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Form 990-PF

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.

OMB No 1545-0052

| Den | artmer | nt of the Treasury | | | Social Security numbers of | | | 2010 |
|--|----------------|---|---|---------------|------------------------------------|--|--|--|
| Inte | nal Re | evenue Service | | about Fo | m 990-PF and its separate | | rs.gov/torm990pt. | Open to Public Inspection |
| | | | r tax year beginning | | | , and ending | | |
| Na | me o | f foundation | | | | | A Employer identification | number |
| I | मञ | SIDIO FO | OUNDATION | | | | 46-3702358 | |
| | | | ox number if mail is not deliv | ered to stree | t address) | Room/suite | B Telephone number | |
| | _ | 5 S 300 | | | . 445. 550, | 550 | 801-924-14 | 0.0 |
| _ | | | vince, country, and ZIP | or foreign i | nostal code | | C If exemption application is pe | 7 7 |
| | | T LAKE (| | 4107 | ,0010,000 | | The exemption application is pe | namy, oncor nero |
| G | Checl | k all that apply | X Initial return | | Initial return of a fe | ormer public charity | D 1. Foreign organizations, | check here |
| | | | Final return | | Amended return | , | | |
| | | | Address char | ige . | Name change | | Foreign organizations mee check here and attach con | ting the 85% test, putation |
| H_ | Checl | k type of organiza | tion X Section 5 | 01(c)(3) e | xempt private foundation | | E If private foundation state | is was terminated |
| L | _ <u>_</u> Se | ection 4947(a)(1) | nonexempt charitable ti | ust 🔲 | Other taxable private found | ation | under section 507(b)(1)(| |
| I F | air m | arket value of all a | issets at end of year J | | ing method X Cash | Accrual | F If the foundation is in a 6 | 0-month termination |
| | | Part II, col (c), I | | | ther (specify) | | under section 507(b)(1)(| B), check here |
| | > \$ | Analysis of Do | | art I, colu | mn (d) must be on cash | | | (4) - |
| P | art l | The total of amou | venue and Expenses ints in columns (b), (c), and (| d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net | (d) Disbursements for chantable purposes |
| | T | | the amounts in column (a)) | | 61,225. | | N/A | (cash basis only) |
| | 1 2 | | ifts, grants, etc., receive the foundation is not required to at | | 01,223. | | 197.75 | |
| | 2 | Interest on savings | · · · · · · · · · · · · · · · · · · · | acii ocii u | | | | 1 |
| | 4 | Cash investments Dividends and in | nterest from securities | | | | | |
| | 1 | Gross rents | neroot nom oodannoo | | | | RECEI | 2000 |
| | 1 . | Net rental income of | or (loss) | | | | In Prince of the State of the S | O |
| 4 | 6a | Net gain or (loss) from | om sale of assets not on line | 10 | | , | El Allova | 2 |
| Revenue | b | Gross sales price for assets on line 6a | | | | , , , | 14 Und 10 | UP IX |
|) A | 7 | | ome (from Part IV, line 2) | | | 0. | F 1 Z 5 5 5 1 | Market was 27 FE To |
|) oc | 8 | Net short-term o | apıtal gaın | | | | OGDEN | UI |
| <u> </u> | 9 | Income modifica | | | | | , | ······································ |
| 7 7 7 1 | 10a | Gross sales less re and allowances | turns | | | | | |
| 5 | b | Less Cost of good | s sold | | | | | |
| > | C | Gross profit or (| loss) | | <u> </u> | | | + |
| 5 | 11 | Other income | | | (1 225 | | | |
|) — | 12 | Total. Add lines | | | 61,225. | 0. | | 0. |
| • | 13 | • | fficers, directors, trustees, e | tc | | <u> </u> | | |
| ၁ | 14 | | salaries and wages | | | | | |
| رادار Se | 15 | | mployee benefits | | | | | |
| Šuš | IDa | Legal fees Accounting fees | | | | | | |
| ă | 1 2 | Other profession | | | | | | |
| ē E | 17 | | 141 1665 | | | | | |
| ativ | 18 | Taxes | | | | | | |
| istr | 19 | Depreciation and | i depletion | | | ······································ | | |
| 를. | 20 | Occupancy | . Copiolion | | | | | |
| Ā | 21 | | ces, and meetings | | | | | |
| P | 22 | Printing and pub | - | | | | | |
| y Operating and Administrative Expenses | 23 | Other expenses | STM | T 1 | 1,014. | 0. | | 0. |
| atir | 24 | • | and administrative | | | | | |
| þer | 1 | | ines 13 through 23 | | 1,014. | 0. | | 0. |
| 0 | 25 | Contributions, gi | | | 0. | | | 0. |
| | 26 | Total expenses | and disbursements. | | | | | _ |
| | | Add lines 24 and | 25 | | 1,014. | 0. | | 0. |
| | 27 | Subtract line 26 | from line 12 | | | | | |
| | | | over expenses and disburse | | 60,211. | · · · · · · · · · · · · · · · · · · · | <u> </u> | , ,, , , , , , , , , , , , , , , , , , |
| | | | income (If negative, enter - | | | 0. | N7/2 | |
| | i C | Adjusted net inc | NMP (if negative, enter -0-) | | 1 | | N/A | |

LHA For Paperwork Reduction Act Notice, see instructions.

| Foi | m 99 | 0-PF(2013) PRESIDIO FOUNDATION | | 46-3 | 3702358 Page 2 |
|------------------|----------|--|---------------------------------------|--|--|
| | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of | year |
| | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | 60,211. | 60,211. |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable > | | | nn — n — 1—110 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | ŀ | Less allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | | And Annual Control of the Control of |
| | | Less allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | *************************************** |
| | | Less allowance for doubtful accounts | | | |
| s | 8 | Inventories for sale or use | | | |
| ssets | ٩ | Prepaid expenses and deferred charges | | | |
| As | 102 | Investments - U.S. and state government obligations | | | |
| | 1 | Investments - corporate stock | | | |
| | | • | | - | |
| | 1 | Investments - corporate bonds | · · · · · · · · · · · · · · · · · · · | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | 11 | Investments - land, buildings, and equipment basis | 1 | 1 | |
| | 1.0 | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment basis | 1 | | |
| | | Less accumulated depreciation | | | |
| | 15 | Other assets (describe | | | |
| | 16 | Total assets (to be completed by all filers - see the | | 60 011 | 60 011 |
| _ | <u> </u> | instructions Also, see page 1, item 1) | 0. | 60,211. | 60,211. |
| | ı | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| es | 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) | | | |
| | | | 1 | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31 | [| | |
| ŝ | 24 | Unrestricted | | | |
| <u>a</u> | 25 | Temporarily restricted | | | |
| or Fund Balances | 26 | Permanently restricted | | | |
| Ē | | Foundations that do not follow SFAS 117, check here | | | |
| Ţ | 1 | and complete lines 27 through 31. | 1 | | |
| ō | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| Net Assets | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0. | |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | 0. | 60,211. | |
| ē | 30 | Total net assets or fund balances | 0. | 60,211. | |
| _ | - | | | | |
| | 31 | Total liabilities and net assets/fund balances | 0. | 60,211. | |
| _ | | | | | ······································ |
| P | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 | Tota | 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 | 0. |
| 2 | | r amount from Part I, line 27a | | 2 | 60,211. |
| 3 | | er increases not included in line 2 (itemize) | | 3 | 00,211. |
| 3 4 | | lines 1, 2, and 3 | | 3 | 60,211. |
| 5 | | reases not included in line 2 (Itemize) | | 5 | 0. |
| - | | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | olumn (h) line 30 | 6 | 60,211. |
| <u>6</u> | i via | The assets of faire salances at end of year time 4 millos mie 3/2 Fait II, C | Ordinal (O.), mile OO | | 00,211. |

323511 10-10-13

| Part IV Capital G | ains and Lo | sses for Tax on In | vestmen | t Income | | | | | |
|------------------------------------|---------------------|--|--|--------------------------------------|--------------|--|---------------------------------|---------------------------|------------------------------------|
| | | ind(s) of property sold (e g or common stock, 200 shs | | | (b) D | How acquired - Purchase - Donation | (c) Date ac (mo , day | | (d) Date sold (mo , day, yr) |
| 1a | | | | | | | | | |
| <u>b</u> | NONE | | | | | | | | |
| <u>c</u> | | | | | ↓_ | | | | |
| <u>d</u> | | | | | ┼ | | | | |
| В | | | | | | | L | | |
| (e) Gross sales price | (1) | Depreciation allowed (or allowable) | | st or other basis expense of sale | | 1 | | n or (loss (f) minus (| |
| <u>a</u> | | | | | | | | | |
| <u>b</u> | | - | <u> </u> | | | | | | |
| _ <u>C</u> | | | | | | | | | |
| _d | | | | . | | | | · | |
| Complete only for accets | chowing goin in | nolumn (h) and owned by | the foundation | 0.00.12/21/60 | | | (1) 0 (0- | 1 (1-) | |
| Complete only for assets | | column (h) and owned by | | | | c | (I) Gains (Co of (k), but no | | |
| (i) F M V as of 12/31/6 | 9 | (j) Adjusted basis as of 12/31/69 | | cess of col (I) col (J), if any | | | | from col (| |
| <u>a</u> | | | | | | | | | |
| _ <u>b</u> | | | | | | | | | |
| _ <u>c</u> | | | | | | | | | |
| <u>d</u> | | | | | | | | | |
| | | | | - | | 1 | | | |
| 2 Capital gain net income of | net capital loss | If gain, also enter If (loss), enter -0 | r in Part I, line - in Part I, line | 7 7 | $\}$ | 2 | | | |
| 3 Net short-term capital gail | n or (loss) as def | - | | | • | 1 | | | |
| If gain, also enter in Part I | | | , , | | ١ | | | | |
| If (loss), enter -0- in Part | | 4040/) 6 | | . | | 3_ | . . | | ····· |
| Part V Qualificat | | | | | | | ncome | | |
| (For optional use by domestic | private foundat | ions subject to the section (| 4940(a) tax or | net investment ii | ncom | e) | | | N/A |
| If section 4940(d)(2) applies | leave this part b | lank | | | | | | | |
| | · | | | | | | | | |
| Was the foundation liable for | | | | • | riody | | | | Yes No |
| 1 Enter the appropriate am | | section 4940(e). Do not common for each year, see the m | | | entrio | | | | |
| (a) | ount in each coic | | iistiuctions be | l | | | | | (d) |
| Base periód yea | irs | (b) Adjusted qualifying dis | tributions | Net value of no | (c) oncha |) Iritable-use asse | ets (| Distrit | oùtion ratio vided by col. (c)) |
| Calendar year (or tax year 2012 | beginning in) | , | | | | | | cor (b) div | nded by cor (c/) |
| 2012 | | <u> </u> | | | | | | . | |
| 2010 | | | | | | | | | |
| 2009 | | | | | | | | | |
| 2008 | | | | | | | | | |
| | | L | | 1 | _ | | | | |
| 2 Total of line 1, column (d | 1 | | | | | | 2 | | |
| 3 Average distribution ratio | | se period - divide the total | on line 2 by 5. | or by the numbe | r of ve | ears | | | |
| the foundation has been i | | | · · · · · · · · · · · · · · · · · · · | | | | 3 | | |
| | | , and a , and a | | | | | | | |
| 4 Enter the net value of non | charitable-use as | ssets for 2013 from Part X, | line 5 | | | | 4 | | |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | | |
| 6 Enter 1% of net investme | nt income (1% o | f Part I. line 27h) | | | | | 6 | | |
| | 31110 (1700 | | | | | | | _ | |
| 7 Add lines 5 and 6 | | | | | | | 7 | | |
| 8 Enter qualifying distribution | ons from Part XI | , line 4 | | | | | 8 | | |
| If line 8 is equal to or gree | iter than line 7, c | heck the box in Part VI, line | 1b, and com | plete that part usi | ng a 1 | % tax rate | | | |

| . rm | 990-PF(2013) PRESIDIO FOUNDATION | 46-37023 | 358 | F | Page 5 |
|------|--|--|----------------|------------|---------------|
| Pa | irt VII-A Statements Regarding Activities (continued) | | | _ | |
| | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | | |
| • • | section 512(b)(13)? If "Yes," attach schedule (see instructions) | | 11 | | <u>X</u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory | privileges? | | İ | |
| | If "Yes," attach statement (see instructions) | | 12 | | <u>X</u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | 13 | Х | |
| | Website address ► WWW.BLINDSTRENGTH.ORG | | | | |
| 14 | | ▶801-89 | 8-8 | 191 | |
| | Located at ► 5295 S 300 W, STE 550, SALT LAKE CITY, UT | ZIP+4 ▶ <u>84</u> | 107 | | _ |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | , ► | Ш |
| | and enter the amount of tax-exempt interest received or accrued during the year | 15 | | /A | <u> </u> |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, | ı | - 1 | Yes | No |
| | securities, or other financial account in a foreign country? | ŀ | 16 | | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign | İ | | | |
| - | country | | | 1 | |
| 7 | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | Yes | No |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | 163 | 110 |
| 18 | a During the year did the foundation (either directly or indirectly) | res 🗶 No | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | 03 [22] 110 | | | |
| | 1 1, | Yes X No | | | |
| | a diadramica bergen. | Yes X No | | | |
| | (b) 1 dillion goods, solvides, or identified to (a) accept them want a tradesiment person. | Yes X No | | - 1 | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | | |
| | for the benefit or use of a disqualified person)? | Yes X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception Check "No" | , | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | | 1 | |
| | termination of government service, if terminating within 90 days) | Yes X No | | | |
| | b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | _ | | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | | |
| | c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | i | | | |
| | before the first day of the tax year beginning in 2013? | | 1c | | <u>X</u> |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | 1 | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)) | | | | |
| | a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn | ing · · · · · · · · · · · · · · · · · · · | | | |
| | | Yes X No | | | |
| | If "Yes," list the years | oot | | | |
| | b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack | | | | |
| | statement - see instructions) | N/A | 2b | | |
| | c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | | |
| | | | | | |
| 3 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | | |
| Ū | during the year? | Yes X No | 1 | | |
| | b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons a | = | | | |
| | May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to | | | | |
| | of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule | C, | | | |
| | Form 4720, to determine if the foundation had excess business holdings in 2013.) | N/A | 3b | | |
| | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | 4a | | X |
| | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo | se that | | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2013? | | 4b | <u> </u> | X |
| | | For | rm 99 0 |)-PF | (2013) |

0.

Total. Add lines 1 through 3

| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, see | e instructions.) |
|----|---|-------------------|------------------|
| 1 | 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 | 0. |
| b | Average of monthly cash balances | 1b | 0. 30,105. |
| C | Fair market value of all other assets | 10 | |
| d | Total (add lines 1a, b, and c) | 1d | 30,105. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | _ 0. |
| 3 | Subtract line 2 from line 1d | 3 | 30,105. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 452. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 29,653. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,483. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,483. |
| 2a | Tax on investment income for 2013 from Part VI, line 5 | | |
| b | Income tax for 2013 (This does not include the tax from Part VI) | 1 1 | |
| C | Add lines 2a and 2b | 2c | _ 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,483. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 1,483. |
| 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 | 1,483. |
| P | art XII Qualifying Distributions (see Instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| a | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 18 | 0. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 0. |
| 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 | 0. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years | qualifies for the | e section |

| Part XIII | Undistributed | Income | (see instructions) |
|-----------|----------------------|--------|--------------------|
| Part Alli | Olidistributed | | (See manuchons) |

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|--|---------------|--|-------------|----------------------------------|
| 1 Distributable amount for 2013 from Part XI, line 7 | | | | 1,483. |
| 2 Undistributed income, if any, as of the end of 2013 | | | | |
| a Enter amount for 2012 only | | 1111111 | 0. | . (|
| b Total for prior years | | 0. | | |
| 3 Excess distributions carryover, if any, to 2013 | | | | |
| a From 2008 | | | | |
| b From 2009 | | | | |
| c From 2010 | | | | |
| d From 2011 | | | | |
| e From 2012 | | | | |
| f Total of lines 3a through e | 0. | | | ····· |
| 4 Qualifying distributions for 2013 from | | | | |
| Part XII, line 4 ► \$0 . | | | | |
| a Applied to 2012, but not more than line 2a | | | 0. | , |
| b Applied to undistributed income of prior | | _ | | |
| years (Election required - see instructions) | | 0. | | Hiti I illi'i iisti il ii ii iii |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | ************************************** | | |
| d Applied to 2013 distributable amount | | | | 0. |
| e Remaining amount distributed out of corpus | 0. | · · · · · · · · · · · · · · · · · · · | | |
| 5 Excess distributions carryover applied to 2013 (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 | | 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 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 | | | | 1 400 |
| be distributed in 2014 | <u> </u> | | | 1,483. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | 0 | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2008 | ^ | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2014. | 0. | | | |
| Subtract lines 7 and 8 from line 6a | V • | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2009 | | | | |
| b Excess from 2010 | | | | |
| c Excess from 2011 | | | | |
| d Excess from 2012 | | | | |
| B Excess from 2013 | | | <u> </u> | Form 990-PF (2013) |

46-3702358 Page 11

| 3 Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | |
|--|--|----------------------|----------------------------------|----------|--|--|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount | | |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | | | |
| a Paid during the year | | | | | | |
| | | | | | | |
| NONE | | | | | | |
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| | | | | | | |
| Total | | | ▶ 3a | 0. | | |
| b Approved for future payment | | | | | | |
| | | | | ļ | | |
| NONE | | <u> </u> | | | | |
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| | | L | | | | |
| Total | | | ▶ 3b | 0, | | |

Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated t | ousiness income | Excluded | by section 512, 513, or 514 | (e) |
|--|---|-----------------------------|------------------------|-----------------------------|---------------------------------------|
| • | (a) Business | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue | code | | code | | |
| ab | - | | + +- | | , , , , , , , , , , , , , , , , , , , |
| | | | | | |
| | | | + | | |
| 0 | | | + | | |
| f | - | | | | |
| g Fees and contracts from government agencies | | . — | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 1 1 | 1 | |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate | | ATT. 1 | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | |
| Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue | | | | | |
| a | | | . | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Subtotal Add columns (b), (d), and (e) | | 0 | • | 0. | 0 |
| 3 Total Add line 12, columns (b), (d), and (e) | | | | 13 | 0 |
| See worksheet in line 13 instructions to verify calculations | | | | | |
| Part XVI-B Relationship of Activitie | s to the Accon | nplishment of E | xempt F | Purposes | |
| Line No Explain below how each activity for which i | nooms is reported in | oolumn (a) of Part VVI | A contribute | ad importantly to the accom | nlichment of |
| the foundation's exempt purposes (other the | | | A CONTINUE | ou importantly to the accom | phoninent of |
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Part XVI-A Analysis of Income-Producing Activities

| | (a) | ousiness income (b) | (C) Exclu- | (d) | (e) Related or exempt |
|--|------------------|--------------------------|----------------|---|--|
| Program service revenue | Business code | Amount | sion code | Amount | function income |
| a | _ | <u> </u> | | | ļ |
| b | - | | | | |
| C | 1 | | | | |
| d | - | | | | |
| e | | ·· | | | |
| f | | | | | |
| g Fees and contracts from government agencies | - | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | |
| Investments | | | - | | |
| Dividends and interest from securities | | | ļ | *************************************** | |
| Net rental income or (loss) from real estate | | | 1 | ····· | <u>- </u> |
| a Debt-financed property b Not debt-financed property | | | | | - |
| | | | - | | |
| Net rental income or (loss) from personal property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | |
| Net income or (loss) from special events | | | | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue | | | | | |
| a | | | | <u></u> | |
| b | t I | | | | |
| C | 1 1 | | | | |
| d | | | | | |
| е | | | ļ.,,, | | |
| Subtotal Add columns (b), (d), and (e) | | 0. | | 0 | |
| Total Add line 12, columns (b), (d), and (e) | | | | 13 _ | |
| | | | | | |
| ee worksheet in line 13 instructions to verify calculations) | | | | · · · · · · · · · · · · · · · · · · · | |
| | | nplishment of E | xemp | t Purposes | |
| ret XVI-B Relationship of Activities Replace No Explain below how each activity for which income. | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| ee worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| re worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities The No Explain below how each activity for which income the control of the control o | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| re worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities The No Explain below how each activity for which income the control of the control o | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities ne No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities ne No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities ne No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities ne No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities ne No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities ne No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| ret XVI-B Relationship of Activities ne No Explain below how each activity for which income. | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| ret XVI-B Relationship of Activities ne No Explain below how each activity for which income. | to the Accor | column (e) of Part XVI-A | | | omplishment of |
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| ret XVI-B Relationship of Activities Replace No Explain below how each activity for which income. | to the Accor | column (e) of Part XVI-A | | | omplishment of |
| Part XVI-B Relationship of Activities ine No Explain below how each activity for which inc | to the Accor | column (e) of Part XVI-A | | | omplishment of |

| Form 990-PF (2013) | PRESIDIO FOUNDAT | | 46-37 d Relationships With Nonc | | Page 13 |
|---------------------------|---|---|--|--|---------------------|
| | iation Regarding Transfe ot Organizations | ers to and transactions an | id Relationships with Nonci | naritable | |
| | | ne following with any other organization | described in section 501(c) of | Ye | s No |
| | | section 527, relating to political organiza | ations? | | |
| a Transfers from the repo | orting toundation to a noncharitable | exempt organization of | | 1 1 | |
| (1) Cash | | | | 1a(1) | _ <u> X</u> |
| (2) Other assets | | • | • | 1a(2) | X |
| b Other transactions. | | | | 1 | v |
| | a noncharitable exempt organization | | | 15(1) | X |
| • • | ts from a noncharitable exempt orga | nization | • | 10(2) | $\frac{\Lambda}{X}$ |
| • • | equipment, or other assets | | | 16(4) | X |
| (4) Reimbursement a | • | | | 10(5) | $\frac{x}{x}$ |
| (5) Loans or loan gua | rvices or inembership or fundraising | solicitations | | 10(6) | $-\frac{x}{x}$ |
| | uipment, mailing lists, other assets, | | , | 10 | Х |
| d if the answer to any of | the above is Yes," complete the follo | owing schedule. Column (b) should always | lys show the fair market value of the goo- | ds, other assets, | |
| | | | in any transaction or sharing arrangeme | | |
| | the goods, other assets, or services | | | | |
| (a) (b) Amount | involved (c) Name of no | ncharitable exempt organization | (d) Description of transfers, transactions | and shiir glamanad | res . |
| | | N/A | i | | ······ |
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| | | ted to, one or more tax-exempt organiza | ations described | | |
| | e Code (other than section 501(c)(3) |) or in section 527? | | Yes [| X No |
| b If Yes complete the | | | | - | |
| (a | Name of organization | (b) Type of organization | (c) Description of relat | ionship | |
| | N/A | | | | |
| | | | | | |
| | | | | ······································ | |
| | | | | | |
| Under penalties of p | erjary. I declare that I have examined this re- | turn including accompanying schedules and s | tatements used to the best of my knowledge | | |
| | | rer (other than t ixpayer) is based on all informa 1 | | May the IRS discu | Dates |
| Here | 1). XIII i) io | 17/11/201 | | X Yes | No |
| Signature of off | icer or trustee | Date | Title | | |

| | and b | penaties of perjury I deciare that I have examined the first true correct and complete. Deciaration of p | | | |
|------------------------|-------|--|----------------------|---------|---|
| Paid Prepa Use C | | PrintT; pe preparer s name RANDY SELLERS Firm s name ► PROFESSIONAL | Preparer's structure | 8-11.14 | Check : |
| | | Firm's address > 1706 SOUTH BOUNTIFUL, | 500 West, Suin | re 200 | Phone no 801-296-1060 Form 990-PF (2013 |
| | | | 1 / | | |

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 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

OMB No 1545-0047

2013

Employer identification number

PRESIDIO FOUNDATION 46-3702358 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (I) Form 990, Part VIII, line 1h, or (II) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, 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

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)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

| PRESI | DIO_FOUNDATION | | 0-3/02358 |
|-------------|---|--------------------------------|--|
| Part I | Contributors (see instructions). Use duplicate copies of Part | if additional space is needed. | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | PRESIDIO GROUP INC 5295 S 300 W, STE 550 SALT LAKE CITY, UT 84107 | \$\$ | 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 |
| | | | B |

323452 10-24-13

(a)

No.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

(c)

Total contributions

Payroll Noncash (Complete Part II for noncash contributions)

Person Payroll Noncash (Complete Part II for noncash contributions.)

Type of contribution

(b)

Name, address, and ZIP + 4

Employer identification number

PRESIDIO FOUNDATION

46-3702358

| 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 | | |
| | | \$ | | | |
| (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 | | |
| 202452 40 0 | | \$\$ | 100 DD0.E7 or DD0.BE) (2013 | | |

Employer identification number

| | FOUNDATION | | 46-3702358 | | |
|--------------------------|--|--|---|--|--|
| y t | Exclusively religious, charitable, etc., indiviear. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc Jse duplicate copies of Part III if addition | ne following line entry. For organizations c., contributions of \$1,000 or less for th | 7), (8), or (10) organizations that total more than \$1,000 for s completing Part III, enter ne year (Enter this information once) \$ | | |
| a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| | Transferee's name, address, a | (e) Transfer of gift | 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 | | |
| | Transferee's name, address, a | (e) Transfer of gift | 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, and 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, a | and ZIP + 4 | Relationship of transferor to transferee | | |
| | | | 0-1-4 1- D/F 000 000 F7 000 DF | | |

| FORM 990-PF | OTHER EXPENSES | | STATEMENT 1 | | |
|--------------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| OFFICE SUPPLIES LICENSE & PERMITS | 164. 850. | | | 0. | |
| TO FORM 990-PF, PG 1, LN 23 | 1,014. | 0. | | 0. | |

Form **8868**

(Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

Internal Revenue Service • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990·T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions. print 46-3702358 PRESIDIO FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) filing your 5295 S 300 W, NO. 550 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions SALT LAKE CITY, UT 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Return **Application Application** Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 6069 05 Form 990-T (sec 401(a) or 408(a) trust) 11

| orr | n 990-T (trust other than above) 06 Form 8870 | | · | 12 |
|-------------|---|-----------|----------------------|------------|
| _ | JOHN SCHLICHTE | | | |
| • 1 | he books are in the care of \blacktriangleright 5295 S 300 W, STE 550 $-$ SALT LAKE CITY, | UT | 84107 | |
| Τ | elephone No. ► 801-898-8191 Fax No. ► | | _ | |
| • If | the organization does not have an office or place of business in the United States, check this box | | | . 🗀 |
| • If | this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the | is is foi | r the whole group, o | check this |
| оох | | | | |
| 1 | I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2014 , to file the exempt organization return for the organization named is for the organization's return for: X calendar year 2013 or | | The extension | |
| | tax year beginning, and ending | | · | |
| 2 | If the tax year entered in line 1 is for less than 12 months, check reason X Initial return Fin Change in accounting period | al retur | n | |
| За | If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | | | |
| | nonrefundable credits. See instructions. | 3a | \$ | 0. |
| þ | If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and | | | |
| | estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | 0. |
| С | Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, | | | |
| | by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |
| | | | | |

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions. LHA

Form 8868 (Rev 1-2014)

| Part II Type or print File by the due date for filing your return See instructions | complete Part II if you have already been granted an a selfiling for an Automatic 3-Month Extension, comple Additional (Not Automatic) 3-Month Extension of exempt organization or other filer, see instruction in the complete selfility in the complete se | te only Pa xtensio | art I (on page 1). n of Time. Only file the origin | al (no c | opies need | ied). | |
|---|--|--------------------------|--|-------------------------------------|------------------------------------|---------------------------------------|--|
| Type or print File by the due date for filing your return See instructions | Additional (Not Automatic) 3-Month E Name of exempt organization or other filer, see instru | xtensio | n of Time. Only file the origin | | | ied). | |
| Type or print File by the due date for filing your return See instructions | Name of exempt organization or other filer, see instru | | | | | 100/. | |
| print File by the due date for filing your return. See instructions | | ictions. | Entermers | | | oo inctructions | |
| File by the due date for illing your eturn. See Instructions | | ictions. | | | identifying number, see instructio | | |
| lile by the lue date for ling your eturn See hatructions | RESIDIO FOUNDATION | | | Employer identification number (Eli | | | |
| live date for ling your eturn See histructions | | DDECIDIO EQUIDANION | | | 46-370235 | | |
| eturn See D | Number, street, and room or suite no. If a P.O. box, see instructions. 5295 S 300 W, NO. 550 | | | Social security number (SSN) | | | |
| į. | | | | | | | |
| | City, town or post office, state, and ZIP code. For a for SALT LAKE CITY, UT 84107 | oreign add | ress, see instructions | | | | |
| Enter the R | eturn code for the return that this application is for (file | e a separa | te application for each return) | | | 0 4 | |
| Application | 1 | Return | Application | | | Return | |
| s For | | Code | is For | | | | |
| orm 990 o | r Form 990-EZ | 01 | | | | | |
| orm 990-B | 3L | 02 | Form 1041-A | | | | |
| orm 4720 | (individual) | 03 | Form 4720 (other than individual) | idual) | | | |
| orm 990-P | 'F | 04 | Form 5227 | | | | |
| orm <u>990 T</u> | (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | | | |
| Form 990 T (trust other than above) | | | Form 8870 | 8870 | | | |
| Telephore If the org | ks are in the care of ▶ $\frac{5295}{800}$ S $\frac{300}{800}$ W, some No. ▶ $\frac{801-898-8191}{8000}$ ganization does not have an office or place of business for a Group Return, enter the organization's four digit | s in the Ur Group Exe | Fax No. ► | f this is fo | r the whole g | | |
| 00x ► | . If it is for part of the group, check this box | | nch a list with the names and EINs on BER 15, 2014. | all memb | ers the exten | sion is for | |
| | Jest an additional 3-month extension of time until $-rac{1}{2}$ alendar year 2013 , or other tax year beginning | | | _ | | | |
| | tax year entered in line 5 is for less than 12 months, c | | | Final r | oturn | · | |
| | Change in accounting period | Heck reas | |) Filial I | etutn | | |
| | e in detail why you need the extension | | | | | · · · · · · · · · · · · · · · · · · · | |
| INF | FORMATION NEEDED TO PREPARE | RETU | RN NOT AVAILABLE | | | | |
| 8a If this | s application is for Forms 990-BL, 990-PF, 990-T, 4720 | or soso | enter the tentative tax loss any | | | | |
| | efundable credits. See instructions. | , 01 0009, | enter the tentative tax, less ally | 8a | \$ | 0 | |
| | s application is for Forms 990-PF, 990-T, 4720, or 6069 |) enter an | v refundable credits and estimated | - 00 | Ψ | | |
| | ax payments made include any prior year overpayment allowed as a credit and any amount paid | | | | | | |
| • | iously with Form 8868 | | a oroan and any amount pare | 8b | \$ | 0 | |
| | nce due. Subtract line 8b from line 8a. Include your pa | avment wit | h this form, if required, by using | | | · · · · · · · · · · · · · · · · · · · | |
| | S (Electronic Federal Tax Payment System) See instri | - | | 8c | \$ | 0 . | |
| | | | t be completed for Part II o | | <u> </u> | | |
| ider penaltie | es of perjuly. I declare that I have examined this form, including and complete, and that I am authorized to prepare this fo | | | - | f my knowledg | e and belief, | |
| 0 1100, 00110 | Title ▶ | / B | \mathcal{L} I | Date | ~ V | 1 .1/1 | |