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## Form **990**

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

2011
Open to Public Inspection

4	A F	or the	2011 calendar year, or tax year beginning and	ending		
E	<b>3</b> cı	heck if	C Name of organization		D Employer identific	ation number
	ap	plicable	UTAH CIVIL RIGHTS & LIBERTIES		' '	
		Addres change	s I			
	Г	Name change			87-04	105876
	一	Instial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		103070
	一	Termin		noonii/suite	E Telephone number	20 0522
	_	Jated ]Amend		·		328-953 <u>2</u>
	=	Jreturn  Applica  tion	City or town, state or country, and ZIP + 4  SALT LAKE CITY, UT 84111		G Gross receipts \$	847,749.
		pendin			H(a) Is this a group ret	
			F Name and address of principal officer BRIAN BARNARD	0411	for affiliates?	Yes X No
-		_	214 EAST 500 SOUTH, SALT LAKE CITY, UT		H(b) Are all affiliates incli	
-			mpt status X 501(c)(3)	or 527		st. (see instructions)
			e: ▶ N/A		H(c) Group exemption	
ļ			organization: X Corporation Trust Association Other	L Year	of formation: 1984 M	State of legal domicile: UT
Į	Ра		Summary			
	စ္က		Briefly describe the organization's mission or most significant activities. MISS			
	Activities & Governance		SERVICES FOR THE PROTECTION OF CIVIL RIG			
	ᇣ	2 (	Check this box 🕨 📖 if the organization discontinued its operations or dispo	sed of more	than 25% of its net ass	sets.
	٥	3 1	Number of voting members of the governing body (Part VI, line 1a)		. 3	4
	8	4 I	Number of independent voting members of the governing body (Part VI, line 1b)		4	4
	es	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
	<u> </u>	6	Total number of volunteers (estimate if necessary)		6	0
	Ę	7 a -	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	^		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
_					Prior Year	Current Year
		8 (	Contributions and grants (Part VIII, line 1h)		70,500.	70,545.
	Revenue		Program service revenue (Part VIII, line 2g)		0.	771,103.
	š		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,655.	6,101.
	<u>۳</u>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	0.	
			Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		72,155.	0.
-						847,749.
			Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	41,119.
			Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
	ë		Professional fundraising fees (Part IX, column (A), line 11e)		4,447.	0.
2012	꼾			12.		
$\lesssim$	_		Other expenses (Part IX, column (A), lines 11a 11d, 11f 24e)	·  -	25,048.	172,743.
ඥා		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	, —	29,495.	<u>213,862.</u>
CFT.	- (0	19	Revenue less expenses Subtract line 18 from line 12	<u>.</u>	42,660.	<u>633,887.</u>
AUG	Net Assets or Fund Balances		18   AUG 1 3 2012   C	Ве	ginning of Current Year	End of Year
AL.	Set	20	Total assets (Part X, line 16)	ļ	146,039.	779,926.
67	3 <u>4</u>	21	Total liabilities (Part X, line 26)		0.	0.
<u> </u>	뿔		Net assets or fund balances Subtract line 21 from line 20		146,039.	779,926.
ANNED	Pa	rt II	Signature Block			
Ą, I	Unde	er pena	ties of perjury, I declare that I have examined this return, including accompanying scheduli	es and statem	ents, and to the best of my	knowledge and belief, it is
က္တ <sub>်</sub>	rue,	correc	t, and complete. Declaration <del>of preg</del> arer (other than officer) is based on all information of w	hich preparer		
U <sub>e</sub> 9			To Miles		8-9-16	2
:	Sigr	1	Signature of officers		Date	
[	Here	В	BRIAN BARNARD, EXECUTIVE DIRECTOR			
			Type or print name and title		···	
_			Print/Type preparer's name Preparer's signature	] [	Date Check	PTIN
ı	Paid		DAVID SPERRY Danger Open	~ CPA	8-7-12 If self-employed	P00176382
		arer	Firm's name TANNER LLC	<b>3</b> ' '	Firm's EIN	20-2253063
		Only	Firm's address 36 S STATE STREET, SUITE 600		THUI S LIN	20 2233003
•			SALT LAKE CITY, UT 84111		Phone no. 80	1-532-7444
-	May	the IC	IS discuss this return with the preparer shown above? (see instructions)	-		X Yes No
	· · uy	- IO II	e diocess uno retain mun ure preparer snown abover (see instructions)			LALITES LINO

	990 (2011) FOUNDATION, INC. 87-0405876 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission.
	TO PROVIDE LEGAL SERVICES FOR THE PROTECTION OF CIVIL RIGHTS AND
	LIBERTIES.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$
	UTAH CIVIL RIGHTS & LIBERTIES FOUNDATION, INC. IS A NON-PROFIT ENTITY
	DEDICATED TO WORKING THROUGH THE COURTS, LAW SCHOOLS, LEGISLATURE AND
	COMMUNITY TO ASSERT, DEFEND AND PRESERVE INDIVIDUAL BASIC AND CIVIL
	RIGHTS AND LIBERTIES GUARANTEED TO ALL PEOPLE BY THE FEDERAL AND UTAH
	STATE CONSTITUTIONS.
	UCR&LF PROVIDES ASSISTANCE TO INDIGENT INDIVIDUALS AND NON-PROFIT
	ORGANIZATIONS WITH REGARD TO CIVIL RIGHTS CLAIMS AND ISSUES.
	UCR&LF ANNUALLY RECEIVES HUNDREDS OF REQUESTS FOR ASSISTANCE AND
	SCREENS CASES ACCORDING TO THE NATURE OF THE CIVIL RIGHTS AND LIBERTIES
	VIOLATION, THE POTENTIAL SIGNIFICANT, BROAD OR SYSTEMATIC IMPACT,
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services (Describe in Schedule O.)
-74	
	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program continuo expenses \$ 212, 350
<u>4e</u>	Total program service expenses ► 212,350.
13200	Form <b>990</b> (2011

Form 990 (2011) FOUNDATION, INC.

Part IV 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)?		163	140_
•	If "Yes," complete Schedule A	1	X	į
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-3-		
4	during the tax year? If "Yes," complete Schedule C, Part II			х
_		4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		•
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		,	v
_	Schedule D, Part III	8		<u>X</u> _
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			7.7
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u>X</u> _
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	ا ء۔ ا		v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,	ا	37	1
	Part VI	11a	X	<del> </del>
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		_X_
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		X_
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	<u>11d</u>		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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	<u> </u>	X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	_16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17		X
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		X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		Ì	
	complete Schedule G, Part III	19		X
20a	, , ,	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (	(2011)

Form 990 (2011) FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_ X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		,	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
04-	Schedule J	23		X
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 25			v
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
Ŭ	any tax-exempt bonds?	04-		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<b>24</b> u		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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		<u> X</u>
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	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	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			v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes, " complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
-	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	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		<u> X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			7.
27	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37		<u>X</u>
~	Note. All Form 990 filers are required to complete Schedule O	38	х	
	The state of the s		990 (2	2011)
			/•	• • /

## Form 990 (2011) FOUNDATION, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 2			
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 reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," 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			İ
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	If "Yes," enter the name of the foreign country:			
<b>-</b>	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		37
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
c 6a	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		
va	any contributions that were not tax deductible?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua		-21
-	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?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	8		<del></del>
a	Did the organization make any taxable distributions under section 4966?	00		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		<del> </del>
10	Section 501(c)(7) organizations. Enter:	30		<b></b>
а	Initiation fees and capital contributions included on Part VIII, line 12			
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)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
	Note. See the instructions for additional information the organization must report on Schedule O			
b	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  Enter the amount of receives an head			1
14a	Enter the amount of reserves on hand  Did the organization receive any payments for indeer tapping convices during the tay year?	44-		-
14a h	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		X
U	in 100, has it lied a form 720 to report these payments in 190, provide an explanation in Schedule O	14b	000	(0011)

Form 990 (2011)

FOUNDATION, INC.

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Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X		
Sec	tion A. Governing Body and Management			,		
			Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year 4					
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4					
2	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		X		
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		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		_X_		
6	Did the organization have members or stockholders?	6		_X_		
7a	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?	7a		_X_		
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		X		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
а	The governing body?	_8a	X			
b	Each committee with authority to act on behalf of the governing body?	_8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)					
			Yes	No		
	Did the organization have local chapters, branches, or affiliates?	10a		X		
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?					
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	X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe					
	in Schedule O how this was done	12c	X			
13	Did the organization have a written whistleblower policy?	_13	X			
14	Did the organization have a written document retention and destruction policy?	14	X			
15	Did the process for determining compensation of the following persons include a review and approval by independent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official	15a		X		
D	Other officers or key employees of the organization	15b		X		
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
loa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			7,5		
L	taxable entity during the year?	16a		X		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's					
500	exempt status with respect to such arrangements? tion C. Disclosure	16b		<u> </u>		
17	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an experience to make the Forms 1000 (or 1004 for the black) 000 and 000 T (Section 504(a)(a) a) and 000 T (Section 504(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(	1.1				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at for public inspection, indicate how you made those excellent. Check all that applic	ivaliab	ie			
	for public inspection. Indicate how you made these available. Check all that apply  Own website					
10		J.E.	•			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	u tinan	cial			
20	statements available to the public during the tax year					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization BRIAN M. BARNARD - 801-328-9531	uon 📂	_			
	214 EAST 500 SOUTH, SALT LAKE CITY, UTAH 84111					
13200 01-23-	6	Form	99n /	2011)		

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

Check if Schedule O contains a response to any question 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

X Check this box if neither the organization						ısat				
(A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average	(do	(do not check mor			nore than one		Reportable	Reportable	Estimated
	hours per	box	, unle: cer an	ss pei	rson recto	ıs bot or/trus	han tee)	compensation	compensation	amount of
	week	-	$\overline{}$		1	T	l	from	from related	other
	(describe	rect				1		the	organizations	compensation
	hours for related	0.0	e e			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	uste	trus		8	E	l	(VV-2/1099-WIISC)	in .	organization and related
	in Schedule	ta la	jona		e e	2 a	١.			organizations
	O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			organizations
(1) KRISTA STOKER						T				
DIRECTOR	5.00		ļ	_				0.	0.	0
(2) ANGIE BENSON								_	_	_
DIRECTOR	0.00	<u> </u>	<u> </u>			<u> </u>		0.	0.	0
(3) HEATHER JOOSTEN	0.00									
DIRECTOR	0.00	_	┢			⊢		0.	0.	0
(4) BARBARA TOOMER	0.00							0.	0.	0
DIRECTOR	- 0.00		┢	-			<del>                                     </del>		<u></u>	0
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		<u> </u>	_	1			<u> </u>			

Par	VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)				
	(A) Name and title	(B) Average hours per week	(C) Position				than (	one n an	( <b>D)</b> Reportable compensation	(E) Reportable compensation		(F) Estimated amount of		
		(describe hours for related organizations in Schedule O)	tee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	ns compens		ation ne tion ted	
										:				
	· · · · · · · · · · · · · · · · · · ·									-				
******					_									
											-			
	Sub-total	<u></u>					Ļ		0.		0.		0.	
	Total from continuation sheets to Part V	II, Section A							0.		0.		0.	
d 2	Total (add lines 1b and 1c) Total number of individuals (including but i	not limited to th	nose	liste	ed al	bove	e) wt	no re	0. eceived more than \$100	~	0.		0.	
	compensation from the organization	-											0	
3	Did the organization list any former officer	, director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on	Γ	Yes	No	
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the s			ompe	ensa	ation	n and	l otl	her compensation from	the organization	-	3	X	
	and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Ji	for such individual	-		4	х	
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," con							elat	ed organization or indiv	dual for services		5	x	
Sec 1	tion B. Independent Contractors  Complete this table for your five highest co	mnensated in		nde	nt c	onti	racto	re t	that received more than	\$100 000 of com	Anes	ation from		
	the organization. Report compensation for								the organization's tax		701136			
	(A) Name and business								( <b>B</b> ) Description of s	ervices	Co	(C) ompensation	on	
	AH LEGAL CLINIC, 214 E IT LAKE CITY, UT 84111	AST 500	S	נטכ	CH.	,			LEGAL SERVIC	ES		145,5	500.	
									·					
2	Total number of independent contractors (		ot li	mite	d to		_	stec	d above) who received in	ore than				
	\$100,000 of compensation from the organ	ization >					1					-arm 000	(0014)	

FOUNDATION, INC.

					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ts	1 a	Federated campaigns	1a					
E 5	b	Membership dues	1b					
Am Am	С	Fundraising events	1c					
트	d	Related organizations	1d			}		
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contribut	tions) 1e					
er S	f	All other contributions, gifts, gran	its, and					
년 동		similar amounts not included abo	ve 1f	70,545.				
10 E		Noncash contributions included in lines	s 1a-1f \$					
<u>0 g</u>	<u>h</u>	Total. Add lines 1a-1f		<u> </u>	70,545.			
				Business Code				
Program Service Revenue				541100	771,103.	771,103.		
le Si	b							
Ye 3	C				<del></del>			
Pag-	d		<del></del>					
품	e f	All other program service reve	anue.					
		Total. Add lines 2a-2f	771,103.					
$\neg$	3	Investment income (including	dividends, inter	est. and	77171034			
		other similar amounts)	, , , , , , , , , , , , , , , , , , , ,	<b>&gt;</b>	6,101.			6,101.
	4	Income from investment of ta	x-exempt bond p	oroceeds -				3/2321
	5	Royalties		<b></b>				
			(ı) Real	(ii) Personal				
1	6 а	Gross rents				İ		
	b	Less: rental expenses						
	С	` · ·						
		Net rental income or (loss)	* **	<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis				1		
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)	on accorde (not	<b>•</b>				
J.	ва	Gross income from fundraisin including \$	= -					
Other Revenue		contributions reported on line						
Æ.		Part IV, line 18	a (10). Oce					
‡	b	Less direct expenses	b					
0		Net income or (loss) from fund	_	<b>•</b>				
		Gross income from gaming ad	-					
		Part IV, line 19	а	<u> </u>				
	b	Less direct expenses	. <b>b</b>					
	С	Net income or (loss) from garr	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less: cost of goods sold	b					
Ļ	С.	Net income or (loss) from sale	es of inventory	<u>_</u>				
		Miscellaneous Revenu	16	Business Code				
	11 a							
Ì	b			ļ				
	C	All other revenue		<del></del>				
	d	All other revenue  Total. Add lines 11a-11d		-				
	е 12	Total revenue. See instructions.			847,749.	771,103.	0.	6,101.
132009 01-23-		. J. Lat. 1919 Had. Goo mon detions.			<u> </u>	1 1111000	<u> </u>	Form <b>990</b> (2011)

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a responsion include amounts reported on lines 6b, 8b, 9b, 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 governments and		САРСПЭСЭ	general expenses	expenses
	organizations in the United States. See Part IV, line 21	41,119.	41,119.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				-
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees			·	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)		<u>-</u>		
7	Other salaries and wages				
8	Pension plan accruais and contributions (include				
9	section 401(k) and section 403(b) employer contributions)  Other employee benefits				
9 10	Payroll taxes	-			
10	Fees for services (non-employees)	-			
'' a	Management				
b	Legal	151,224.	149,712.		1,512
c	Accounting	131,221.	147,7126		1,514
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	<del></del> \			
f	Investment management fees		-		
g	Other				
12	Advertising and promotion				
13	Office expenses	2,498.	2,498.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	341.	341.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				<del></del> .
23	Insurance				
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 0.)				
а		12,752.	12,752.		
b	BOOKS AND PUBLICATIONS	3,477.	3,477.		
С	REPAIRS	1,035.	1,035.		
d	COURT FEES	710.	710.		
е	All other expenses	706.	706.		
25	Total functional expenses. Add lines 1 through 24e	213,862.	212,350.	0.	1,512
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined		İ		
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				Form <b>990</b> (201

Form 990 (2011)

87-0405876 Page 11

			(A) Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing		140,988.	1	462,942.
2	Savings and temporary cash investments	<u> </u>	5,051.	2	316,984.
3	Pledges and grants receivable, net		3,031.	3	310/304
4	Accounts receivable, net	<u> </u>	·	4	
5	Receivables from current and former officers, directors, tru	istaas kav		-	
3	employees, and highest compensated employees. Complete	- I			
	of Schedule L	ste rait ii		5	
6	Receivables from other disqualified persons (as defined ur 4958(f)(1)), persons described in section 4958(c)(3)(B), and				
	******	•			
	employers and sponsoring organizations of section 501(c)	(9) Voluntary			
	employees' beneficiary organizations (see instructions)	-		6	
7	Notes and loans receivable, net	<del> </del>		7	
' I .	Inventories for sale or use	-		8	··· /··
9	Prepaid expenses and deferred charges	-		9	
10a	Land, buildings, and equipment: cost or other	20 205			
	basis. Complete Part VI of Schedule D	30,305. 30,305.	0		0
1	Less accumulated depreciation 10b		0.	10c	0
11	Investments - publicly traded securities	-		11	
12	Investments - other securities See Part IV, line 11			12	
13	Investments - program-related See Part IV, line 11	-		13	
14	Intangible assets	-		14	
15	Other assets See Part IV, line 11	-	146 030	15	770 006
16	Total assets. Add lines 1 through 15 (must equal line 34)		146,039.	16	779,926
17	Accounts payable and accrued expenses	-		17	·
18	Grants payable	-		18	
19	Deferred revenue	-		19	
20	Tax-exempt bond liabilities	,, ,, <u>,</u>		20	
21 22	Escrow or custodial account liability. Complete Part IV of S			21	
22	Payables to current and former officers, directors, trustees				
	highest compensated employees, and disqualified person	s Complete Part II			
	of Schedule L			22	<del></del>
23	Secured mortgages and notes payable to unrelated third			23	<del></del>
24	Unsecured notes and loans payable to unrelated third par	<u> </u>	<del></del> -	24	·
25	Other liabilities (including federal income tax, payables to				
	parties, and other liabilities not included on lines 17-24) C	omplete Part X of			
	Schedule D	-	0	25	
26	Total liabilities. Add lines 17 through 25		0.	26	0
	Organizations that follow SFAS 117, check here	and complete			
3	lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets	-		27	*****
28	Temporarily restricted net assets	-		28	
29	Permanently restricted net assets	<del></del>	29		
<u> </u>	Organizations that do not follow SFAS 117, check here	x ► X and			
5	complete lines 30 through 34.		^		^
30	Capital stock or trust principal, or current funds	<u> </u>	0.	30	0
31	Paid-in or capital surplus, or land, building, or equipment f		146 030	31	770 026
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or o	otner funds	146,039.	32	779,926
33	Total net assets or fund balances	<u> </u>	146,039.		779,926
34_	Total liabilities and net assets/fund balances		146,039.	34	779,926 Form <b>990</b> (2011

	1990 (2011) FOUNDATION, INC.	<u>87-040</u>	5876	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	847	7,7	49.
2	Total expenses (must equal Part IX, column (A), line 25)	2	213	62.	
3	Revenue less expenses. Subtract line 2 from line 1	3	633	3,8	87.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	146	5,0	39.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
_6_	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	779	9,9	26.
Pa	rt XII Financial Statements and Reporting	-			
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	1 1		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a	-	1	
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			1
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(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. ➤ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of t	he organizati	on UTAH CI	VIL RIGHTS &	LIBE	RTIES			E	mployer ic	dentificati	on nur	mber
- · · ·		FOUNDAT	ION, INC.						87	<u>-0405</u>	<u>876</u>	
Part I			ity Status (All organiz					ructions.				
The organia    1	A church, co	nvention of churches cribed in <b>section 17</b>	because it is: (For lines 1 s, or association of churc O(b)(1)(A)(ii). (Attach Sc tal service organization o	ches desc hedule E )	rıbed ın <b>se</b>	ection 170	(b)(1)(A)(i)	<b>.</b>				
4 🗀		search organization o	operated in conjunction					(b)(1)(A)(i	ii). Enter th	e hospital	's nam	e,
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 L 7 X	, , , , , , , , , , , , , , , , , , , ,											
8   9	A community		ection 170(b)(1)(A)(vi). ( eives: (1) more than 33 1			rom contri	butions m	nembersh	in fees, and	d aross rec	ceints :	from
—	activities relations and use section	ted to its exempt fur unrelated business to 509(a)(2). (Complete	nctions - subject to certa axable income (less sect e Part III )	ain excepti tion 511 ta	ons, and (aux) from bu	2) no more sinesses a	than 33 1 acquired b	/3% of its y the orga	s support fi	rom gross	ınvest	ment
11	An organization more publicly	on organized and op supported organiza	perated exclusively to test perated exclusively for the ations described in section organization and compli	ne benefit on 509(a)(1	of, to perfo 1) or section	orm the fur on 509(a)(2	nctions of,	or to carr				or
e 🗀	a Type	b this box, I certify that	<b>¬</b> -	controlled	e III - Fund I directly o	tionally int r indirectly	by one o		qualified p		er tha	n
f	If the organiz		ten determination from t						J(a)(1) 01 3	50tion 505	(a)(2).	
g	(i) A perso	n who directly or ind	organization accepted ar lirectly controls, either al			-					Yes	No
	-		upported organization?							11g(i)		
		•	n described in (i) above? . person described in (i) c		-0					11g(ii)	$\vdash$	
h		•	about the supported org	` '						11g(iii)		
(i) Name of supported (ii) EIN organization			Uludiikaliuli in ool (i) lieted in your organization in ool 1010				(i) organizati U.S	(vi) Is the organization in col. i) organized in the U.S.?			f	
			(see instructions))	Yes	No	Yes	No	Yes	No		_	
											<u> </u>	
				_								
					_							
Total	Pananyork Pa	duction Act Notice	, see the Instructions fo			_		Cabad	le A (Form			
v. I	-pu 116		,	··				JULIEUU	- ~ (ruill	220 OL 23	U-LL	20 I I

132021 01-24-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011 FOUNDATION, INC. 87-0405876 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	80,417.	81,217.	71,366.	70,500.	70,545.	374,045.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	80,417.	81,217.	71,366.	70,500.	70,545.	374,045.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the		Ì				
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4						374,045.
	ction B. Total Support	·					
	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
-	Amounts from line 4	80,417.	81,217.	71,366.	70,500.	70,545.	374,045.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	4 560	0 405	4 225	4 655	- 101	10 0==
	and income from similar sources	1,768.	2,426.	1,307.	1,655.	6,101.	13,257.
9	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 IV.)						307 303
	Total support. Add lines 7 through 10					40	387,302.
	Gross receipts from related activities,	·	,	d fourth or fifth to	 	12 F01(a)(2)	
ış	First five years. If the Form 990 is for organization, check this box and stop	_	s inst, second, trint	a, iourin, or illin ia	ix year as a section	1501(0)(3)	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2011 (I			olumn (f))	<u> </u>	14	96.58 %
	Public support percentage from 2010	• • • • • • • • • • • • • • • • • • • •	•	(-,,,		15	97.03 %
16a	33 1/3% support test - 2011. If the	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m		
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright x$
b	33 1/3% support test - 2010. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ition			
17a	10% -facts-and-circumstances tes	t - 2011, if the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Par	t IV how the orgar	nization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a p	oublicly supported	organization		
b	10% -facts-and-circumstances tes	<b>t - 2010.</b> If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	eck this box and	stop here. Explain	in Part IV how the	e
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported orga	inization	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s 🕨
					Sche	dule A (Form 990	or 990-EZ) 2011

#### 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 b	elow, please com	plete Part II )				
Section A. Public Support			_	· · · · · ·		1
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
ınclude any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		1				
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
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 line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	1-7		(-,	<b>(</b>	127	1
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</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 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 IV)  13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is fo	r the organization	's first, second, thu	rd, fourth, or fifth t	ax vear as a sectio	n 501(c)(3) organ	ization.
check this box and stop here	<del>J</del>	,,	,	, 25 2 555110	\(-)\(-) \(\text{0.8}\(\text{ar}\)	<b>▶</b> □
Section C. Computation of Publ	ic Support Pe	ercentage				
15 Public support percentage for 2011 (			column (fl)		15	%
16 Public support percentage from 2010			30.0 (1,)		16	%
Section D. Computation of Inve						
17 Investment income percentage for 20					17	%
18 Investment income percentage from			no ro, column (I))		18	<u>%</u>
19a 33 1/3% support tests - 2011. If the			on line 14 and lin	a 15 is more than 9		
more than 33 1/3%, check this box a	-		*			. 17 IS HUL
b 33 1/3% support tests - 2010. If the	•	•	· · · · · · · · · · · · · · · · · · ·	-		and .
line 18 is not more than 33 1/3%, che	•					
20 Private foundation. If the organization		•	•		•	
zo riivate iounuation, ii tile organizatio	an ala not crieck a	2 DUN DIT IIII 14, 19	a, or 130, check t	ins box and see Ins	STI UCTIONS	

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **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. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

UTAH CIVIL RIGHTS & LIBERTIES

Employer identification number 87 – 0405876

FOUNDATION, INC. 87-0405876 Part I 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 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 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? 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 conferring impermissible private benefit? 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 an historically important land area. Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) C d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year 🕨 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 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 and section 170(h)(4)(B)(ii)? In Part XIV, 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 XIV, 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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. a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 FOUNDA'I'			:					Page 2
Par									
3	Using the organization's acquisition, accession	on, and other record	s, check any c	f the following tha	it are a s	ıgnıficant ı	use of its	collection	rtems
	(check all that apply):								
а	Public exhibition	d	Loan c	r exchange progra	ams				
b	Scholarly research	е	U Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	n how they fur	ther the organizati	on's exe	mpt purpo	ose in Par	t XIV.	
5	During the year, did the organization solicit or				er sımıla	r assets	_	_	
	to be sold to raise funds rather than to be ma							Yes	No_
Par	t IV Escrow and Custodial Arrang		ete if the organ	ization answered	"Yes" to	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Par								
та	Is the organization an agent, trustee, custodia	an or other intermed	liary for contrit	outions or other as	ssets not	included		٦.,	<b>г</b>
	on Form 990, Part X?							<b>」Yes</b>	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the to	llowing table:			[			
	Danisa da Labara					<del>                                      </del>	-	Amount	
	Beginning balance					1c			
a	Additions during the year		•			1d			
e	Distributions during the year					1e			
7-	Ending balance	orm 000 Bart V line	010			1f		7	
	Did the organization include an amount on For If "Yes," explain the arrangement in Part XIV	orm 990, Part A, line	219				L	_ Yes	L No
Par		the organization an	swered "Ves"	to Form 990 Part	IV line 1	10	•		
	The state of the s	(a) Current year	(b) Prior ye			(d) Three y	voare back	(a) Four	years back
10	Beginning of year balance	(a) Ourient year	(b) Filor ye	ai (C) IWO yea	13 Dack	(a) Tillee y	Cais Dack	(e) Tour	years back
1a	Contributions							<del> </del>	
0	Net investment earnings, gains, and losses					<del></del>			
d	Grants or scholarships					<del></del>			
	Other expenditures for facilities					<del></del>			
-	and programs								
•	Administrative expenses					<del></del>		<del>                                     </del>	<del></del>
g	End of year balance					<del></del>		<del>                                     </del>	<del></del>
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1a, coli	ımn (a)) held as		<del></del>			
	Board designated or quasi-endowment		%	(4)) 11014 45					
	Permanent endowment	%							
	Temporarily restricted endowment	%							
·	The percentages in lines 2a, 2b, and 2c shou								
За	Are there endowment funds not in the posse	•	ation that are h	neld and administe	ered for t	he organiz	zation		
-	by.					organia			Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R	7				3b	
4	Describe in Part XIV the intended uses of the								<del></del>
Pai	t VI Land, Buildings, and Equipm			0					
	Description of property	(a) Cost or o	ther (b)	Cost or other	(c) A	ccumulate	ed	(d) Book	value
		basis (investr	, , ,	oasis (other)	de	preciation	<u> </u>		
1a	Land								
b	Buildings								
c	Leasehold improvements								
d	Equipment .			30,305.		30,3	05.		0.
е	Other								
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B),	line 10(c).)					0.

Schedule D (Form 990) 2011

(a) Description of liability
(b) Book value
(1) Federal income taxes
(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)
(10)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 150.000 (B) 10.0000 (B) 1

132053 01-23-12

Sche	dule D (Form 990) 2011 FOUNDATION, INC.	TEO			87-	0405876	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to	Audite	ed Financ	ial S	tatemen	<u>0                                    </u>	raye <del>v</del>
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			
2	Total expenses (Form 990, Part IX, column (A), line 25)		Ī	2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			
4	Net unrealized gains (losses) on investments			4			
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)			8			
9	Total adjustments (net). Add lines 4 through 8			9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 ar			10			
Pai	t XII   Reconciliation of Revenue per Audited Financial Stateme	ents Wi	th Reven	ue p	er Returr	<u> </u>	
1	Total revenue, gains, and other support per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1					
a	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b				!	
C	Recoveries of prior year grants	2c	<del></del>				
d	Other (Describe in Part XIV.)	2d		-			
е 3	Add lines 2a through 2d Subtract line 2e from line 1				2e		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				3		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
c	Add lines 4a and 4b	40			4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	-	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	nents W	/ith Exper	ises	per Retu	ırn	
1	Total expenses and losses per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	2a				i	
b	Prior year adjustments	2b					
c	Other losses	2c					
d	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
c	Add lines 4a and 4b				4c		
Da	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIV Supplemental Information	-		-	5		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part le 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com						4, Part

Schedule D (Form 990) 2011

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public Inspection

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. **Employer identification number** ž 87-0405876 SDUCATION/SCHOLARSHIP (h) Purpose of grant SDUCATION/LITIGATION or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government (c) IRC section if applicable cash grant assistance assistance or government (c) IRC section (d) Amount of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of received more than \$5,000. Part II can be duplicated if additional space is n Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection o o. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 5,600 25,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LIBERTIES 501(C)(3) Enter total number of other organizations listed in the line 1 table لاي UTAH CIVIL RIGHTS 87-0534394 87-6000525 General Information on Grants and Assistance criteria used to award the grants or assistance? FOUNDATION, 1 (a) Name and address of organization UNIVERSITY OF UTAH S.J. QUINNEY UTAH NATIVE AMERICAN LEGAL Name of the organization COLLEGE OF LAW FOUNDATION Part I Part II

Schedule I (Form 990) (2011)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

87-0405876

FOUNDATION, INC.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2011) Part III

cash grant cash assistance (book, FMV, appraisal, other) (1) Description of non-cash assistance (book, FMV, appraisal, other)			Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	TO UTAH NATIVE AMERICAN LEGAL	PURPOSE OF SUPPORTING ITS WORK IN	IL RIGHTS AND CIVIL LIBERTIES ISSUES	~		
(b) Number of recipients			de the informati			IL	тан. Рі	တ	
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provid	SCHEDULE I, PART I, LINE 2: DONATIONS	FOUNDATION (501(C)(3)) WERE MADE FOR THE	LITIGATION AND EDUCATION REGARDING CIV	ON BEHALF OF NATIVE AMERICANS IN UTAH.	AS TO THE STATUS OF THE FUNDED PROJECTS	

QUINNEY COLLEGE OF LAW, UNIVERSITY OF UTAH WERE MADE DONATIONS TO THE S.J. P FOR THE PURPOSE OF ESTABLISHING A SCHOLARSHIP TO ENCOURAGE LAW STUDENTS

PURSUE EDUCATION IN THE AREA OF CIVIL RIGHTS LAW AND FIRST AMENDMENT

132102 01-27-12

Schedule I (Form 990) 2011 FOUNDATION, INC.	87-0405876 Page 2
Schedule I (Form 990) 2011 FOUNDATION, INC.  Part IV Supplemental Information	
ISSUES. ACTUAL AWARDS OF THAT SCHOLARSHIP TO STUDENTS AR	E MADE BY THE
COLLEGE OF LAW. ANNUAL REPORTS ARE MADE BY THE COLLEGE O	F LAW AS TO THE
STATUS OF THE SCHOLARSHIP, AWARDS AND THE USE OF THE FUND	
	·
	· · · · · · · · · · · · · · · · · · ·
	<del></del>

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

## Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

			٠.
Name of	the	organizatio	n

UTAH CIVIL RIGHTS & LIBERTIES FOUNDATION, INC.

Employer identification number 87-0405876

FOUNDATION, INC.	87-0405876
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISH	MENTS:
WHETHER THE PRIVATE BAR IS PURSUING THE ISSUES AT ALL O	R ADEQUATELY,
ETC.	
UCR&LF WILL PURSUE MATTERS THROUGH ADVOCACY INCLUDING L	ITIGATION,
ESPECIALLY IN THE AREAS OF INDIGENT RIGHTS, RACIAL JUST	ICE, PRIVACY AND
TECHNOLOGY, FIRST AMENDMENT, SEPARATION OF CHURCH AND S	TATE,
PARTICIPATORY DEMOCRACY, PRISONER RIGHTS, ETC.	
UCR&LF ENGAGES IN PUBLIC EDUCATION INFORMING THE PUBLIC	, ESPECIALLY
THROUGH THE NEWS MEDIA AND PARTICIPATION IN SEMINARS AN	D PRESENTATIONS,
AS TO CONSTITUTIONAL RIGHTS.	
UCR&LF OPERATES A PRISON PROJECT WHICH PROVIDES LEGAL A	DVICE TO INMATES
AND PRISONERS INCARCERATED AT UTAH STATE CORRECTIONAL F	ACILITIES AND
COUNTY JAILS THROUGH THE STATE.	
FORM 990, PART VI, SECTION B, LINE 11: AFTER PREPARATIO	N AND BEFORE FILING
A COPY OF THIS FORM 990, IT WAS PROVIDED TO MEMBERS OF	THE BOARD OF
DIRECTORS FOR THEIR REVIEW.	
FORM 990, PART VI, SECTION B, LINE 12C: THE WRITTEN CON	FLICT OF INTEREST
POLICY OF THE ORGANIZATION IS REVIEWED AT THE FIRST BOA	RD OF DIRECTORS
MEETING EACH YEAR. EACH YEAR MEMBERS OF THE BOARD DISC	LOSE ANY CONFLICTS
AND SIGN A WRITTEN DISCLOSURE FORM WHICH ALSO ACKNOWLED	GES REVIEW OF THE
DOLLON	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

27

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#### Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

OMB No. 1545-1709

 $\triangleright [X]$ 

Form 8868 (Rev 1-2012)

Do not	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previousi	y tilea Fo	rm 8868.	
Electro	nic filing (e-file). You can electronically file Form 8868 if y	you need a	3-month automatic extension of tim	e to file (6	6 months for a c	orporation
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	ion of time. You can electronically fil	e Form 8	868 to request a	n extension
of time t	o file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for T	ransfers /	Associated With	Certain
Persona	I Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	n the elec	ctronic filing of th	ns form,
visit ww	w irs gov/efile and click on e-file for Chanties & Nonprofits	3				
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).		
A corpo	ration required to file Form 990-T and requesting an autor					
Part I or				·		ightharpoons
	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	an exter	sion of time	
	come tax returns.	,				
Type or	Name of exempt organization or other filer, see instru	ictions		Employe	r identification n	umber (FIN) or
print	UTAH CIVIL RIGHTS & LIBERT			Linployo	, idominodion ii	220. (21) 0.
print	FOUNDATION, INC.	110		X	87-0405	876
File by the	Non-boundary and seems as a Karp O have					
due date filing your		see instruc	tions	Social Se	ecurity number (	33N)
return See				لــــا		
instruction		oreign add	ress, see instructions			
	SALT LAKE CITY, UT 84111				<del> </del>	
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
			T			<del></del>
Applica	tion	Return	Application			Return
<u>Is For</u>		Code	Is For			Code
Form 99	90	01	Form 990-T (corporation)			07
Form 99	90-BL	02	Form 1041-A			08
Form 99	90-EZ	01	Form 4720			09
Form 99	90-PF	04	Form 5227			10
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
	BRIAN M. BARNA	RD				
• The	books are in the care of ▶ 214 EAST 500 S		SALT LAKE CITY. II	- אגיד	84111	
	phone No ► 801-328-9531	<u> </u>	FAX No. ▶		<u> </u>	
	e organization does not have an office or place of busines	e in the l li	<del></del>			
	s is for a Group Return, enter the organization's four digit			f this is fo	or the whole grou	in check this
		_				
box 🕨			ach a list with the names and EINs of		bers the extension	on is ioi
1	request an automatic 3-month (6 months for a corporation	•	•			
_	AUGUST 15, 2012 , to file the exemp	ot organiza	ition return for the organization name	ed above	rne extension	
IS	for the organization's return for.					
	LX calendar year <u>2011</u> or					
	tax year beginning	, ar	nd ending			
2 If	the tax year entered in line 1 is for less than 12 months,	check reas	son: Initial return I	Fınal retu	irn	
Į	Change in accounting period					
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
	onrefundable credits. See instructions.	·	. •	3a	\$	0.
_	this application is for Form 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and			
	stimated tax payments made Include any prior year over			Зъ	s	0.
	alance due. Subtract line 3b from line 3a Include your p				<del> </del>	
	y using EFTPS (Electronic Federal Tax Payment System)	· <del>-</del>		3c	s	0.
	n. If you are going to make an electronic fund withdrawal					
	in a year are going to mane an electronic land withdrawar					

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For Privacy Act and Paperwork Reduction Act Notice, see Instructions.