ► \$ O . (2) On foundation managers. ► \$ O .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ▶\$ 0.					
2	Has the foundation engaged in any activities that have not 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 incorporation, or	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	•••	<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				v
	remain in the governing instrument?			6	v	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV. Finter the states to which the foundation reports or with which it is registered (see instructions) NONE	-	•			
88	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE					
	If the annual West to less 7 has the foundation forming and a new of Form 000 DE to the Attorney Consent (or decisions)					
Ľ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			8b	Х	
^	of each state as required by General Instruction G? If "No," attach explanation	nder		- On		
y	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	iiual		9	•	Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			10		X
10	any persons become substantial contributors during the tax year. If ites, attach a screenie using their names and addresses					

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Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	indations, 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	20,769.
b	Average of monthly cash balances	16	20,769.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	10	20,769.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	<u>.</u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,769.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	312
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,457.
<u>6</u>	Minimum investment return. Enter 5% of line 5	6	1,023.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	1,023.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI)]	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,023.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,023.
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	1,023.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		00 505
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	80,585.
þ	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	
þ	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	80,585.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	80,585.
	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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4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				1 000
line 7	. , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·		1,023.
2 Undistributed income, if any, as of the end of 2012			0.	
a Enter amount for 2011 only	',144-7			
b Total for prior years		0.		
5 Funda distributions personales of any to 2012	1,, 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1 · · · · · · · · · · · · · · · · · · ·
Excess distributions carryover, if any, to 2012 a From 2007 57, 290.				
50 127				
b From 2008 c From 2009 187, 386.				
d From 2010 78,639.				
e From 2011 243,583.				
f Total of lines 3a through e	617,025.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ►\$ 80,585.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior			77	
years (Election required - see instructions)		0.	, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	· \\pp\\\		
d Applied to 2012 distributable amount				1,023.
e Remaining amount distributed out of corpus	79,562.	<u></u>		0.
Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u>.</u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	696,587.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously		_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line			0	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2013		,	·· ·········· · · · · · · · · · · · ·	
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	57,290.			
9 Excess distributions carryover to 2013	0.720			
Subtract lines 7 and 8 from line 6a	639,297.			
10 Analysis of line 9				
a Excess from 2008 50, 127.				
b Excess from 2009 187, 386.				
c Excess from 2010 78,639.				
d Excess from 2011 243,583.				
e Excess from 2012 79,562.				1
				Form 990-PF (2012)

Part XIV Private Operating For		estructions and Part V		N/A	07032 Page
1 a lifthe foundation has received a ruling or d					
foundation, and the ruling is effective for 2					
· · · · · · · · · · · · · · · · · · ·	•	•	un cootion	4942(J)(3) or 49	142(j)(5)
b Check box to indicate whether the foundat		ing roundation described	Prior 3 years		142())(3)
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
income from Part I or the minimum	(4) 2012	(6) 2011	(6) 20.0	(4) 2000	(0) 10:01
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 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 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)		L			
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)			<u> </u>		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV Supplementary Inform			if the foundation	on had \$5,000 or mo	ore in assets
at any time during the	year-see inst	ructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who h			tributions received by t	he foundation before the clos	se of any tax
year (but only if they have contributed moi	e than \$5,000) (See s	section 507(d)(2))			
NONE					
b List any managers of the foundation who o			(or an equally large po	rtion of the ownership of a pa	artnership or
other entity) of which the foundation has a	10% of greater littere	rSI			
NONE					
2 Information Regarding Contribution					
Check here ► if the foundation only					
the foundation makes gifts, grants, etc. (se				complete items 2a, b, c, and	0
a The name, address, and telephone numbe		on to whom applications	should be addressed		
STEVEN ANDERSEN, 801-		0400E			
871 SOMMERSET, FARMIN					
b The form in which applications should be SUBMISSIONS SHOULD BE		ition and materials they :	should include		
	WILLIEN				
c Any submission deadlines NONE					
d Any restrictions or limitations on awards, s	such as by geographic	al areas, chantable fields	, kinds of institutions, o	or other factors	
NONE					
		 			
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3 . Grants and Contributions Paid During to		rayment		
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 grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		·
a rad doming the year				
ANDROOM WHARM AGGGGTAMION	None	EXEMPT	DONATION-RESEARCH	
AMERICAN HEART ASSOCIATION 465 S 400 E	NONE	EXEMPI	DONATION-RESEARCH	
SALT LAKE CITY, UT 84111				3,000
BOY SCOUTS OF AMERICA	NONE	EXEMPT	FRIENDS OF SCOUTING	
525 FOOTHILL BLVD			AWARDS, SHIRTS	
SALT LAKE CITY, UT 84113				500
		1		
BYU MANAGEMENT SOCIETY	none	N/A	DONATION	
730 TANNER BUILDING				
PROVO, UT 84602				3,000
CALLED 2 SERVE	NONE	EXEMPT	DONATION	
1095 MOUNTAIN RIDGE ROAD				44 000
PROVO, UT 84604	_	<u> </u>		41,000
	Ĺ			
KBYU 200 IRONTON BLVD	NONE	EXEMPT	DONATION	
PROVO_UT 84606	}			1,320
	CONTINUATION SHEE	ET(S)	▶ 3a	80,585
b Approved for future payment				
NONE				
		<u> </u>		
		1		
Total			> 3b	0 m 990-PF (2012

Part XVI-A	Analysis	of Income-	Producina	Activities
	MI 1017313		, ioudonig	MOUTHINGS

ter gross amounts unless otherwise indicated	Unrelated b	usiness income		d by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
C			1		
l			_		
e			<u> </u>		 -
l			<u> </u>		
g Fees and contracts from government agencies			 		
Membership dues and assessments			ļ <u>.</u>		
nterest on savings and temporary cash			1 1		
investments			1		
Dividends and interest from securities					
Net rental income or (loss) from real estate					,,
Debt-financed property			<u> </u>		
Not debt-financed property			 -		
Net rental income or (loss) from personal			1		
property			<u> </u>		
Other investment income			.		
Gain or (loss) from sales of assets other					
than inventory			<u> </u>		
Net income or (loss) from special events		·			
Gross profit or (loss) from sales of inventory			<u> </u>		
Other revenue					
a					
b					· - · · · · · · · · · · · · · · · · · ·
c			<u> </u>		
d					
B			<u> </u>		
Subtotal Add columns (b), (d), and (e)		0.	<u> </u>	0.	
Fotal. Add line 12, columns (b), (d), and (e)				13	
worksheet in line 13 instructions to verify calculations	1)				<u>-</u>
managed in the registractions to verify calculations	s to the Assem	plishment of E	xempt	Purposes	
	S to the Accoun		•	•	
Relationship of Activitie				A	
Relationship of Activitie The No. Explain below how each activity for which is	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
art XVI-B Relationship of Activitie	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitie ne No. Explain below how each activity for which i	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitie The No. Explain below how each activity for which is	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitie e No. Explain below how each activity for which i	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
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Relationship of Activitie B No. Explain below how each activity for which is	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
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Relationship of Activitiente No. Explain below how each activity for which it	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitiente No. Explain below how each activity for which it	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitiente No. Explain below how each activity for which it	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitie ne No. Explain below how each activity for which i	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of
Relationship of Activitie ne No. Explain below how each activity for which i	ncome is reported in c	olumn (e) of Part XVI-A	A contribu	ted importantly to the accom	plishment of

223621 12-05-12

Part XVII	•		sfers To a	and Tra	ansactions	and Relation	ships With Nonch	naritable	
1 Did the or	Exempt Organ ganization directly or indi		of the followin	a with an	v other organizati	ion described in se	action 501(c) of		Yes No
	other than section 501(c								
	from the reporting found					11120(10110			
(1) Cash	monthine reporting round	ation to a nonchant	ibic exempt or	gamzatioi				1a(1)	X
(2) Other	assets							1a(2)	X
b Other tran									
	of assets to a noncharita	ible exempt organiza	tion					16(1)	X
• •	nases of assets from a no	· -						1b(2)	X
1-, -	I of facilities, equipment,	•						10(3)	X
(4) Reimi	bursement arrangements	;						1b(4)	X
(5) Loans	s or loan guarantees							1b(5)	X
(6) Perfo	rmance of services or me	embership or fundra	ısıng solicitatio	ns				1b(6)	X
c Sharing o	f facilities, equipment, ma	alling lists, other asso	ets, or paid em	ployees				10	<u> </u>
	•	•	-			-	r market value of the good		ts,
	• •			ed less th	an fair market val	ue in any transacti	on or sharing arrangement	t, show in	
	the value of the goods,			avemnt	organization	(d) 0			
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable	exempl	organization	(u) Descript	tion of transfers, transactions, a	no snanng arra	ngements
			N/A						
					-		· · · · · · · · · · · · · · · · · 		
			 -	-					
		ļ		·	 				
		 			·=·,				
									
-									
					·				
								_	
2a Is the four	ndation directly or indirec	tly affiliated with, or	related to, one	or more	tax-exempt organ	izations described			
ın section	501(c) of the Code (othe	r than section 501(c)(3)) or in sect	tion 527?				Yes	X No
<u>b</u> If "Yes," co	implete the following sch								
	(a) Name of org	janization		(b) Typ	e of organization	 	(c) Description of relatio	nship	
	N/A								
									
	·			-	·				
				-		 -			
	penalties of perjury, I declare							May the IRS di	ecuse this
Sign	elief, it is true, correct, and co		•	n taxpayer)		mation of which prepa	arer has any knowledge	return with the shown below (preparer
Here	Par.sic	A. Aver	e-		10-11-13			X Yes	☐ No
Sigr	nature of officer or trustee)	$-\Delta$		ate	Title			
	Print/Type preparer's n	ame	Preparer's s	gnature		Date	Check fr PTI	N	
Paid	DANDY CELL	EDC		/		9.25.13	self- employed	010601	100
Preparer	RANDY SELI Firm's name ► PRC		BITE	Free	ADVISORS		Firm's EIN ► 20 -	$\frac{012601}{215214}$	
Use Only	riffits name PRC	TEGOTONAL	T POSTU	فصل	Ψη ΛΙΘΩΚΣ	אנונו , כ	Firm S EIN P 20-	212216	, ,
	Firm's address ► 17	06 SOUTH	500 WE	\$T,	SUITE 20	00			
		UNTIFUL,				. .	Phone no 801	-296-1	1060
								Form 990 -	

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

Schedule of Contributors

OMB No 1545-0047

Employer identification number

2012

Department of the Treasury Internal Revenue Service

Name of the organization

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

STEVEN J & PATRICIA ANDERSEN FOUNDATION

20-2067632

•	STEVEN J & PATRICIA ANDERSEN FOUNDATION 20-200/032
Organization type (chec	k one):
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one inplete Parts I and II.
Special Rules	
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections (70(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% in (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, ins of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or of cruelty to children or animals. Complete Parts I, II, and III.
contributions fo If this box is che purpose. Do no	on (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, if use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. ecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., to complete any of the parts unless the General Rule applies to this organization because it received nonexclusively able, etc., contributions of \$5,000 or more during the year
but it must answer "No"	n 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), on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to seet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
LHA For Paperwork Re	eduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Employer identification number

STEVEN J & PATRICIA ANDERSEN FOUNDATION

20-2067632

Part I	Contributors	(see instructions). Use duplicate copies of Part I if additional space is needed	ſ
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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	SUN PRAIRIE LLC 671 SOMERSET ST. FARMINGTON, UT 84025	\$ 85,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	BLUE PRAIRE CRT 671 SOMERSET ST. FARMINGTON, UT 84025	\$ 20,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)			

Name of organization

Employer identification number

STEVEN J & PATRICIA ANDERSEN FOUNDATION

20-2067632

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

lame of organ	nization	Employer identification number				
TEVEN	J & PATRICIA ANDERSEN	FOUNDATION	20-2067632			
Part III	Exclusively religious, charitable, etc., indiviver. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	dual contributions to section 501(c)(7), e following line entry. For organizations o , contributions of \$1,000 or less for the	(8), or (10) organizations that total more than \$1,000 for the			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(a) the second s	(0,000013.11				
-		(e) Transfer of gift				
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
(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, an	d ZIP + 4	Relationship of transferor to transferee			
(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, an	d ZIP + 4	Relationship of transferor to transferee			
(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, an	d ZIP + 4	Relationship of transferor to transferee			
-						

3 Grants and Contributions Paid During the				
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		
	<u></u>			
MADISON YOUTH CHOIRS	NONE	EXEMPT	CHOIR DONATION	
PO BOX 5233 MADISON, WI 53705				2,5
MD130N, W1 33703				
MORGAN COUNTY	NONE	N/A	MEAT DONATION	
PO BOX 720		1		
MORGAN, UT 84050				23,21
SALT LAKE ARTS ACADEMY	NONE	EXEMPT	ANNUAL FUND DONATION	
844 S 200 E SALT LAKE CITY, UT 84111				2,50
STEEL BING CITT, OI VEILI		<u> </u>		
JIMMY LEWIS FOUNDATION	NONE	EXEMPT	DONATION	
565 S 800 E				
OUNTIFUL, UT 84010		-		2,55
	^			
BALLET WEST	NONE	EXEMPT	ARTS DONATION	
50 w 200 s				
SALT LARE CITY, UT 84111				1,00
		1		
		-		· <u> </u>
		<u> </u>	<u> </u>	

FORM 990-PF	LEGAL FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL	1,913.	0.		0.	
TO FM 990-PF, PG 1, LN 16A =	1,913.	0.		0.	
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	800.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	800.	0.		0.	
FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FILM FESTIVAL FEES PROGRAMMING OUTSIDE SERVICES	500. 41. 16,000. 4,570.	0. 0. 0.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	21,111.	0.		0.	

Form 886	8ጺ(Rev. 1-2013)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	s box		▶ X
Note On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	lled Form 8	3868	
	are filing for an Automatic 3-Month Extension, comple					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies needec	i).
			Enter filer's	identifyin	g number, see	instructions
Type or	Name of exempt organization or other filer, see instru	ctions			identification nu	
print						
File by the	STEVEN J & PATRICIA ANDERSE	N FOU	NDATION	20-2067632		632
due date for filing your	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social sec	curity number (S	SN)
return See	671 SOMERSET ST					
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	dress, see instructions.			
	FARMINGTON, UT 84025					
						بخست
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			$\begin{bmatrix} 0 & 4 \end{bmatrix}$
Applicati	on	Return	1 .			Return
Is For		Code	Is For	···		Code
	or Form 990-EZ	01				
Form 990		02	Form 1041-A		·	08
-	20 (individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	O-T (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted			lously file	d Form 8868.	
	PATRICIA A. ANI			2 5		
	ooks are in the care of \triangleright 671 SOMERSET ST	<u>r. – .</u>		25		
-	none No. ► 801-447-3774		FAX No. ▶		 -	_
	organization does not have an office or place of business					>
	is for a Group Return, enter the organization's four digit	7				
box ►			ach a list with the names and EINs of BER 15, 2013.	all memb	ers the extensio	n is for
				_		
	r calendar year 2012 , or other tax year beginning		, and endin	G Final r	otura	 '
6 If t	the tax year entered in line 5 is for less than 12 months, o	illeck reas	initiarietum L	Fillall	etuiii	
	Change in accounting period					
7 Sta	ate in detail why you need the extension NFORMATION NEEDED TO COMPLET	E AN	ACCURATE RETURN NO	T YET	AVAILAB	LE
	AT ORGANIZATION MEDDED TO COMPEDIA					
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.	0. 0000, 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8a	 \$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated		.	
	payments made. Include any prior year overpayment al			,		
	eviously with Form 8868.			8b	s	0.
	lance due. Subtract line 8b from line 8a. Include your pa	avment wi	th this form, if required, by using			
	TPS (Electronic Federal Tax Payment System). See instr			8c	s	0.
			st be completed for Part II	only.		
Under per	naities of verium I declare that I have examined this form, include	ding accom			f my knowledge a	nd belief,
it is true,	correct, and complete, and that I am authorized to prepare this f	orm	N A		$A \dots d_{i}$	
Signature	► Title ►		AA	Date	►41141V	
					Form 8868	3 (Rev. 1-2013)
	\mathcal{V}					•
	\					
	\/		•			