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Form **990-PF** Department of the Treasury Internal Revenue Service

Name of foundation

For calendar year 2013 or tax year beginning

Return of Private Foundation

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

▶ Do not enter Social Security numbers on this form as it may be made public
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

and ending

OMB No 1545-0052

A Employer identification number

	S	TEVEN J & PATRICIA ANDERSE	EN FOUNDATION	Ţ	20-2067632	
		mber and street (or P O box number if mail is not delivered to street ac		Room/suite	B Telephone number	
	6	71 SOMERSET ST			801-447-37	74
		y or town, state or province, country, and ZIP or foreign pos	stal code		C If exemption application is p	ending, check here
		ARMINGTON, UT 84025				
		Check all that apply Initial return	Initial return of a for	mer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, emputation
	H C	Check type of organization X Section 501(c)(3) exe	mpt private foundation		E If private foundation sta	tus was terminated
		Section 4947(a)(1) nonexempt charitable trust 0	ther taxable private foundat	ion	under section 507(b)(1)	(A), check here
	I Fa	air market value of all assets at end of year J Accounting	g method X Cash	Accrual	F If the foundation is in a	
	(fr		er (specify)		under section 507(b)(1)	(B), check here
		\$ 31,839. (Part I, colum	nn (d) must be on cash b	asis)		T (4) -
	Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for chantable purposes (cash basis only)
		1 Contributions, gifts, grants, etc., received	110,000.		N/A	
		2 Check I if the foundation is not required to attach Sch B		I		·
20		3 Interest on savings and temporary cash investments				
Ď		4 Dividends and interest from securities			<u> </u>	
		5a Gross rents				
Ž		1) Net rental income or (loss)				
H	ē	62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
$\mathbf{\mathcal{G}}$	en.	b assets on line 6a		0.	<u> </u>	
SCANNED NOV	Revenue	7 Capital gain net income (from Part IV, line 2)		· · · · · · · · · · · · · · · · · · ·		
		8 Net short-term capital gain	1			
M		9 Income modifications 10a Gross sales less etums 10a and allowances				
)art		D Less Cost of goods sold		,	, , , , , , , , , , , , , , , , , , , 	
2014		e Gross profit pri/foss) NOV 1 4 2014		·····		
4		11 Other income				
		12 Total Add lines 1 through 1 FA IIT	110,000.	0.	,	
		13 Compensation of officers, directors, trustees, etc	٥.	0.		0.
		14 Other employee salaries and wages				
		15 Pension plans, employee benefits				
	Expenses	16a Legal fees STMT 1	912.	0.		0.
	pen	b Accounting fees STMT 2	800.	0.	·	0.
		· I				
	Ę.	17 Interest			 	
	tra	18 Taxes				
	īnis	19 Depreciation and depletion				
	퉏	20 Occupancy		···		
	ΔĀ	21 Travel, conferences, and meetings				
	an	22 Printing and publications 23 Other expenses STMT 3	61.	0.		0.
	ţį	23 Other expenses STMT 3				
	Operating and Administrative	expenses Add lines 13 through 23	1,773.	0.	,	0.
	Q	25 Contributions, gifts, grants paid	97,452.	· · · · · · · · · · · · · · · · · · ·		97,452.
		26 Total expenses and disbursements				
		Add lines 24 and 25	99,225.	0.		97,452.
		27 Subtract line 26 from line 12				

2 Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

N/A

0 .

Page	2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book		Beginning of year	End o	if year		
P	art	Balance Sheets Atlanted Schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Qash - non-interest-bearing	21,064.	31,839.	31,839.	
		Savings and temporary cash investments				
		Accounts receivable				
	-	Less allowance for doubtful accounts				
	4	Pledges receivable		. , , , , , , , , , , , , , , , , , ,		
		Less allowance for doubtful accounts				
	5	Grants receivable				
ļ	6	Receivables due from officers, directors, trustees, and other				
ı		disqualified persons				
ł	7	Other notes and loans receivable				
		Less allowance for doubtful accounts				
S	8	Inventories for sale or use				
Assets	g	Prepaid expenses and deferred charges				
Ä	10a	Investments - U S and state government obligations				
	b	Investments - corporate stock			· · · · · · · · · · · · · · · · · · ·	
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other			The state of the s	
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation				
	15	Other assets (describe				
	16	Total assets (to be completed by all filers - see the				
		instructions Also, see page 1, item 1)	21,064.	3 <u>1,839</u> .	31,839.	
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Š	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
jab	21	Mortgages and other notes payable				
_	22	Other liabilities (describe				
				•		
_	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here				
s		and complete lines 24 through 26 and lines 30 and 31				
	24	Unrestricted				
<u>la</u>	25	Temporarily restricted				
B9	26	Permanently restricted				
Š		Foundations that do not follow SFAS 117, check here				
Ē		and complete lines 27 through 31.		0		
Assets or Fund Balance	27	Capital stock, trust principal, or current funds	0.	0.	-	
Se	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.		ļ	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	21,064.	31,839.		
Net	30	Total net assets or fund balances	21,064.	31,839.	-	
			21.064	21 020		
	31	Total liabilities and net assets/fund balances	21,064.	31,839.		
P	art	Analysis of Changes in Net Assets or Fund E	Balances			
_		I net assets or fund balances at beginning of year - Part II, column (a), line	30			
•		st agree with end-of-year figure reported on prior year's return)		1	21,064.	
2	•	er amount from Part I, line 27a		2	10,775.	
		er increases not included in line 2 (itemize)		3	0.	
		lines 1, 2, and 3		4	31,839.	
		reases not included in line 2 (itemize)		5	0.	
		il net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	column (b), line 30	6	31,839.	
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STEVEN J & PATRICIA ANDERSEN FOUNDATION

(a) List and desc	and Losses for Tax on I ribe the kind(s) of property sold (e irehouse, or common stock, 200 st	g , real estate,	Income	(b) How a P - Pur D - Dor	chase	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
<u>1a</u>				ļ				
b NO	NE			ļ				
C				-				
<u>d</u>				-				_
<u>e</u>		1		<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1 107	t or other basis xpense of sale	_			ın or (loss) (f) mınus (
<u>a</u>								
<u>b</u>								
<u>c</u>		 						
<u>d</u>							-	
Complete poly for accets about	ig gain in column (h) and owned by	the foundation	on 12/21/60) Cours (O-	1 (h) nove	
Complete only for assets shown	· · · · · · · · · · · · · · · · · · ·	ı ———) Gains (Co (k), but no		
(i) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				from col (i	
	43 01 12/3 1/33	1 0.0.	(1), u					
<u>3</u>				-				
<u>b</u>								
<u>c</u>			 .					· · · · · · · · · · · · · · · · · · ·
<u>d</u>				 				
<u>e</u>				$\overline{}$	1			
2 Capital gain net income or (net ca	pital loss) { If gain, also enter-	er in Part I, line i 0- in Part I, line	7 7	<u>}</u>	<u> </u>			
3 Net short-term capital gain or (los		ind (6)						
If gain, also enter in Part I, line 8,	column (c)			\downarrow				
Part V Qualification U	nder Section 4940(e) fo	- Dadward	Tay on Nat) 3				
(For optional use by domestic private if section 4940(d)(2) applies, leave the Was the foundation liable for the section are the section of t	nis part blank tion 4942 tax on the distributable a ify under section 4940(e) Do not c	mount of any ye	ar in the base per	10d?				Yes X No
	each column for each year, see the	instructions bef	ore making any ei	ntries				(4)
(a) Base period years Calendar year (or tax year beginni			Net value of no				Distrib col (b) divi	(d) ution ratio ided by col. (c))
2012		80,585.			20,457			3.939238
2011		44,651.			21,350			11.459063
2010		79,839.			23,997			3.327041
2009		88,140.			5,083			12.473646
2008		50,157.			601	•		83.455907
2 Total of line 1, column (d)						2		114.654895
3 Average distribution ratio for the the foundation has been in existent.		l on line 2 by 5,	or by the number	of years		3		22.930979
4 Enter the net value of noncharitate	ole-use assets for 2013 from Part X	, line 5				4		12,834.
5 Multiply line 4 by line 3						5		294,296.
6 Enter 1% of net investment incon	ne (1% of Part I. line 27b)					6		0.
7 Add lines 5 and 6						7		294,296.
	a Dod VII. line 4							97,452.
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions	n Part XII, line 4 I line 7, check the box in Part VI, lin	e 1b, and comp	lete that part using	g a 1% tax	rate	<u>[_8 </u>		91,432.

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orm	990-PF(2013) STEVEN J & PATRICIA ANDERSEN F	OUN	IDAT	ION			2067			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940)(a), [,]	4940	(b), 4940(e)	, or 4	948	- see i	nstru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and en	ter "N/.	A" on li	ne 1						
	Date of ruling or determination letter (attach copy of letter if nece	essary	-see in	structions)						^
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	· 🗀	and er	iter 1%	•	1_	ļ			0.
	of Part I, line 27b									
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%									^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers er	nter -0-)		2	 			0.
	Add lines 1 and 2					3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Ot	thers e	nter -0	·)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5	 			<u> </u>
	Credits/Payments	1 _	ı							
	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	 				1			
	Exempt foreign organizations - tax withheld at source	6b	+							
	Tax paid with application for extension of time to file (Form 8868)	6c	-							
	Backup withholding erroneously withheld	<u>6d</u>	<u> </u>			-	1			0.
	Total credits and payments Add lines 6a through 6d					7	-			
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched				8	1			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9				<u> </u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			المعددة ا		10				
	Enter the amount of line 10 to be Credited to 2014 estimated tax			Refund	ea 🖊	11	<u></u>			
	rt VII-A Statements Regarding Activities		فر امرام د	andioinata or in	tanıana	<u></u>			Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	ation	ו מוט ונ	participate of in	leiveile	111		1a	103	X
	any political campaign?	(o inotri	ations for the di	finition	١2		15		<u>X</u>
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos							10		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	а сорі	es or a	iny matemais p	UDIISTIC	<i>30 01</i>				
	distributed by the foundation in connection with the activities							10		Х
	Did the foundation file Form 1120-POL for this year?	VOSE								
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the (1) On the foundation \blacktriangleright \$ (2) On foundation managers	year			0.					
_	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture ta	y imnos	ed on foundation						
	managers > \$ 0 •	turo ta	x iiiipo.	oca on roundatio						
	Has the foundation engaged in any activities that have not previously been reported to the IR	352						2		Х
	If "Yes," attach a detailed description of the activities	.•							,	
	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrum	nent, ar	ticles of incorpo	ration, d	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			•	•			3		X
	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	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	ı						5		X
	If "Yes," attach the statement required by General Instruction T									
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther								
	By language in the governing instrument, or									
	By state legislation that effectively amends the governing instrument so that no mandatory	y direc	tions th	at conflict with t	he state	law				
	remain in the governing instrument?			-				6		<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete	Part I	l, col (c), and l	Part XV	′		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨	1	IONE	-					
								1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney	/ Gener	al (or designate))					
	of each state as required by General Instruction G? If "No," attach explanation							8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of sec				tor cale	indar				v
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," c							10		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedu	ile liş <u>tin</u>	g their na	arnes and addresse	s		E^	rm 99 0	DE	
							r0	ハハ サブし		2013)

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Total. Add lines 1 through 3

Р	an	ıe	8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındatıons, se	e 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	<u> </u>
b	Average of monthly cash balances	1b	13,029.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	13,029.
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	0.
3	Subtract line 2 from line 1d	3	13,029.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4_	195.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	12,834.
6	Minimum investment return Enter 5% of line 5	6	642.
P	art XI Distributable 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	642.
2a			
b	Income tax for 2013 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	7 2c]	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	642.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	642.
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	642.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		0.7. 4.5.0
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	97,452.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	97,452.
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_	97,452.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualified for the	eaction .

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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 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,			- M1	
line 7				642.
2 Undistributed income, if any, as of the end of 2013			_	
a Enter amount for 2012 only			0.	······································
b Total for prior years		0		
		0.	H	·
3 Excess distributions carryover, if any, to 2013				
a From 2008 50, 127.				
b From 2009 187, 386.				
c From 2010 78,639.				
d From 2011 243,583.				
e From 2012 79,562.	639,297.			
f Total of lines 3a through e	039,291.			
4 Qualifying distributions for 2013 from				
Part XII, line 4 ► \$ 97, 452.			0.	
a Applied to 2012, but not more than line 2a	, ,	1. <u>.</u>		; ···
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			1.11	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)		,',,,, ,-,		642.
d Applied to 2013 distributable amount e Remaining amount distributed out of corpus	96,810.			
5 Excess distributions carryover applied to 2013	0.	, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	736,107.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		<u> </u>		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2012 Subtract line		······································		
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of		7 11 11 11		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	50,127.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	685,980.			
10 Analysis of line 9	,			
a Excess from 2009 187, 386.				
b Excess from 2010 78,639.				
c Excess from 2011 243,583.				
d Excess from 2012 79,562.				
e Excess from 2013 96,810.		<u> </u>	<u> </u>	Form 990-PF (2013)

r	J & PATRICI				67632 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o			1		
foundation, and the ruling is effective fo		-	▶ ∟		
b Check box to indicate whether the found		ng foundation described i		4942(J)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
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			<u> </u>		
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon				1	
a "Assets" alternative test - enter			1	1	}
(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,			Į		
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		to this most only	if the foundation	had 65 000 av	
Part XV Supplementary Info at any time during t			it the foundation	nad \$5,000 or m	ore in assets
		uctions.)			
1 Information Regarding Foundatio	_				
a List any managers of the foundation who			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed in	1016 (11411 \$5,000) (566 5	ection 507(u)(z))			
NONE					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large porti	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► ☐ If the foundation of the foundation makes gifts, grants, etc.	nly makes contributions t	o preselected charitable	organizations and does r		
a The name, address, and telephone numi	<u> </u>				
STEVEN ANDERSEN, 801		ne person to whom appir	cations should be addle.	556U	
871 SOMMERSET, FARMI		4025			
b The form in which applications should b	e submitted and informat		rould include		
SUBMISSIONS SHOULD B c Any submission deadlines	E WRITTEN				
NONE					
$\mbox{\bf d}$ Any restrictions or limitations on awards $\mbox{\bf NONE}$	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or	other factors	
323601 10-10-13					Form 990-PF (2013)

Part XV . Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year EXEMPT DONATION-RESEARCH AMERICAN HEART ASSOCIATION NONE 465 S 400 E 1,000. SALT LAKE CITY, UT 84111 SUPPORT MISSIONS IN EXEMPT FIRST CHRISTIAN CHURCH NONE CONGO 800 S MAIN 300. CARTHAGE, MO 64836 BOY SCOUTS OF AMERICA NONE EXEMPT FRIENDS OF SCOUTING, 525 FOOTHILL BLVD AWARDS, SHIRTS SALT LAKE CITY, UT 84113 500. BYU MANAGEMENT SOCIETY NONE N/A DONATION 730 TANNER BUILDING PROVO, UT 84602 2,000. ALLEVIATE SUFFERING CARE FOR LIFE NONE EXEMPT 3850 E BASELINE RD, STE 114 AND PROMOTE MESA, AZ 85206 SELF-RELIANCE IN MOZAMBIQUE 3,482. CONTINUATION SHEET(S) SEE ➤ 3a 97,452. Total b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code		
a b	-		 		
	1		 -		
d					
e	l l				
1					
g Fees and 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		<u>. </u>			
6 Net rental income or (loss) from personal					
property			 		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			1		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b		<u> </u>			
C			+ +		
d			 		
8 (h) (d) and (a)	_	0.	 	0.	0
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		· I		0
Part XVI-B Relationship of Activitie Line No Explain below how each activity for which in the foundation's exempt purposes (other the foundation).	ncome is reported in c	olumn (e) of Part XVI-A			plishment of
					-
		-			
			· -		
323621 10-10-13					Form 990-PF (20

Pairt XVII	Information Ro Exempt Organ		To and Transactions ar	nd Relationships With Nor	
Cio ett tiO	aszation directly or vices	ootly engage in any of the	fullywang with any other organization	oasonoad ir sock on 501 (c) of	Yes No
the Code (Wher than section 501(c)	(3) organistices) or in se	allon 527, relating to poince) organiz	rations?	
		iton to a noncliantatile exi	amplicages callon of		142 X
(1) Czsh					12[1] X 12[2] X
to Other trans	#85el8 , , ,		* *	• •	مرابع والمتالية
	acinans. Of assats to a condumat	noitsassant toressation			X (rjdr
		singaé Jamesa Hadinada	2500		10[2] X
(3) Rental	of facilloss, equipment,	or other assets			1b(3) X
141 Raimb	docmacceine Inemeatur		• • -	•	10[4] X
	or loan guarantees .				*** *****
			afctations		16(6) <u>X</u>
e Shading of	racifiles, equipment, ma	sing lists, other assets, or l	paid trup Cytes	ays show the tax market value of the g	· · · ·
g il ine ansa	er to any or the access to	Tes, CCI (Cele ele Alla. Allabetaria el Hustanistalla.	ng 4,5 endre Caezan jaj si 020 ani Necessal isas kasa kan markic vaki	e in toxy (dangachin ox sparcid susc,64 ska arcay ma rea waran kada ay ma d	ner t, show in
		other assels, or services re			
	Ladovni InnomA (c.		na desincipio demparat on	(d) Conceptor or transfers, Inclusive	na, wed skin ng anatyproteits
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in coction	igappa anopy y or escure. Mitt's of the Coss tollie	r (hai: section 501(c)(3)) :	. 15,5 se or more per 170 mg organis e in samira m2/9	aliana agaznaza	Yes X Re
	nacists fas icilaying sch		,		
	(a) Narra of cr		(d) Type of organization	(c) Description of it	Admistro
	N/A				
					w
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Preparer	Frant's name > PRO		SINES ADVISORS	, LLC Firm's EIN ▶ 2	0-3153167
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ose Only		06 SOUTH 50 CUNTIFUL, UT		0	1-296-1060

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

STEVEN J & PATRICIA ANDERSEN FOUNDATION

OMB No 1545-0047

Name of the organization

Employer identification number

20-2067632

Organization type (check 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 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** ____ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total 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 total 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Employer identification number

STEVEN J & PATRICIA ANDERSEN FOUNDATION

20-2067632

Part I	Contributors (see instructions) Use duplicate copies of Part I	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	\$ 80,000.	Person X Payroll
(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	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2013

Employer identification number

STEVEN J & PATRICIA ANDERSEN FOUNDATION

20-2067632

Part II	Noncash Property (see instructions) Use duplicate copies of Part 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		
		 s			
(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		
		 \$			

Name of orga	nization			Employer identification number			
STEVEN	J & PATRICIA ANDERSEN	FOUNDATION		20-2067632			
Part III	Exclusively religious, charitable, etc., individ year Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	ual contributions to section 501(c following line entry: For organizatio contributions of \$1,000 or less for	ons completing Part III, enter	ins that total more than \$1,000 for the			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held			
-		(e) Transfer of gif	t				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of tra	nsferor to transferee			
_							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of tra	Relationship of transferor to transferee			
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
-							

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor MUSIC FOR THE SOUL, INC. NONE EXEMPT DONATION 1152 MAE STREET, #233 HUMMELSTOWN, PA 17036 10,000. NONE EXEMPT DONATION KRYII 200 IRONTON BLVD PROVO, UT 84606 3,400. MADISON YOUTH CHOIRS NONE EXEMPT CHOIR DONATION PO BOX 5233 MADISON, WI 53705 2,500. MEAT DONATION MORGAN COUNTY NONE N/A PO BOX 720 MORGAN, UT 84050 10,900. SALT LAKE ARTS ACADEMY NONE EXEMPT ANNUAL FUND DONATION 844 S 200 E SALT LAKE CITY, UT 84111 2,500. BRIGHAM YOUNG UNIVERSITY NONE EXEMPT ANNUAL FUND ASB C-389 PROVO, UT 84602 1,000. KUED NONE DONATION FOR N/A 101 S WASATCH DR, RM 215 PROGRAMMING SALT LAKE CITY, UT 84112 120. CLASSICAL 89 NONE EXEMPT DONATION FOR BRIGHAM YOUNG UNIVERSITY PROGRAMMING PROVO, UT 84602 250. NED & CLARALYN HILL NONE ROMANIAN CHARITIES N/A 2867 FOOTHILL DRIVE PROVO UT 84604 20,000. EXEMPT UNIVERSITY OF UTAH NONE SUPPORT RED BUTTE GARDENS 540 ARAPEEN DR, STE 250 SALT LAKE CITY, UT 84108 500. Total from continuation sheets 90,170.

Part XV Supplementary Informati 3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
RESCUE MISSION OF SALT LAKE	NONE	EXEMPT	THANKSGIVING CAMPAIGN	
PO BOX 1431				
SALT LAKE CITY, UT 84110				1,000
MORMON HISTORIC SITES FOUNDATION	NONE	EXEMPT	ICELANDIC MORMON	
299 S MAIN ST, STE 1700			MANUSCRIPT PROGRAM	7 500
SALT LARE CITY, UT 84111		 		7,500
UTAH SYMPHONY 123 W SOUTH TEMPLE	NONE	EXEMPT	MUSIC DONATION	
SALT LAKE CITY, UT 84101				500
ACADEMY FOR CREATING ENTERPRISE	NONE	N/A	DONATION TO TRAINING	
2520 N UNIVERSITY AVE, STE 100			FINANCIAL CHALLENGED	
PROVO, UT 84604		1	STUDENTS IN THE	
			PHILIPPINES, BRAZIL	
			AND MEXICO.	30,000
			1	
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		<u> </u>		
			1	
			l. L.	
		 -		
Total from continuation sheets				

FORM 990-PF	LEGAL FEES		STATEMENT		
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITABLE	
LEGAL	912.	0.		0.	
TO FM 990-PF, PG 1, LN 16A	912.	0.		0.	
FORM 990-PF	ACCOUNTING FEES		STATEMENT 2		
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITABLE	
ACCOUNTING	800.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	800.	0.		0.	
FORM 990-PF	OTHER E	XPENSES	S	ratement 3	
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FEES	61.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	61.	0.		0.	

-	68 (Rev 1-2014)					Page :	
	are filing for an Additional (Not Automatic) 3-Month Ex					$\triangleright (X)$	
	nly complete Part II if you have already been granted an a			led Form	8868.		
Part II	are filing for an Automatic 3-Month Extension, comple Additional (Not Automatic) 3-Month E			al (no c	opios no	odod)	
rarti	Additional (Not Automatic) 3-Worth E	xtensio					
	No.	-4	Enterfliers			r, see instructions	
Type or print	Name of exempt organization or other filer, see instru	ctions.			Employer identification number (EIN) or 20-2067632 Social security number (SSN)		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.						
due date for				Social se			
filing your return See				social security number (5014)			
instructions	***						
	FINGLING OF OTOLS			-			
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Applicat	ion	Return	Application		Return		
Is For		Code	Is For			Code	
Form 990	or Form 990·EZ	01					
Form 990)-BL	02	Form 1041-A				
Form 472	?0 (individual)	03	Form 4720 (other than individual)	er than individual)			
Form 990-PF		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990 T (trust other than above)		06	Form 8870			12	
STOP! D	o not complete Part II if you were not already granted			ously file	d Form 8	368	
	PATRICIA A. ANI						
	poks are in the care of ► 671 SOMERSET ST	· - 1		25			
•	none No ► 801-447-3774		Fax No.				
	organization does not have an office or place of business			thia ia fa	- +661	aroup obook this	
If this box ▶	is for a Group Return, enter the organization's four digit (ch a list with the names and EINs of				
			BER 15, 2014.	an memo	era tile exi	ension is ior.	
	calendar year 2013, or other tax year beginning	10 1 1111	, and ending				
	If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return						
	Change in accounting period	100111000					
7 Sta	ite in detail why you need the extension						
	FORMATION NEEDED TO PREPARE	RETUI	RN NOT AVAILABLE	_			
8a ft	nis application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069. r	enter the tentative tax, less any				
	nrefundable credits. See instructions.	0, 0000,	sinor ino romanio tally local arry	8a	\$	0.	
	his application is for Forms 990·PF, 990·T, 4720, or 6069	enter any	refundable credits and estimated		-3		
	payments made Include any prior year overpayment alle	•					
	eviously with Form 8868			8b	\$	0.	
	ance due. Subtract line 8b from line 8a. Include your pa	yment wit	h this form, if required, by using				
EF	TPS (Electronic Federal Tax Payment System). See instru			8c	\$	0.	
	Signature and Verificati	on mus	it be completed for Part II o	nly.			

Title 🕨

Date D

Form 8868 (Rev. 1-2014)