Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2014

Open to Public

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

IIILE	TROUT TOVO	interpretation about Form 990 and its instructions is at www.ii									
<u>A</u> .	For the	e 2014 calendar year, or tax year beginning NOV 1 , 2014, and endi	ng OC	T 31	, 20 15						
В	Check i	if applicable: C Name of organization UTAH HUMANITIES COUNCIL		D Employe	er identification number						
	Address	s change Doing business as UTAH HUMANITIES			87-0307076						
	Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone										
	Initial re	eturn 202 WEST 300 NORTH			801-359-9670						
	Final retu	um/terminated City or town, state or province, country, and ZIP or foreign postal code	l								
	Amende	ed return SALT LAKE CITY, UT 84103		G Gross re	ceipts \$						
	Applica	tion pending F Name and address of principal officer: AMI JO COMEFORD		-	subordinates? Yes No						
		SAME AS ENTITIY	H(b) Are all s	subordinates	sincluded? 🗌 Yes 🔲 No						
	Tax-exe	empt status:	If "No	o," attach a	list. (see instructions)						
J	Website		H(c) Group	exemption	number 🕨						
K	Form of	organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form	ation: 1975	M State	of legal domicile: UT						
P	art I	Summary									
	1	Briefly describe the organization's mission or most significant activities: UTAL									
Çe		EMPOWERING INDIVIDUALS AND GROUPS TO IMPROVE THEIR COMMUNITIES TH	ROUGH ACTI	VE ENGA	GEMENT IN THE						
Jan		HUMANITIES.									
Governance	2	Check this box ▶☐ if the organization discontinued its operations or disposed	of more than	25% of	its net assets.						
ĝ	3	Number of voting members of the governing body (Part VI, line 1a)		3	19						
≪	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19						
ţ.	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	12						
Activities &	6	Total number of volunteers (estimate if necessary)		6	130						
Ą	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.						
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.						
			Prior Ye	ar	Current Year						
_	8	Contributions and grants (Part VIII, line 1h)		942,200.	1,147,643.						
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.						
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		811.	896.						
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.						
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	943,011.	1,148,539.						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		30,250.	45,532.						
	14	Benefits paid to for members (Part IX, column (A), line 4)		0.	0.						
65	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		614,180.	586,901.						
Sue	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ▶									
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		374,821.	336,296.						
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1	,019,251.	968,729.						
_	19	Revenue less expenses. Subtract line 18 from line 12		-76,240.	179,810.						
Net Assets or			Beginning of Cu		End of Year						
Sset	20	Total assets (Part X, line 16)	2	,008,361.	2,192,939.						
et A	21	Total liabilities (Part X, line 26)		105,382.	111,592.						
		Net assets or fund balances. Subtract line 21 from line 20	1	,902,979.	2,081,347.						
	art II	Signature Block									
Ur tru	nder pena Le, correc	alties of perjury, I declare that I have examined this return, including accompanying schedules and stal ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepar	ements, and to the er has any knowl	ne best of n edge.	ny knowledge and belief, it is						
		Walter Buckenham			4-2016						
Sid	an.	Signature of officer	Da	-							

Cynthia Buckingham, Executive Director Here Type or print name and title Date Print/Type preparer's name Preparer's signature PTIN Check [if **Paid** self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** Firm's address 🖹 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) 🗌 Yes 🗌 No

Page 2

Part I		Program Service Accomp									
			or note to any line in this Part III .	<u> </u>							
1		organization's mission:	ITÉ BALICTIBAS ILICTADIAN CANETIS	COLLOGIC AND COLLECTS AND							
	***		IES, MUSEUMS, HISTORICAL SOCIETIES ITY-BUILDING OPPORTUNITIES FOR VO								
			ENTS INCLUDING AN ANNUAL STATEWII								
	F=====================================	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	FOR PUBLIC HUMANITIES PROJECTS.								
2		*	gram services during the year which v	vere not listed on the							
	prior Form 990 or 99										
	If "Yes," describe th	ese new services on Schedule	e O.								
3			ce significant changes in how it cor	ducts, any program							
	services?	· · · · · · · · · · · · · · · · · · ·		☐ Yes 🗹 No							
	If "Yes," describe th	ese changes on Schedule O.									
4				est program services, as measured by							
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.										
	the total expenses, and revenue, it any, for each program service reported.										
	/O = -1 = -	(Tours of the Control	- Latin	\(\(\O_{							
4a		Expenses \$ 672,684. in	NONPROFIT ORGANIZATIONS FOR PUB) (Revenue \$)							
			TORICAL SOCIETIES, AND CULTURAL A								
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		HUMANITIES; AND PRESENTS SPECIAL								
	BOOK FESTIVAL.		TIONNATINES, AND TRESERVES STEERING								
		;	***************************************								
			***************************************								
	(2 ·			\ D							
4b	(Code:)	Expenses \$i	ncluding grants of \$	) (Revenue \$)							
		· · · · · · · · · · · · · · · · · · ·									
		: <u> </u>									
		}									
		- 1									
		÷									
		:									
4c	(Code:)	Expenses \$i	ncluding grants of \$	) (Revenue \$)							
		; 1 									
		·									
		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>									
		,	4								
		. ,									
****			ALIPSON MARKET	- ALMAN - AMP							
<b>4</b> d		ces (Describe in Schedule O.)		,							
	(Expenses \$	including grants of \$									
4e	Total program servi	ce expenses >	672,684.								

; ;

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	✓	-
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<b>✓</b>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	1	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			_ ا
	Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			$\vdash$
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u> </u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			<u> </u>
_	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		4.5	
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓_	<u> </u>
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			_ ا
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<b>√</b>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
Ť	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			١,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100	1	
L	Schedule D, Parts XI and XII	12a		<del> </del>
Ŋ	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	1	✓
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del> </del>	1
13 14 a		14a	<del> </del>	1
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1.10		Ť
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	1		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		<b>√</b>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
h	If "Ves" to line 20a idid the organization attach a copy of its audited financial statements to this return?	20b	1	1

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>√</b>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>√</b>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<b>✓</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
33	complete Schedule N, Part II	32		✓_
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
	13: Note: Air of its 30 mers are required to complete concedure O		n 990	(2014)

* *

EII.	<del></del>			_
	Check if Schedule O contains a response or note to any line in this Part V			<u>.                                    </u>
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0.			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		+ 1	
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	*************
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: >		4	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts		. 1	
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١.
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<b>✓</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		N. I.	
_		7a 7b		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
·	required to file Form 8282?	7c		j
d	If "Yes," indicate the number of Forms 8282 filed during the year	,,,		<b>.</b>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	PASSINSE EKENTA	<b>B</b> ESCHWARRINGS
9	Sponsoring organizations maintaining donor advised funds.		la ka	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	SANDERS AND STREET	Socratic Lonic million in
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on Part VIII, line 12		ED:	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	BAUM STANTS	Total School
. b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
þ	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
C	Enter the amount of reserves on hand	4.4	100	7
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		<b>-</b>
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	140		·

All Pringers, Shares

Part	Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schools if Schools is School and Schools in School and Schoo						
~	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		. ✓			
Secti	on A. Governing Body and Management			T-11-			
1a	Enter the number of voting members of the governing body at the end of the tax year		Yes	No Tribe			
ь 2	Enter the number of voting members included in line 1a, above, who are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1			
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6		√ √ √			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?	0-	<b>√</b>				
a b	Each committee with authority to act on behalf of the governing body?	8a 8b	<b>▼</b>				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			,			
Conti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- d- 1				
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Revenues	ue Co	Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	1			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		_			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a					
b C	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	✓				
	describe in Schedule O how this was done	12c	✓				
13 14 15	Did the organization have a written whistleblower policy?	13 14	<b>&gt;</b>				
	The organization's CEO, Executive Director, or top management official	15a 15b	<b>\</b>	<b>/</b>			
b	with a taxable entity during the year?	16a 16b		1			
Secti	on C. Disclosure	100					
17 18	List the states with which a copy of this Form 990 is required to be filed ► UTAH  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(	c)(3)s	only)			
19	☑ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interfinancial statements available to the public during the tax year.	erest (	oolicy	, and			
20	State the name, address, and telephone number of the person who possesses the organization's books and rec CYNTHIA BUCKINGHAM, 202 W 300 N SALT LAKE CITY, UT 84103, 801-359-9670	ords:	<b>&gt;</b>				

Form 990 (2014)	έ ι		

#### Page 7 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . . . . . . . . .

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

; :

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- · List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(C)										1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(A) ^{1/2}	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
righte and high	hours per							compensation	compensation from	
÷	week (list any			_	1	<del></del>	~	from	related	other
	hours for related	₹	stit	Officer	9,6	호충	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ect du	tion	*	Key employee	yee yee	व्	(W-2/1099-MISC)		organization
* ·	below dotted line)	~ =	nal t		loye	Ë				and related organizations
* · · · · · · · · · · · · · · · · · · ·	iii ie)	Individual trustee or director	Institutional trustee		đ	ens				Organizations
7 - 1 2 - 1 2 - 1		"	ee			Highest compensated employee				
			$\vdash$			۳	$\vdash$			
(1) DAVID ALLRED	1.5									
CHAIR-ELECT		1		✓				О.	0.	0.
(2) ROBERT "ARCHIE" ARCHULETA	1.5									
DIRECTOR		✓						0.	0.	0.
(3) NANCY BENTLEY	1.5									
DIRECTOR		✓						0.	0.	0.
(4) TINA CALAMITY	1.5									
DIRECTOR		1						0.	0.	0.
(5) AMI JO COMEFORD	3.0									
CHAIR				✓		L		0.	0.	0.
(6) MATT DUGDALE	1.5									
DIRECTOR		✓			_			0.	0.	0.
(7) IRENE FISHER	1.5									
PAST CHAIR				1				0.	0.	0.
(8) OWEN FULLER	1.5									
DIRECTOR		1						0.	0.	0.
(9) DAVID GEE	1.5									
DIRECTOR		✓				<u> </u>		0.	0.	0.
(10)NAN GROVES ANDERSON	1.5									
FISCAL OFFICER		L		✓				0.	0.	0.
(11)GEORGE HANDLEY	1.5									
DIRECTOR		✓						0.	0.	0.
(12)KATHY HURST	1.5				ļ				1	
DIRECTOR		✓						0.	0.	0.
(13)BOB KING	1.5									
DIRECTOR		✓						0.	0.	0.
(14)SUMIKO MARTINEZ	1.5									
DIRECTOR	_	✓				<u> </u>		0.	0.	0.

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, aı	nd ł	lighe	st C	ompensated E	mployees (con	tinued)
	(C)										
	(A) ⁽	(B)	Position (do not check more than o						(D)	(E)	(F)
	Name and title	Average					than ( is both		Reportable	Reportable	Estimated
							or/trus		compensation	compensation from	(
	5 2 €	week (list any hours for	악크	5	Q	2	9 ≖	'n	from the	related organizations	other compensation
		related	육호	Stit.	Officer	34	불	Former	organization	(W-2/1099-MISC)	
	** * *	organizations	ecto	tio	1	픨	st c	1 19	(W-2/1099-MISC)		organization
	. * 	below dotted line)	Individual trustee or director	Institutional trustee	l	Key employee					and related organizations
		une)	stee	rust		ē	) en				Organizadoris
			"	ее	ŀ		Highest compensated employee				
(45)CI	AUDIA NAKANO	1.5		$\vdash$		$\vdash$		├			
DIREC		1.3	1						0.	١,	0.
	NA RAE SHAW	1.5	<b>- •</b>	Н		-		⊢	0.		, <u>,</u>
DIREC		1.0							0.	١,	). 0.
		1.5	<b>-</b>	$\vdash$	$\vdash$	<del> </del>		⊢	<u>U.</u>		<i>J.</i>
	CKIE THOMPSON	1.5	,								
DIREC			<b>✓</b>						0.	(	0.
	TIMA VERA	1.5							_	1	
DIREC		W	<b>✓</b>			<u> </u>		ļ	0.		0.
	NRY WURTS	1.5									
_	L OFFICER				✓			<u> </u>	0.	(	0.
(20)								ļ			
	\$ t -		<u> </u>					L			
(21)		ļ									
	N 2										4
(22)	·										
	<u> </u>				_						
(23)									1		
	y y										
(24)	:									1	
	1										
(25)											
	: 										
1b	Sub-total							<b>&gt;</b>	0.		0.
С	Total from continuation sheets to Part	VII, Sectio	пΑ					>	0.	(	0.
d	Total (add lines 1b and 1c)	<u>.</u> .						<b>&gt;</b>	0.	. (	). 0.
2	Total number of individuals (including but						above	e) w	ho received m	ore than \$100,0	000 of
	reportable compensation from the organ	ization ▶ 0									
	2										Yes No
3	Did the organization list any former of	ficer, direc	tor, c	r tr	uste	эe,	key e	emp	oloyee, or high	est compensa	ted
	employee on line 1a? If "Yes," complete	Schedule J	for su	ıch	indi	ivid	ıal				. 3 🗸
4	For any individual listed on line 1a, is the	sum of rei	portal	ble d	con	nper	nsatio	n a	nd other comp	ensation from	SECURIORISM PARAMETERS PARAMETERS AND PROPERTY AND PROPERTY AND PARAMETERS AND PA
	organization and related organizations										
	individual	-									. 4
5	Did any person listed on line 1a receive of									ration or individ	
J	for services rendered to the organization										
Section	on B. Independent Contractors						-				101
1	Complete this table for your five highest	compensate	od inc	den.	and	ont	contr	acto	ors that receive	ed more than \$	100 000 of
•	compensation from the organization. Rep										
	year.	Joir compe	nsanc	) I I I C	<i>J</i> 1 LI	ie c	aieiiu	icai y	real eliding wit	II Ci Willill lile	organization s tax
									/D)		(0)
	(A) S Name and business add	Iress							(B) Description of s	ervices	(C) Compensation
	7.3	Lunite									
	. 4	~~~						$\vdash$			
	4. E.							$\vdash$			
	2.5							$\vdash$			1800
	* 1 · · · · · · · · · · · · · · · · · ·								44		
	Total number of independent estimate	va finalisti	- h-	.+	o+ '	imi	od +-		one listed sh	ove) who	
2	Total number of independent contractor							, m	OSE IISTEG SD	ove, wild	

Par	t VIII	Statement of Rever	nue						
		Check if Schedule O	contains a	a res	ponse or note t				<u> </u>
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
함	1a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b					
s, (	С	Fundraising events .		1c					
ᇍ	d	Related organizations		1d					
ž, Ē	e	Government grants (contributions) 1e		891,183.				a Garana	
rior S	f	All other contributions, gift				100			
		and similar amounts not inclu	ided above	1f	256,460.				
할	g	Noncash contributions include	d in lines 1a-	1f; \$					
	h	Total. Add lines 1a-1f		<u> </u>	<u></u> <b>&gt;</b>	1,147,643.			
Ē		\$ * 5			Business Code			e trip de Cable	
\$	2a	2 L							
Ä	ь	* * * * * * * * * * * * * * * * * * *							
ξç	С								
Se	d					ATT .			
яЩ	е	15			444				
Program Service Revenue	f	All other program servi							
<u> </u>	g	Total. Add lines 2a-2f				0,			
	3	Investment income (in							
	_ ا	and other similar amou				896.	896.		
	4	Income from investment of tax-exempt bo							-
	5	Royalties	(i) Real		(ii) Personal				
	6-	C	(l) Fleat		(ii) i croonar				
	6a	Gross rents						341.4	
	b	Less: rental expenses							
	C	Rental income or (loss)						E ARTOLOGICA E SUBBONI	artiko niko Arabitania eta 1818a
	d 7a	Net rental income or (ic Gross amount from sales of	(i) Securiti	 es	(ii) Other				
	/a	assets other than inventory	() Coount	-	(1) 0 1101	To Fig.			
	ь	Less: cost or other basis				The part of			
	"	and sales expenses				and the second			
	c	Gain or (loss) :			A PROPERTY.				
	ď	Net gain or (loss)							
en ne		Gross income from fun							
_	8a	events (not including \$		<del></del>					
Other Reve		of contributions reported See Part IV, line 18		. a	- ASSAUTE T				
ō		Less: direct expenses							a Marie
		Net income or (loss) fro			events . ►				
	9a	Gross income from gan See Part IV, line 19 .	ning activit						
	h	Less: direct expenses							111, 41, 41, 51
	c	Net income or (loss) from					SANSELE, MARIE POLICE DE LA TRANSPORTE	5 (24) 20 (1925 1836 1836 1836 1836	
		Gross sales of inv							
		returns and allowances							
	ь	Less: cost of goods so	ld						
	c	Net income or (loss) from						37. 207. 207.	
	Ť	Miscellaneous Re			Business Code				
	11a	1							
	ь	,							
	С	2					AMPUTULINIUS.		
	d	All other revenue .				"			
	e	Total. Add lines 11a-1			>				
	12	Total revenue See ins			•	1 1/19 520	200	. 0	n

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	VI other organization	s must complete co	olumn (A).
	Check if Schedule O contains a respon	nse or note to any lir	ne in this Part IX .		<i>.</i>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	43,032.	43,032.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2,500.	2,500.		
3	Grants and other assistance to foreign				All Completes and the
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0.	0.		
4	Benefits paid to or for members	0.	0.		
5	Compensation of current officers, directors,				
	trustees, and key employees	0.	0.	0.,	0.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				_
_	persons described in section 4958(c)(3)(B)	0.1	0.	0.	0.
7	Other salaries and wages	419,534.	263,090.	98,524.	57,920.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
•	4.9	0.	0.	0.	0.
9	Other employee benefits	135,310. 32,058.	90,488. 19,349.	26,539. 7,997.	18,283. 4,712.
10 11	Payroll taxes	32,038.	19,349.	7,997.	4,112.
	Management	0.	0.	0.	0.
a b	Legal	0.	0.	0.	0.
C	Accounting	19,043.	2,157.	16,886.	0.
ď	Lobbying	5,657.	0.	5,657.	0.
e	Professional fundraising services. See Part IV, line 17	0.		-,	0.
f	Investment management fees	0.	0.	0.	0.
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	o.	0.	0.	0.
12	Advertising and promotion	0.	0.	0.,	0.
13	Office expenses	34,559.	16,270.	12,716.	5,573.
14	Information technology	13,473.	6,535.	6,938.	0.
15	Royalties	0.	0.	0.	0.
16	Occupancy	28,875.	15,880.	10,107.	2,888.
17	Travel	27,381.	24,483.	2,612.	286.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.	0.	0.	0.
19	Conferences, conventions, and meetings	17,312.	12,415.	4,897.	0.
20	Interest	0.	0.	0.	. 0.
21	Payments to affiliates	0.	0.	0.	0. 0.
22	Depreciation, depletion, and amortization	1,498. 2,227.	749. 1,224.	749. 780.	223.
23	Insurance	2,221.	1,224.	700.	LLJ.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	DIRECT PROGRAM EXPENSES	150,926.	150,926.	0.	0.
b	DUES & SUBSCRIPTIONS	13,257.	10,857.	1,824.	576.
C					
ď	ž.				
е	All other expenses	22,087.	12,729.	4,651.	4,707.
25	Total functional expenses. Add lines 1 through 24e	968,729.	672,684.	200,877.	95,168.
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2014) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 27,088. 1 19,517. 2 Savings and temporary cash investments . . . . . 1,142,756. 2 1,287,967. 3 625,395. 3 674,704. Accounts receivable, net 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . . . . . . 6 7 7 8 Inventories for sale or use . . . . . . . 9 9 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation . . . . 10b 24,050 3,723. 10c 2,224. b Investments—publicly traded securities . . . . . 11 11 207.009 207,009. 12 12 Investments—other securities. See Part IV, line 11 . . . 13 13 Investments—program-related. See Part IV, line 11. 14 14 2,390. 1,518. Other assets. See Part IV, line 11 . . . . . . 15 15 2,192,939. 2,008,361. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 84,382. 17 73,001. 17 33,870. 21,000. 18 18 19 0. 19 4,721. 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 105,382. 26 111,592. 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Fund Balances complete lines 27 through 29, and lines 33 and 34. 1,292,130. 1,380,241. 27 Unrestricted net assets . . . . . . . . . 27 494,097. 403,840. 28 28 Temporarily restricted net assets . . . . . 207.009. 29 207,009. 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. þ 30 30 Capital stock or trust principal, or current funds . . . . . . Net Assets

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds.

Total liabilities and net assets/fund balances . . .

31

32

33

34

Form 990 (2014)

2,081,347.

2,192,939.

31

32

33

1,902,979.

2,008,361.

1

4

ź

100

ż

.

	*				
Form 9	90 (2014)			Pa	age <b>12</b>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🔲
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,148	8,539.
2	Total expenses (must equal Part IX, column (A), line 25)	2		968	8,729.
3	Revenue less expenses. Subtract line 2 from line 1	3		179	9,810.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,902	2,979.
5	Net unrealized gains (losses) on investments	5			1,442.
6	Donated services and use of facilities	6			0.
7	Investment expenses	7			0.
8	Prior period adjustments	8			0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		2,08	1,347.
Pari	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	·	· · ·		
	Accessed to a contract to the form one of the first one o			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," e	volaio in			
	Schedule O.	храш ш		1.5	
20	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		
24	If "Yes," check a box below to indicate whether the financial statements for the year were con		20		V
	reviewed on a separate basis, consolidated basis, or both:	ipiioa oi			
	Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b		iannensense
-	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted on a			
	separate basis, consolidated basis, or both:				
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	oversight	SHOW ACTION SERVING	SECONOMINA DE PARA	Danner Cool short on
	of the audit, review, or compilation of its financial statements and selection of an independent acco		2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain in			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth in			
	the Single Audit Act and OMB Circular A-133?		3a	✓	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such	audits.	3b	✓_	
			Form	ո 990	(2014)
	<i>!</i> .				
	Å : t				
	<b>₹</b> \$ \$				
	* - 4 के 2 के				
	7 : 1 :				
	* 1				
	* 1				

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name	of the organization					Employer identification	n number	
UTA	HUMANITIES COUNCIL					87-0307076		
Pai	t Reason for Public Cha	rity Status (All	organizations must	t comple	te this p	art.) See instruction	ons.	
The d 1 2 3	organization is not a private foundated and a church, convention of church A school described in section A hospital or a cooperative ho	hes, or associati 170(b)(1)(A)(ii).	on of churches descr (Attach Schedule E.)	ibed in se	ection 17	O(b)(1)(A)(i).		
4	A medical research organization hospital's name, city, and state	e:						
5	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)							
6 7	☐ A federal, state, or local gover ☐ An organization that normally described in section 170(b)(1)	receives a subs (A)(vi). (Complet	tantial part of its sup te Part II.)	port from	٠,	• • • • • •	n the general public	
8	☐ A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)				
9	An organization that normally receipts from activities related support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	certain taxable i	exceptio ncome (1	ns, and (2) no more ess section 511 ta	e than 331/3% of its	
10	☐ An organization organized and			,	•	•		
11	An organization organized and one or more publicly supported the box in lines 11a through 11	operated exclusi d organizations d	vely for the benefit of, escribed in section 5	to perfor 09(a)(1) o	m the fun r section	ctions of, or to carry 509(a)(2). See sect	ion 509(a)(3). Check	
а	☐ Type I. A supporting organization(sorganization. You must com	s) the power to re	egularly appoint or ele					
b	Type II. A supporting organic control or management of the organization(s). You must control or management of the	e supporting org	ganization vested in th					
С	☐ Type III functionally integrated its supported organization(s)						y integrated with,	
d	☐ Type III non-functionally in that is not functionally integr requirement (see instructions	ated. The organi	zation generally must	satisfy a	distributi	on requirement and	_	
е	Check this box if the organiz functionally integrated, or Ty					* * * * * * * * * * * * * * * * * * * *	I, Type III	
f g	Enter the number of supported or Provide the following information	organizations .						
	(i) Name of supported organization			(iv) Is the o	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
	A Section 1		(See mondemons))	Yes	No			
(A)	office of the state of the stat							
(B)	A COLUMN TO STATE OF THE STATE							
(C)	<u> </u>		outstate ver,					
(D)	g 3 6 6							
(E)	1 E							
··	¥ c				100			

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts, grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 1,153,383. 1,110,050. 1,242,188 942,200 1,147,643 5,595,464. revenues levied for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . Total. Add lines 1 through 3. . . . 1.153.383 1,110,050 942,200. 5,595,464. 1,242,188. 1,147,643 The portion of total contributions by each person other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . Public support. Subtract line 5 from line 4. 5,595,464. Section B. Total Support (a) 2010 (d) 2013 Calendar year (or fiscal year beginning in) (c) 2012 (b) 2011 (e) 2014 (f) Total Amounts from line 4 . . . . . . . 1,153,383 1,110,050. 1,242,188. 942,200. 1,147,643 5,595,464. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 4,706 1,966 2,414. 811 896 10,793. Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 5,606,257. 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f) . . . . 99.81 % Public support percentage from 2013 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 16a 331/8% support test - 2014. If the organization did not check the box on line 13, and line 14 is 331/8% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . .  $\overline{\mathbf{V}}$ b 331/8% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 331/8% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 18 Private foundation: If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

# Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						•
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf			1			
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
-	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b					-	
8	Public support (Subtract line 7c from				and the second		
	line 6.)				14 (1994)		
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6				1-1-1-7		7471044
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						-
11	Net income from unrelated business				1		
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.) 👯						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he						▶ 🗌
Secti	on C. Computation of Public Suppor				-100		
15	Public support percentage for 2014 (line						%
16	Public support percentage from 2013 Sci			<u> </u>	<u></u>	16	%
Secti	on D. Computation of Investment In					. , , , , , , , , , , , , , , , , , , ,	
17	Investment income percentage for 2014 (						%
18	Investment income percentage from 2013	3 Schedule A,	Part III, line 17			18	%
19a	331/2% support tests-2014. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests -2013. If the organiz						
	line 18 is not more than 331/2%, check this	-					
20	Private foundation: If the organization di	id not check a	box on line 14	. 19a, or 19b,	check this box	and see instru	ctions 🕨 🗌

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- C Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

i i

		Yes	No
ng by	1		
us ed	2		10
er	 За	9.	
nd he			
(2)	3c		
If	4a		
gn on	4b		
on ed (B)	4c		
s," IN on, on	1		
dy	5a 5b	E S	
to ss so in	5c		
ial ent	7		
7?	8		
ed	9a		
ch	9b		
efit	9c		
B(f) ng	10a		
to		10131	15
			T 0044

And the second second second

	EA ( 0.111 350 0) 350-12, 25,14	rage 🔾
Part	Supporting Organizations (continued)	
		Yes No
11	Has the organization accepted a gift or contribution from any of the following persons?	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
	below, the governing body of a supported organization?	11a
	A family member of a person described in (a) above?	11b
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c
Secti	on B. Type I Supporting Organizations	1.2 1
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	Yes No
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2
Secti	on C. Type II Supporting Organizations	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	Yes No
Secti	on D. All Type III Supporting Organizations	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	Yes No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3
Secti	on E. Type III Functionally-Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instructions):
' a	The organization satisfied the Activities Test. Complete line 2 below.	
b.	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.	
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see instructions).
		40000000
2	Activities Test. Answer (a) and (b) below.	Yes No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b
3	Parent of Supported Organizations. Answer (a) and (b) below.	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5	11000	***************************************
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e <b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	33444	
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		- NATIVE T
Section C - Distributable Amount		and the second of the last	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	CASCAST PROPERTY OF THE SAME	
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	OUT MANAGEM A MESON	
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
<ul> <li>7 Check here if the current year is the organization's first as a non-functionall instructions).</li> </ul>		tegrated Type III supportin	g organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)			
Sect	ion D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish	exempt purposes				
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted			
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	nizations			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive			
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2014 from Section C, line 6					
_10	Line 8 amount divided by Line 9 amount					
	2 Mark 2	(i)	(ii)	(iii)		
Se	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable		
			Pre-2014	Amount for 2014		
1	Distributable amount for 2014 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2014			2.7		
	(reasonable cause required-see instructions)					
_3	Excess distributions carryover, if any, to 2014:					
<u>a</u>			Committee of the Commit			
<u> </u>	Demokrati predstava se se properti propinski propinski se se se se se se					
c	A PARTITOTAL AUGUST ASSAULT TO THE THE STATE OF THE STATE					
<u>d</u>		Control of the second of the s				
e	PRODUCTION OF THE CONTRACT OF					
f	Total of lines 3a through e					
<u> </u>	Applied to underdistributions of prior years	81 20 40 20 E F 10 B				
<u>h</u>	Applied to 2014 distributable amount					
<u>i</u>	Carryover from 2009 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2014 from Section			1000 1100 1100 1100 1100 1100 1100 110		
	D, line 7: \$			and the second of the second o		
a_	Applied to underdistributions of prior years  Applied to 2014 distributable amount					
<u>b</u>	Remainder. Subtract lines 4a and 4b from 4.					
<del></del> _	Remaining underdistributions for years prior to 2014, if					
3	any. Subtract lines 3g and 4a from line 2 (if amount					
	greater than zero, see instructions).					
6	Remaining underdistributions for 2014. Subtract lines 3h					
·	and 4b from line 1 (if amount greater than zero, see					
	instructions).					
7	Excess distributions carryover to 2015. Add lines 3j					
-	and 4c.					
	Breakdown of line 7:					
a		The state of the s				
<u>_</u> b		TO THE SECTION OF THE				
	THE PARTY OF THE PROPERTY OF THE PARTY OF TH			Francisco (Constantino)		
d	Excess from 2013 35					
е	Excess from 2014			Part of the State		
			34140000			

Part VI Supplement Part III, line 1	tal Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and 2. Also complete this part for any additional information. (See instructions.)
	2 *
	: 
	ş : - \} - 4 <u> </u>
	\$ 6 ? \$ <del></del>
••••	
	, ,
	·
	*; 
	3 \$
	* * 
	÷
	} 
	}  <del></del>
	· 
	8. <u>A</u>
	<u></u>
	§
	Á
	\$x=
	<u>;</u>
	, 
	. /

#### Schedule B

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

**Schedule of Contributors** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ 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.

Name of the organization Employer identification number **UTAH HUMANITIES COUNCIL** 87-0307076

Organizatio	rganization type (check one):					
Filers of:	e english	Section:				
Form 990 o	990-EZ	₹ 501(c)( 3 ) (enter number) organization				
	. š.	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990-P	F	501(c)(3) exempt private foundation				
	·	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	<b>#</b> .					
•	a section 501(c)(	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
Generai Ru	ie į					
or	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.				
Special Rul	es					
reg 13,	ulations under s 16a, or 16b, an	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line d that received from any one contributor, during the year, total contributions of the greater of (1) f the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
CO	ntributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, and purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
coi coi dui <b>G</b> e	ntributor, during ntributions totale ring the year for neral Rule appli	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions exclusively for religious, charitable, etc., purposes, but no such an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the ies to this organization because it received nonexclusively religious, charitable, etc., contributions 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).

Name of organization

UTAH HUMANITIES COUNCIL

87-0307076

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	Chicago Community Trust  225 North Michigan Avenue, Suite 2200  Chicago, IL 60601	\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	1	\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				

Employer identification number

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				
	3 2	\$					
(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				
		\$					

### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

**Note.** Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

#### **Purpose of Schedule**

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990, Return of Organization Exempt from Income Tax, Part VIII, Statement of Revenue, line:1;
- Form 990-EZ, Short Form Return of Organization Exempt from Income Tax, Part I, line 1; or
- Form 990-PF, Return of Private Foundation, Part I, line 1.

#### Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it does not meet the filing requirements of this schedule by taking the following action:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2, or
- · Checking the box on
  - Form 990-EZ, line H, or
  - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization is not required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

#### **Accounting Method**

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, *Financial Statements and Reporting*, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

#### Public Inspection

Note. Do not include social security numbers of contributors as this information may be made public.

- Schedule B is open to public inspection for an organization that files Form 990-PF.
- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.
- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors are not required to be made available for public inspection. All other information, including the amount of contributions, the description of noncash contributions, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it should not include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that do not require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the Instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

### Contributors to be Listed on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report governmental units as contributors.

#### Contributions

Contributions reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions do not include fees for the performance of services. See the Instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

#### **General Rule**

Unless the organization is covered by one of the *Special Rules* below, it must list in Part I every contributor who, during the year, gave the organization, directly or indirectly, money, **securities**, or any other type of property that total \$5,000 or more for the organization's tax year. In determining the total amount,

separate and independent gifts of less than \$1,000 can be disregarded.

Include each contribution included on Form 990, Part VIII, line 1, in calculating a contributor's total contributions and determining whether that contributor must be reported on Schedule B under this General Rule (or one of the following Special Rules, if applicable). For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization did not receive the property during the tax year.

### Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A), or Form 990-EZ, line 1. An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990 or 990-EZ), Part II, that it met the 331/3% support test for the current year or prior year, or (2) check the box on Schedule A (Form 990 or 990-EZ), Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(1)(A) (vi) organization in its first five years.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that were not for an exclusively religious, charitable, etc., purpose, list in Part I each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

However, if a section 501(c)(7), (8), or (10) organization did not receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently was not required to complete Parts I through III with respect to these contributions, it need only check the third Special Rules box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

# Specific Instructions



Do not attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II,

and III of Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization does not know the donor's identity. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash contribution came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution

includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an employee's cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization did not receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that are not reported on Form 8872, Political Organization Report of Contributions and Expenditures, do not need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the noncash contribution received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, marked quotations for securities) by listing its fair market value (FMV). If the organization immediately sells securities contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net proceeds plus the broker's fees and expenses. See the Instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property is not immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and

asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any qualified conservation contributions and contributions of conservation easements listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Taxy (S	see separate instructions), t	ileti			
		anizations: Complete Part III.			
Name	of organization			Employer	dentification number
	HUMANITIES COUNCIL				87-0307076
		e organization is exempt un			
1		the organization's direct and ind		•	•
2				<i>.</i> <b>&gt;</b>	\$
3	Volunteer hours			<i></i>	
Dowl	0			. 1(0)	
Part		e organization is exempt un			
1		excise tax incurred by the organ			
2		excise tax incurred by organizati			
3		ed a section 4955 tax, did it file F			
4a					Yes No
b Dow	If "Yes," describe in Part		day andian E01/	-\	04(-)(0)
Part 1		e organization is exempt un ly expended by the filing organ			U1(C)(3).
٠					\$
2		filing organization's funds conti			Φ
2		ivities			¢
3		expenditures. Add lines 1 and			Φ
3		,			œ
		n file Form 1120-POL for this year			**
4	• -	·			
5		ses and employer identification n ents. For each organization listed			
		ontributions received that were p			
		fund or a political action commi			
		I		T	T****
	(a) Name	(b) Address	(c) EIN	(d) Arnount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	
			İ		delivered to a separate political organization. If
					none, enter -0
(1)				Į.	
<b>/5</b> \					
(2)					
/c\					
(3)					
·					
(4)					
/E\					
(5)				\$ 1	
(6)					
(3)					

Par	II-A Complete if the organization section 501(h)).	on is exempt	under section 50	01(c)(3) and filed	d Form 5768 (ele	ection under
A	heck ► ☐ if the filing organization be	elongs to an a	ffiliated group (an	d list in Part IV	each affiliated gro	oup member's
	name, address, EIN, expe					
B (	heck ► ☐ if the filing organization of			rol" provisions a		
	Limits on Lob (The term "expenditures" n	bying Expendit neans amounts		)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	e public opinion	(grass roots lobby	ing)		
b	Total lobbying expenditures to influence	e a legislative b	ody (direct lobbying	3)		
C	, ,					
d						
е	Total exempt purpose expenditures (ac					
f	Lobbying nontaxable amount. Enter columns.	the amount f	rom the following	table in both		
	If the amount on line 1e, column (a) or (b) is	s: The lobbying	nontaxable amount	is:		
	Not over \$500,000	20% of the ar	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess of	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess of	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
g						
h						
i	Subtract line 1f from line 1c. If zero or le					
j	If there is an amount other than zero					☐ Yes ☐ No
	reporting section 4911 tax for this year				· · · · · · · · · · · · · · · · · · ·	
	(Some organizations that made a se See th	ection 501(h) el e separate inst	ructions for lines	e to complete all 2a through 2f.)	of the five colum	ns below.
	Lobbyin	g Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Part	(election under section 501(c)(3) and has NO1	filed	Forn	15/68		
For A	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)		
	ription of the lobbying activity.	Yes	No	Ά	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?			mass/vvises/iDirectory	CM MILES THE	MMMMAPAMAIIIA
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?	✓				5,657
j	Total. Add lines 1c through 1i					5,657
<b>2</b> a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓			
b	If "Yes," enter the amount of any tax incurred under section 4912			t		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), c	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," 0 answered "Yes."	R (b)	Parl	III-A,	line	3, is
1 2	Dues, assessments and similar amounts from members	of	1			
а	Current year	. [	2a			
b	Carryover from last year ,	. [	2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	.	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?	ying	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	.	5			-
Par						
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	); Pai	t II-A, li	nes 1	and
PART	II-B, LINE 1, LOBBYING ACTIVITIES:					
UTAH	HUMANITIES PAID ANNUAL DUES TO THE FEDERATION OF STATE HUMANITIES COUNCILS AND PAID	TO SU	IPPOI	₹T		
THE R	ENEWAL OF A COUNTY-WIDE TAX TO SUPPORT CULTURAL AND RECREATIONAL ACTIVITIES. THESE	EXPE	NSES	ALSO I	NCLU	IDE
TRAVI	EL TO WASHINGTON DC TO VISIT WITH CONGRESSIONAL OFFICES.				;	
	·					

Schedule C (For	hedule C (Form 990 or 990-EZ) 2014 Page 4									
Part IV	Supplemental Information (continued)									
~										
		y								
		January 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
		4*								
	***************************************									

#### SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number **UTAH HUMANITIES COUNCIL** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . . . . 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2b c Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 4 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ Yes ☐ No 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: 

**b** Assets included in Form 990, Part X . . .

Short of sharps and the public party.

Parl	III Organizations Maintaining	Collections of	Art, Historical 7	reasures	, or Ot	her Similar As:	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	her records, chec	k any of th	ne follov	ving that are a si	gnificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchan	ge prog	rams	
b	☐ Scholarly research						
С	☐ Preservation for future generations	3					
4	Provide a description of the organizar XIII.	tion's collections a	ınd explain how t	hey further	the org	janization's exem	pt purpose in Part
5	During the year, did the organization	solicit or receive	donations of art,	historical t	reasure	s, or other simila	r
	assets to be sold to raise funds rather	than to be mainta	ined as part of the	e organizat	ion's co	llection?	☐ Yes ☐ No
Part							
	Complete if the organization	answered "Yes"	' to Form 990, P	art IV, line	9, or	reported an amo	ount on Form
	990, Part X,line 21.						
1a	Is the organization an agent, trustee						
	included on Form 990, Part X?						∐ Yes ∐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the following to	able:	r	1	no.unt
							nount
C.	3				10		
ď	Additions during the year				1d		
e	Distributions during the year				1e		
f	Ending balance				1f	1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
2a	Did the organization include an amoun					-	
	If "Yes," explain the arrangement in P	art XIII. Check here	e if the explanation	n nas been	provide	ed in Part XIII .	<u> L </u>
Par	Endowment Funds.  Complete if the organization	annward "Vas"	to Form 000 B	art IV line	. 10		
	Complete inthe organization	(a) Current year	(b) Prior year	(c) Two year		(d) Three years back	(e) Four years back
4.	Peginning of year balance						
1a	Beginning of year balance	207,009.	207,009.		07,009.	207,009.	207,009.
b	Contributions						
С	losses						
4	Grants or scholarships						
d e	Other expenditures for facilities and						
•	programs						
f	Administrative expenses						
	End of year balance	207,009.	207,009.		07,009.	207,009.	207,009.
g 2	Provide the estimated percentage of t					·	201,003.
a	Board designated or quasi-endowmen			,, 00,011111 (0	,,,		
b		100%					
c	Temporarily restricted endowment ▶	%					
Ū	The percentages in lines 2a, 2b, and 2		0%.				
<b>3</b> a	Are there endowment funds not in the			at are held	and ad	ministered for the	•
	organization by:	•	•				Yes No
	(i) unrelated organizations					<i>.</i>	3a(i) 🗸
	(ii) related organizations						3a(ii) 🗸
b	If "Yes" to 3a(ii), are the related organ			ule R? .			3b
4	Describe in Part XIII the intended uses						
Part	VI Land, Buildings, and Equip	ment.					
	Complete if the organization	answered "Yes"	' to Form 990, P	art IV, line	e 11a. S	See Form 990, F	Part X, line 10.
	Description of property	(a) Cost or oth	1 ' '	or other basis		Accumulated	(d) Book value
	<b>1</b> 1	(investme	ent) (o	ther)	Q.	preciation	
<b>1</b> a	Land	•					
b	Buildings						
С	Leasehold improvements						
d	Equipment			26,274.		24,050.	2,224.
e	Other	-					
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 99	90, Part X, column	n (B), line 1	0c.) .	<u>, ▶  </u>	2,224.

こう でき、

Part VII	Investments—Other Securities.  Complete if the organization answered "Ye	s" to Form	n 990, Part IV, line	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (Including name of security)		(b) Book value	(c) Mel	thod of valuation: i-of-year market value
(1) Financial	derivatives ,				
(2) Closely-h	eld equity interests	[			
(3) Other SE	CURITIES AND OTHER INVESTMENTS		207,009.	COST	
(A)					
(B)					
(C)				*194.001	
(D)	······································			-1-4	
(E)					4444
(F)	<u> </u>		d 100		
(G)				·	
(H)	4.8 3.5 4.5			- Maria de la companya della companya della companya de la companya de la companya della company	
	n) must equal Form 990, Part X, col. (B) line 12.) ▶		207,009.		
Part VIII	Investments—Program Related.	o" to Form	000 Bort IV line	11a Coo Form	000 Port V line 12
	Complete if the organization answered "Ye	s to Form			
	(a) Description of investment		(b) Book value	1.7	thod of valuation: -of-year market value
_(1)	A. Tananananananananananananananananananan				
(2)			ARWIT II	-0.0M-0.00-0.T-0.	11.00
(3)					A.L.A.FPU
_(4)					
_(5)					
_(6)	404			W04-19.	
_(7)					William .
_(8)	÷ ;				
(9)	f ;				
with the same of t	o) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.	-" +- C	000 Dad IV II	. 11 d Caa Farm	OOO Dowl V line 15
-	Complete if the organization answered "Ye	s to Form	1990, Part IV, line	ria. See Forni	(b) Book value
(4)	i (a) Description				(b) Book value
(1)	- Laurence		-MPAT		
(2)		•			
(3)			- ALCONOMIC -	1-2VIMT	
(4)	· · · · · · · · · · · · · · · · · · ·	****			
(6)					
(7)	A .		***************************************		
(8)					
(9)		- In the second	<del>,</del>		
	nn (b) must equal Form 990, Part X, col. (B) line 1	5.)			
Part X	Other Liabilities. Complete if the organization answered "Ye line 25.		1990, Part IV, line	11e or 11f. See	Form 990, Part X,
1.		Book value			
(1) Federal in	come taxes				PROFESSION OF THE PROPERTY.
(2)					
(3)	I N				
(4)	1				
(5)	· · · · · · · · · · · · · · · · · · ·				
(6)	j.				
(7)					
(8)					
(9)					
Total. (Column (l	o) must equal Form 990, Part X, col. (B) line 25.) ▶				
2. Liability for	uncertain tax positions. In Part XIII, provide the text of				
organization's	s liability for uncertain tax positions under FIN 48 (ASC	C 740). Chec	k here if the text of the	ne footnote has bee	en provided in Part XIII

Part		Revenue per Audited Financial anization answered "Yes" to Fol		•	Return.	
1		her support per audited financial sta		mic iza.	1	1,056,840.
		but not on Form 990, Part VIII, line				1,050,040.
	7 .	on investments	1 1	(1.442.)		
		f facilities		(1,442.)		
		nts		0.		
				201,522.		
					Journal of the Control of the Contro	200 000
	<b>-</b> ,				2e 3	200,080. 856,760.
		990, Part VIII, line 12, but not on line				650,760.
	ì	cluded on Form 990, Part VIII, line 7	1 1			
	-		*****	291,779.		
	Add lines 4a and 4b				4c	201 770
		nd <b>4c.</b> (This must equal Form 990, F			5	291,779.
Part		Expenses per Audited Financia				1,148,539.
r air c		anization answered "Yes" to For			a netaii.	
1			im 930, Fait iv,		1	060 730
		but not on Form 990, Part IX, line 25				968,729.
	·	f facilities	1 6			
			<del></del>			
		,				
	•					
					2e	0.
					3	968,729.
		990, Part IX, line 25, but not on line				
		cluded on Form 990, Part VIII, line 7				
	Other (Describe in Part XIII.)		4b			
		,			4c	0.
		and 4c. (This must equal Form 990,	, Part I, line 18.).		5	968,729.
Part >	XIII Supplemental Info	rmation.				
		or Part II, lines 3, 5, and 9; Part III, li				4; Part X, line
2; Part	XI, lines 2d and 4b; and Part	t XII, lines 2d and 4b. Also <b>c</b> omplete	this part to prov	ide any additional in	formation.	
PART X	(), LINE 2d - OTHER					
	l g	***************************************				
RESTR	ICTIONS SATISFIED BY PAYM	IENT			\$201,52	22.
	÷ ;-					
REPRE	SENTS NET ASSETS RELEAS	ED FROM RESTRICTIONS.				
	à.;					
	<b>*</b> ;					
	- T					
DADTY	(I, LINE 4b - OTHER					
LUKILA	NE CINC 40 - OTHER					
TEMBO	DADII V DESTRICTED CONTR	IDUTIONS			\$291,	770
IEMPU	RARILY RESTRICTED CONTR	IBUTIONS			\$251,	113.
DEDDE	CENTS TEMPODADE V DEST	NOTED CONTRIDUTIONS				
KEPKE	SENTS TEMPORARILY RESTR	RICTED CONTRIBUTIONS.				
	£ ,					
	# ·					
	······································					
	b."					
·	5 1					
	* à					
	* ,		·			
	Ŷ T					

Schedule D (For	n 990) 2014	Page 5
Part XIII	Supplemen	Page 5 Ital Information (continued)
	,	
		·
		·
		\(\frac{1}{2}\)
		: } 
		₹. ?
	;	
,		:
		;;; ;; ;;
		·
	5 1	
	÷	;
	-	
	·;	: *
	; :	
	· · · · · · · · · · · · · · · · · · ·	
		,
		:
		,

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number **UTAH HUMANITIES COUNCIL** 87-0307076 FORM 990, PART VI, SECTION B, LINE 11: THE UHC AUDIT AND INVESTMENT COMMITTEE HAS THE OPPORTUNITY TO REVIEW FORM 990 AND REPORTS TO THE FULL BOARD OF DIRECTORS ANY ITEMS THEY RECOMMEND FOR DISCUSSION. FORM 990, PART VI, SECTION B, LINE 12C: UH REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. BOARD MEMBERS SIGN A PLEDGE TO ABIDE BY THE POLICY, AND CONFLICTS ARE IDENTIFIED PRIOR TO EVERY GRANT RÉVIEW SESSION AND ANY INVESTMENT DECISIONS. FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR RECOMMENDS STAFF COMPENSATION AMOUNTS TO THE EXECUTIVE COMMITTEE ANNUALLY, AND PROVIDES COMPARABILITY DATA ANNUALLY FROM THEIR NATIONAL MEMEBERSHIP ASSOCIATION AND, AS AVAILABLE, FROM THE UTAH NONPROFITS ASSOCIATION. THE EXECUTIVE COMMITTEE'S DECISIONS ARE SUMMARIZED IN MEETING MINUTES. FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS AVAILABLE ON WWW.UTAHHUMANITIES.ORG FORM 990, PART 1, LINE 5: 34 THE ORGANIZATION HAS A REGULAR STAFF OF 9 INDIVIDUALS; HOWEVER, W-2s ARE PROVIDED TO ADDITIONAL INDIVIDUALS WHO WORK ON TEMPORARY BASIS AS NEEDED TO SUPPORT THE ACTIVITIES AND PROGRAMS OF THE ORGANIZATION.

Schedule O (Form 990 or 990-EZ)	(2014)		Page 2
Name of the organization		Employer identification number	
	्र		
	<i>(1)</i>		
	;;		*********
	{		
	3		
	4.		
	i;		
	;'		
	;		
;	d .		
	7 9 1		
	4		
	· '		
	, ; ;		
	* P		
	ż		
	<u>;                                    </u>		
	: 		
	i:		
	<u></u>		

#### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

#### Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Do not use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

#### Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization is not required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

#### Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return is not filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. Do not use this schedule to provide the latefiling statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. Do not use this schedule. See the Instructions for Form 990. I. Group Return.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

- 1. Part III, Statement of Program Service Accomplishments.
  - a. "Yes" response to line 2.
  - b. "Yes" response to line 3.
  - Other program services on line 4d.
- Part V, Statements Regarding Other IRS Filings and Tax Compliance.
  - a. "No" response to line 3b.
  - b. "Yes" or "No" response to line 13a.
  - c. "No" response to line 14b.
- Part VI, Governance, Management, and Disclosure.
- a. Material differences in voting rights among members of the governing body in line 1a.
- b. Delegation of governing board's authority to executive committee.
  - c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
  - e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
  - g. "Yes" response to line 12c.
- Description of process for determining compensation in response to lines 15a and 15b.
- If applicable, in response to line 18, an explanation as to why the organization checked the "Other" box or did not make any of Forms 1023, 1024, 990, or 990-T publicly available.
- j. Description of public disclosure of documents in response to line 19.
- Part VII, Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors.
- a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.
- b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).
- 5. Explanation for Part IX, Statement of Functional Expenses, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

- 6. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).
- 7. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line 9.
- 8. Part XII, Financial Statements and Reporting.
- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
  - c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions:

- Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.
- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line
  - Part II, Balance Sheets.
- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.
- Description of other program services in response to Part III, Statement of Program Service Accomplishments, line 31.
  - Part V, Other Information.
  - a. "Yes" response to line 33.
  - b. "Yes" response to line 34.
- c. Explanation of why organization did not report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.

Other, Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this CAUTION schedule will be made available

for public inspection.

# Form 4562

## **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

Department of the Treasury
Internal Revenue Service (99)

Information about Form 4562 and its s

▶Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

20**14** 

Attachment Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number **UTAH HUMANITIES COUNCIL** FORM 990, PAGE 10, LINE 22 87-0307076 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 500,000. 2 Total cost of section 179 property placed in service (see instructions) . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,000,000. 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing (a) Description of property (b) Cost (business use only) 6 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 . . . . . . . . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 15 Property subject to section 168(f)(1) election . 16 Other depreciation (including ACRS) 1,498. Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2014 . . . . . . . . 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Depreciation deduction (a) Classification of property (e) Convention (f) Method placed in (business/investment use period service only-see instructions) 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property SIL g 25-year property 25 yrs. 27.5 yrs. 5/L MM h Residential rental property 27.5 yrs. MM 5/L i Nonresidential real 39 yrs. MM S/L property S/L MM Section C-Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. b 12-year 40 yrs. S/L MM c 40-year Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 . . . 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 1,498. 23 For assets shown above and placed in service during the current year, enter the 

Form	4562 (2014)	(													Page 2
	rt V Listed Proper	ty (Inclu	ide automo	obiles,	certaii	n other	vehic	les, cer	tain ai	rcraft,	certair	n comp	uters,		
	used for enter					•									
	Note: For any										lease	expense	e, comp	olete <b>on</b>	ly 24a
	24b, columns (a													- /- il <b>\</b>	
2/19	Section A—Depre						See tric					idence v			No
		(c)	Justiness/IIIves	stilletit us	Claime	(e)	I rest.	(f)	<u> </u>		3 1110 00		inter:		NO
	(a) (b) of property (list Date place in service	investment	use Cost or o	<b>d)</b> ther basis		for depre ness/inves use only)	stment	Recovery period		(g) ethod/ ivention		(h) preciation eduction	Ele	ected sect cost	
25	25 Special depreciation allowance for quali the tax year and used more than 50% in									25					
26	Property used more t	han 50% i	n a qualifie	d busine	ess use	e:									
			%												
		1	%		_						ļ	·			
	Dranarh was 500/ a	k loss is a	%									<b>v</b> =-			
27	Property used 50% o	riess in a	%	siness	use:				S/L -	_					
		ř l	%				<del></del> +		5/L -		<del>                                     </del>	124	-		
		5 4	%				+		S/L -		<del>                                     </del>		$\neg$		
28	Add amounts in colur	nn (h), line		h 27. E	nter he	re and	on line	21, pag		28			$\dashv$		
29	Add amounts in colur	£3	-										29	Committee of the Commit	econorato consequence
		<b>\$</b> }						e of Vei							
	plete this section for ver ur employees, first answ														ehicles
30	Total business/investment miles driven during the year (do not include commuting miles).		(a) (b) Vehicle 1 Vehicle 2				(c) Vehicle 3 Ve		(d) (e) hicle 4 Vehicle			(f) Vehicle 6			
	Total commuting miles of Total other person miles driven	, driven durin	ng the year												
33	Total miles driven du lines 30 through 32	uring the													
34	Was the vehicle available use during off-duty he	in. i	personal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle used than 5% owner or rela														
36	Is another vehicle availa											1			
	Section  wer these questions to  than 5% owners or re	determine	e if you mee	t an exc	ception									who <b>ar</b>	e not
37		vincer-			rohibit	s all pe	rsonal	use of v	ehicles	s, inclu	ding co	mmutin	g, by	Yes	No
38	Do you maintain a w employees? See the														
39	Do you treat all use o	vehicles	by employe	es as p	ersona	ıl use?									
	Do you provide more use of the vehicles, a	than five	vehicles to	your e	mploye	es, obt	tain info	ormation	from	your e	nploye	es abou	it the		
41	Do you meet the requ Note: If your answer														
Pai	rt VI Amortization														
	(a) Description of costs	Spirite By America 18	(b) Date amortiz begins	ation	Amo	(c) ortizable a	mount	c	(d) ode sect	ion	(e) Amortiz period percen	ation d or	Amortiza	(f) ition for th	nis year
42	Amortization of costs	that begin	ns during vo	our 2014	tax ye	ear (see	instruc	ctions):							

43 Amortization of costs that began before your 2014 tax year . . . . . .

44 Total. Add amounts in column (f). See the instructions for where to report .

agente stander despet

43 44