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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 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.

OMB No 1545 0047

2014

Open to Public Inspection

Α	For the 2	014 calend	dar year, or tax year beg	inning_	, 20	14, and endir	1 <u>g</u>		,	
В	Check if app	olicable	С			<u> </u>		D Employer iden	tification number	
	Address	s change	UTAH WORLD TRAD	E CENTER			l	20-3755	5734	
	Name o		60 EAST SOUTH T		300		Ī	E Telephone num		
	Initial re	-	SALT LAKE CITY,	UT 84111				801-532	2-8080	
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	\vdash	urn/terminated						C 0	\$ 010 20	~ 1
	\vdash	led return	<u></u>			·	IV(a) is this s	G Gross receipts		7
	Applica	ation pending					1 * *	group return for su	<u> </u>	X No
			Same As C Above				If 'No,'	subordinates include attach a list (see in	ed? Yes L structions)	No
<u> </u>	Tax-exem	npt status	501(c)(3) X 501(c) ((6) (insert no) 4947(a)(1)	or 527	<u> </u>			
J	Websit	e: ► ww	w.wtcut.com				H(c) Group e	exemption number	-	
K	Form of o	organization	X Corporation Trust	Association Othe	, Þ	L Year of forma	lion 2005	M State of	legal domicile UT	
Pa	rt I	Summar								
	1 Brie		be the organization's mis	sion or most signific	ant activities	To estab	lish a	nd admini:	ster	
			es, programs an			Utah's i	nternat	ional bus	iness	
Governance	in	nterest		7 201 4 1002 -00		<u> </u>	TCCT TOC		±11000	 - -
펼		TCCT CDC	2							
ě	2 Che	eck this bo	ox If the organizat	ion discontinued its	operations or d	isposed of m	ore than 2	5% of its net a		
Ĝ	3 Nur		oting members of the gov			isposed of in	ore than E.	3	1	12
৽ĕ			dependent voting member			ine 1b)		4		11
Activities &			of individuals employed					5		11
₹			r of volunteers (estimate		(,			6		- 1
ੲ	i .		ed business revenue from		C), line 12			7a		0.
Q	1		d business taxable incom					7b		0.
	- B 110	· concluted	1 business taxable incom	C 1101111 01111 330 1,			Р	rior Year	Current Year	
	8 Coi	ntributions	and grants (Part VIII III	ao 1h\			<u> </u>			
e			s and grants (Part VIII, lir vice revenue (Part VIII, li					384,107.	816,7	94.
Revenue					74)		<u> </u>	114		7 E
ě	1		ncome (Part VIII, column					114.		<u>75.</u>
ш	1		ie (Part VIII, column (A),			10		316.	1,2	
			e - add lines 8 through), line (2)		384,537.	818,3	<u>61.</u>
	1		similar amounts paid (Par							
			d to or for members (Part							
	15 Sa	ilaries, oth	er compensation, employ	ee benefits (Part IX	, column (A), lır	nes 5-10).		399,831.	389,9	80.
Expenses	16a Pro	ofessional	fundraising fees (Part IX	t, column (A), line 11	e)			-		
ē	h Toi	tal fundras	sing expenses (Part IX,	column (D) line 25)	•	39,277.				
ᄶ	1 - 0						-	100 100		
			ses (Part IX, column (A),				<u> </u>	198,428.	226,1	
	1		ses Add lines 13-17 (mus	h (ımn (A), line 25))		598,259.	616,1	
2		venue less	s expenses Subtract line					-213,722.	202,2	56.
95 O				8	JUL 2 0 20	15	Beginnin	ng of Current Year		
ě		tal assets	(Part X, line 16)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				308,026.	512,1	27.
A 48	21 Tot	tal liabilitie	es (Part X, line 26)		OCDEN_			30,016.	31,8	
Net	22 Ne	et assets o	r fund balances Subtrac	t line 21 from line 20				278,010.	480,2	
D:			re Block					270,010.	1 400,2	<u>oo.</u>
							46-6-4-4-4	1 1	1.6.1.	
com	er penaities i plete Declar	of perjury, 1 d ration of preparation	leclare that I have examined this arer (other than officer) is based	on all information of which	ying schedules and s preparer has any kno	owledge	the best of m	y knowledge and be	ellet, it is true, correct, an	a
								71.1		—
c:		Signati	ure of officer				Da		5	
	gn									
п	ere		EK MILLER			<i></i>	Presi	<u>ident & CE</u>	EO	
			or print name and title			/				
		Print/Type	preparer's name	Preparer's signature	///	Date	,	Check if	PTIN	
Pa	id	BART '	T. WEED	BART T. WE	EDKY	17/8/	2015	self employed	P00290462	
	eparer	Firm's nam								
Us	e Only			ard Road, Sui	te 112			Firm's EIN ► 87	7-0440711	
	,			City, UT 84106						
N/a	v the IDC	discuss 4	his return with the prepai					Linone no 180	1) 484-5206 X Yes	N7 -
IVIC	A MIG ILLO	uiscuss II	ais return with the prepar	er shown above? (s/	ee mismuchons).				IAI YAC II	NO

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 05/28/14

Form 990 (2014)

Form	990 (2014) UTAH WORLD TRADE CENTER	20-37	55734	f	age 2
Par	·				
	Check if Schedule O contains a response or note to any line in this Part III				
1	Briefly describe the organization's mission				
	To establish and administer activities, programs and services to international business interests.	o <u>enhance</u>	e_Utal	h's 	
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior			
	Form 990 or 990-EZ?		Y	es X	No
	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 s If 'Yes,' describe these changes on Schedule O	ervices?	Y	es X	No
4	Describe the organization's program service accomplishments for each of its three largest program se Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocated and revenue, if any, for each program service reported	rvices, as me ons to others	asured , the tot	by exper al expen	ises ses,
4 a	(Code:) (Expenses \$ 186,919. including grants of \$)	(Revenue \$;)
	Programs include organizing training classes and seminars, provinces and hosting international events.	iding com	nsult	ing	
		- -			
		~	_		- -
					
		- -			
		- 			
		. –			
41	(Code) (Expenses \$ including grants of \$)	(Revenue \$)
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		. 			
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4 0	(Code) (Expenses \$including grants of \$)	(Revenue \$	·)
		-			
			· 		-
		· 			
		·	. – – –		
	Other program aggrees (December of Child II O.)				
4 (d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	\$)	
4	e Total program service expenses ► 186, 919.				
BAA	TEEA0102L 05/28/14		F	orm 990	(2014)

			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		Х
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		
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, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 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		Х
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		Х
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			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	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	11 b		Х
	c 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	11 c		х
	d 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	11 d		
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b 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		Х
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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		х
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		Х
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		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 ь		

			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		Х
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 ⁷ If 'Yes,' complete Schedule I, Parts I and III	22		Х
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? <i>If 'Yes,' complete Schedule J</i>	23	1	Х
24 a	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		X
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
(Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		
ı	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		
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		Х
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		Х
	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 current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
١	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		х
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		х
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		х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		х
38	Note. All Form 990 filers are required to complete Schedule O	38		х
BAA		Form	990 (2014

	Check if Schedule O contains a response or note to any line in this Part V				
		- I T		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 0		1	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b 0	}	í	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reg (gambling) winnings to prize winners?	portable gaming	1 c		
	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 11			
Ł	If at least one is reported on line 2a, did the organization file all required federal employment		2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst				
	Did the organization have unrelated business gross income of \$1,000 or more during the year	?	3 a		X
ŀ	olf 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 ь		
	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other fin	authority over, a ancial account)?	4 a		_X
t	If 'Yes,' enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		_		٠,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	- h	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		<u> </u>
6 8	Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible as charitable contributions?	d did the organization	6 a		Х
١	If 'Yes,' did the organization include with every solicitation an express statement that such contribution not tax deductible?	ns or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).				
,	Did the organization receive a payment in excess of \$75 made partly as a contribution and paservices provided to the payor?	rtly for goods and	7 a		
ı	of Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Form 8282?	as required to file	7с		
•	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7 e		
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	fit contract?	7 f		<u></u>
•	g If the organization received a contribution of qualified intellectual property, did the organization file For as required?	orm 8899	7 g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	_	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained to	by the sponsoring			1
_	organization have excess business holdings at any time during the year?		8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.				
	a Did the sponsoring organization make any taxable distributions under section 4966?	2	9 a		├
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related pers	on	9 b		
	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12	10 a			
		10 b			
	Section 501(c)(12) organizations. Enter:	100			
	1	11 a			
	Gross income from other sources (Do not net amounts due or paid to other sources	11 b			
12:	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12 a		
	· · · · · · · · · · · · · · · · · · ·	12Ы			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				ĺ
	Is the organization licensed to issue qualified health plans in more than one state?		13 a		[
	Note. See the instructions for additional information the organization must report on Schedule	: 0			l
I	Enter the amount of reserves the organization is required to maintain by the states in	13Ь			
	L	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14 a		Х
	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	chedule O	14b		
BAA	TEEA0105L 05/28/14		Form	990	(2014)

Form	990 (2014) UTAH WORLD TRADE CENTER 20 3733734								
Part	a No response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes schedule O. See instructions.	ow, a jes ir	and 1 า						
	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sect	ion A. Governing Body and Management	—т	V T	N-					
	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad		Yes	No					
b	authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 1b 11								
	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					
	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		Х					
4 Did the organization make any significant changes to its governing documents									
since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6 Did the organization become aware during the year of a significant diversion of the organization's assets?									
7 a 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?									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
-	The governing body?	8 a		X					
	Each committee with authority to act on behalf of the governing body?	8 b		Х					
	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		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venu	Yes	<u>No</u>					
10 3	Did the organization have local chapters, branches, or affiliates?	10 a	103	X					
	olf '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?	10 Ь							
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		X					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O								
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X X						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		Х					
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14	X						
	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	15 a	<u> </u>	X					
t	Other officers or key employees of the organization	15 b		Х					
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)								
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х					
t	o If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b							
	tion C. Disclosure								
17									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s for public inspection. Indicate how you made these available. Check all that apply Own website	only)	avail	able					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year See Schedule O	ble to							
20	State the name, address, and telephone number of the person who possesses the organization's books and records DON WILLIE 60 EAST SOUTH TEMPLE, SUITE 300 SALT LAKE CITY UT 84111 801-532	-808	30						

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

- 1 a 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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 it helder the organization for any relate		(C)								
(A) Name and Title	(B) Average hours per	thar	ition (n one s both dire	(do no box, an o ector/	ot che unles fficer		ion	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) A SCOTT ANDERSON	0									
Director	0	Х				<u> </u>		0.	0.	<u> </u>
(2) LANE BEATTIE	0_									
Director	0	X						0.	0.	0.
(3) GREG MILLER	0					1				
Director	0	X	Ш			لـــــا		0.	0.	0.
(4) GARY PORTER	0									
Director	0	X				<u> </u>		0.	0.	0.
(5) CHRISTIAN GARDNER	0									
Director	0	Х						0.	0.	0.
(6) DAVID HUNTSMAN	0))				j			
Director	0	Х				L		0.	0.	0.
	0									
Director	0	X					_	0.	0.	0.
(8) JACOB KINGSTON	0		ÌÍ		ĺ		ĺ			
Director	0	X						0.	0.	0.
(9) ALEX DUNN	0									
Director	0	X	Ш					0.	0.	0.
(10) DARIN PARKER	0								_	_
Director	0	X	ļ ļ			L	<u> </u>	0.	0.	0.
(11) DEREK MILLER	_40_		}				ļ			_
President & CEO	0		\vdash	Χ		ļ		140,096.	0.	0.
(12) DEAN LUIKART	0	-		37						
Treasurer	0		┝╌┥	X	_			0.	0.	0.
(13)	 									
(14)						_				
			Ш				<u> </u>	<u> </u>		

Part.\	/II Section A. Officers, Directors, Tru	ustees, l	Кеу	Em	ıplo	oye	es,	and	nd Highest Compensated Employees (continued)					
			(B) (C)											
	(A) Name and title	Average hours per	box	, unle	heck	erson	than is boti or/trus	h an	(D) Reportable	(E) Reportable	Es Es	(F) timated		
									compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com	nt of oth pensation om the		
		(list any hours for	Individual or director	State	Officer	Key employee	ghes	Former	(***2/1033******30)	(11-2/1033 11/100)	orga	nization related		
		related organiza • tions	ctor t	iona Iona	¬	항	e con	~				nızatıon		
		below dotted	ndividual trustee or director	nstitutional trustee		ee ee	pens							
		line)	Ö	ee			Highest compensated employee							
(15)														
(16)								-						
<u> </u>							ļ	L						
(17)		 												
(18)														
(19)			ļ	-			\vdash	-						
			<u> </u>				<u> </u>	<u> </u>						
(20)		 	}							<u> </u> -				
(21)													-	
(22)							-	-						
(23)				ļ	-		-	-				_		
			_		_	_								
(24)								ŀ						
(25)												_		
1 b S	ub-total					L	.l	•	140,096.	0.			0.	
	otal from continuation sheets to Part VII, Secti	ion A						•	0.	0.			0.	
	otal (add lines 1b and 1c)		_					_	140,096.	0.			0.	
	otal number of individuals (including but not limited om the organization > 1	to those I	ısted	abo	ve) י	who	recei	ved	more than \$100,00	00 of reportable comp	pensation	ì		
												Yes	No	
3 D	id the organization list any former officer, dired n line 1a? <i>If 'Yes,' complete Schedule J for su</i> d	ctor, or tru ch individu	istee, <i>ial</i>	, ke	y en	nplo	yee,	or h	nighest compensa	ted employee	3		Х	
4 F	or any individual listed on line 1a, is the sum o le organization and related organizations great	f reportab	le co	mpe	ensa	tion	and	oth	ner compensation	from				
tr s	ie organization and related organizations great uch individual	er than \$1	50,0	00°	If "	Yes'	com	plet	te Schedule J for		4		Х	
5 D	id any person listed on line 1a receive or accruing services rendered to the organization? If 'Yea	ie comper s,' comple	satio	on fr	om dule	any <i>J fc</i>	unre	elate ch p	ed organization or person	ındıvıdual	5		Х	
Section	on B. Independent Contractors													
1 0	omplete this table for your five highest comper ompensation from the organization Report comper	isated ind isation for	epen the c	den alen	t co idar	ntra year	ctors endi	tha ing v	at received more t with or within the or	han \$100,000 of ganization's tax yeai	r			
	(A) Name and business add	lress							(B) Description	of services	Compe	;) nsatior	า	
									<u> </u>					
									I					
	otal number of independent contractors (including land). 100,000 of compensation from the organization		ited t	o the	ose I	liste	d abo	ve)	who received more	than				

	Check if Schedule O contains a response or note to any line in this Part VIII								
1			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
ts ts	1 a Federated campaigns 1 a		,			-			
iran	b Membership dues 1b 46	6,794.							
s, G	c Fundraising events 1 c								
Gift lar	d Related organizations 1 d								
JS,	e Government grants (contributions) 1e 35	0,000.		Î					
tio er S	f All other contributions, gifts, grants, and similar amounts not included above 1 f								
혈충	\								
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions included in lines 1a-1f \$								
	h Total. Add lines 1a-1f	ss Code	816,794.						
Program Service Revenue	2a	755 COUR							
Ě	b				 				
e	c								
ervi	d								
SE	e								
gra	f All other program service revenue				<u></u>				
Pro	g Total. Add lines 2a-2f								
	3 Investment income (including dividends, interes	st and			•				
!	other similar amounts)	. •	275.	275.					
;	4 Income from investment of tax-exempt bond pr	oceeds.							
	5 Royalties (i) Real (ii)	Personal							
	6a Gross rents	Personal							
	b Less rental expenses					}			
	c Rental income or (loss)								
	d Net rental income or (loss)								
	(V) Samuelan II (V)) Other							
	7 a Gross amount from sales of assets other than inventory								
	b Less cost or other basis	1							
	and sales expenses.								
	c Gain or (loss)		-	ĺ		1			
	d Net gain or (loss)								
Other Revenue	8 a Gross income from fundraising events (not including \$;					
ě	of contributions reported on line 1c) See Part IV, line 18 a			J					
<u> </u>	b Less: direct expenses b								
₹	c Net income or (loss) from fundraising events.								
O	9 a Gross income from gaming activities See Part IV, line 19								
	b Less. direct expenses b								
	c Net income or (loss) from gaming activities								
	10a Gross sales of inventory, less returns and allowances								
	b Less cost of goods sold b		J			}			
	c Net income or (loss) from sales of inventory	•				<u>L</u>			
		ss Code		-					
	11a Other Income		1,292.	1,292.					
	b								
	d All other revenue								
	d All other revenue.								
	e Total. Add lines 11a-11d 12 Total revenue. See instructions	-	1,292.			<u> </u>			
	12 I Otal revenue. See INSTRUCTIONS		818,361.	1,567.	<u> </u>	0.			

Form 990 (2014)

Part IX | Statement of Functional Expenses

BAA

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Fundraising Program service Management and expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 219,476 77,572 119,741 22,163. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 n Other salaries and wages 136,506 48,247 74.474 785. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 7,294 7,294 10 Payroll taxes 910 26,704 13,609 10,185 11 Fees for services (non-employees) a Management **b** Legal c Accounting 8,157 8,157 **d** Lobbyina e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 2,648. 116 2,532. 5,280. 13 Office expenses 5,488. 208. Information technology 15 Royalties 16 Occupancy 17 Travel 325 59,278 24,469 34,484 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 10,156 1,118 9,038 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 4,409 4,409 1,959 1,959 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) a Rent__ 47,711 47,711 b Dues & Subscriptions 24,039 3,683 20,356 16,044 15,950 Seminar Costs_ 94. d Telephone 11,798 11,798 34,438. 5,371. 29,067. e All other expenses 25 Total functional expenses Add lines 1 through 24e 616,105 186,919. 389,909 39,277 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 ► If following SOP 98-2 (ASC 958-720)

TEEA0110L 05/28/14

Balance Sheet

Part X Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year Cash - non-interest-bearing 89,332 1 47,117. 2 10,242 232,580. Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 1,400 18,841. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 30,976. **b** Less accumulated depreciation 10b 7,052 10 c 17,387 13,589. 11 11 Investments - publicly traded securities 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 200,000. 15 200,000 16 Total assets. Add lines 1 through 15 (must equal line 34) 308,026 512,127. Accounts payable and accrued expenses 29,217. 17 17 10,682 Grants payable 18 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D <u>21,1</u>79. 799 25 Total liabilities. Add lines 17 through 25 26 30,016 31,861. X and complete Organizations that follow SFAS 117 (ASC 958), check here > lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 278,010 480,266. 28 Temporarily restricted net assets Permanently restricted net assets 29 Fund Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 늉 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 278,010 480,266. 34 Total liabilities and net assets/fund balances 34 308,026 512,127. BAA Form 990 (2014)

TEEA0111L 05/28/14

	<u> 1–3755734</u>		Pa	ge 12				
Part 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	8	18,3	61.				
2 Total expenses (must equal Part IX, column (A), line 25)	2	6	16,1	.05.				
3 Revenue less expenses. Subtract line 2 from line 1	3	2	02,2	56.				
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4								
5 Net unrealized gains (losses) on investments	5							
6 Donated services and use of facilities	6							
7 Investment expenses	7 Investment expenses 7							
8 Prior period adjustments	8							
9 Other changes in net assets or fund balances (explain in Schedule O)	9			0.				
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))								
Part XII Financial Statements and Reporting								
Check if Schedule O contains a response or note to any line in this Part XII								
	· · · · · · · · · · · · · · · · · · ·		Yes	No				
1 Accounting method used to prepare the Form 990 Cash X Accrual Other								
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O								
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	i	X				
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revies separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	wed on a							
b Were the organization's financial statements audited by an independent accountant?		2 b	Х					
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	arate							
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the autreview, or compilation of its financial statements and selection of an independent accountant?	dit,	2 c		<u>X</u>				
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O								
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?								
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits	udıt	3 b	х					
BAA		Form	990 (2014)				

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

UTAH WORLD TRADE CENTE	R	20-3755734
Part I Organizations Maintaining	Donor Advised Funds or Other Similar Fu	nds 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).		
4 Aggregate value at end of year		
5 Did the organization inform all donors a are the organization's property, subject	and donor advisors in writing that the assets held in c to the organization's exclusive legal control?	donor advised funds Yes No
6 Did the organization inform all grantees for charitable purposes and not for the impermissible private benefit?	s, donors, and donor advisors in writing that grant fur benefit of the donor or donor advisor, or for any othe	nds can be used only er purpose conferring Yes No
Part II Conservation Easements.		
Complete if the organization	n answered 'Yes' to Form 990, Part IV, line	e 7.
1 Purpose(s) of conservation easements	held by the organization (check all that apply)	
Preservation of land for public use	(9 , , , , , , , , , , , , , , , , , ,	of a historically important land area
Protection of natural habitat	Preservation	of a certified historic structure
Preservation of open space		
	zation held a qualified conservation contribution in the fo	orm of a conservation easement on the
last day of the tax year		Held at the End of the Tax Year
a Total number of conservation easemen	ite	2a
b Total acreage restricted by conservation		2 b
	a certified historic structure included in (a)	2c
structure listed in the National Register		2 d
3 Number of conservation easements modificated tax year ▶	ied, transferred, released, extinguished, or terminated by	the organization during the
4 Number of states where property subject t		
and enforcement of the conservation e		∐Yes ∐ No
6 Staff and volunteer hours devoted to mon	toring, inspecting, and enforcing conservation easements	s during the year
7 Amount of expenses incurred in monitorin ▶\$	g, inspecting, and enforcing conservation easements dur	ring the year
8 Does each conservation easement reparant section 170(h)(4)(B)(ii)?	orted on line 2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i) Yes No
include, if applicable, the text of the fo	n reports conservation easements in its revenue and expe otnote to the organization's financial statements that	ense statement, and balance sheet, and describes the organization's accounting for
conservation easements	Collections of Art Historical Transverse	or Other Similar Accets
Complete if the organization	Collections of Art, Historical Treasures, on answered 'Yes' to Form 990, Part IV, line	e 8.
art, historical treasures, or other similar a	d under SFAS 116 (ASC 958), not to report in its revisets held for public exhibition, education, or research in its financial statements that describes these items	venue statement and balance sheet works of furtherance of public service, provide,
b If the organization elected, as permitte historical treasures, or other similar asset following amounts relating to these ite	ed under SFAS 116 (ASC 958), to report in its revenurs held for public exhibition, education, or research in furtims	e statement and balance sheet works of art, herance of public service, provide the
(i) Revenue included in Form 990, Pa	rt VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part		> \$
amounts required to be reported under	of art, historical treasures, or other similar assets for final SFAS 116 (ASC 958) relating to these items	
a Revenue included in Form 990, Part V	III, line 1	▶ \$
b Assets included in Form 990, Part X		▶ \$

Schedule D. (Form 990) 2014 UIAH W					20-3/3		rage z		
Part III Organizations Maintaini	ng Collection	s of Art, Histor	rical Treasures, or	Other	Similar Asso	ets (contini	ıed)		
3 Using the organization's acquisition, actiems (check all that apply)	ccession, and other	r records, check an	y of the following that ar	e a signif	icant use of its o	collection			
a Public exhibition		d Loan o	r exchange programs						
b Scholarly research		e Other							
c Preservation for future generation									
4 Provide a description of the organization Part XIII									
5 During the year, did the organization to be sold to raise funds rather than	i to be maintained	d as part of the or	ganization's collection?	7		Yes	No		
Part IV Escrow and Custodial A	rrangements. nount on Form	Complete if the 1990, Part X, I	ne organization and ine 21.	swered	Yes' to For	m 990, Par 	t IV,		
1 a Is the organization an agent, trusted on Form 990, Part X?				er assets	s not included [Yes	No		
b If 'Yes,' explain the arrangement in	Part Alli and con	ipiete the followin	ly table		1	Amount			
c Beginning balance				1 c					
d Additions during the year				1 d					
e Distributions during the year				1 e	 				
f Ending balance				11					
2a Did the organization include an amo	ount on Form 990	, Part X, line 21, f	or escrow or custodial	account	liability?	Yes	No		
b If 'Yes,' explain the arrangement in									
Part V Endowment Funds. Con	anlata if the ex	rangation on	swored 'Ves' to Fe	rm 000	Part IV Jun	0.10			
Part V Endowment Funds. Con	(a) Current year	(b) Prior year	(c) Two years back		Three years back	(e) Four yea	re back		
1 a Beginning of year balance	(a) Current year	(b) Frior year	(c) I wo years back	(0)	Tillee years back	(e) rour yea	13 Dack		
b Contributions		 		- -		 			
		 			·	 			
c Net investment earnings, gains, and losses		ļ							
d Grants or scholarships		- 				 			
e Other expenditures for facilities and programs									
f Administrative expenses						<u> </u>			
g End of year balance	. 	1				1			
2 Provide the estimated percentage of	-		e 1g, column (a)) held	as					
a Board designated or quasi-endowmen		[%]							
b Permanent endowment ▶									
c Temporarily restricted endowment		 -8							
The percentages in lines 2a, 2b, an	id 2c should equa	1 100%							
3 a Are there endowment funds not in the organization by	possession of the	organization that a	re held and administered	d for the		Yes	No		
(i) unrelated organizations						3a(i)	T		
(ii) related organizations						3a(ii)			
b if 'Yes' to 3a(II), are the related org	anizations listed	as required on Sc	hedule R?			3b	T		
_ 4 Describe in Part XIII the intended u	ses of the organi	zation's endowme	nt funds						
Part VI Land, Buildings, and Ed	uipment.								
Complete if the organiza		d 'Yes' to Form	990, Part IV, Ime	11a. S	ee Form 990), Part X, lı	ne 10.		
Description of property		st or other basis nvestment)	(b) Cost or other basis (other)		ccumulated preciation	(d) Book v	/alue		
1 a Land	`						ţ		
b Buildings	· · · ·								
c Leasehold improvements									
d Equipment									
e Other		 : 1	30,976.		17,387.	13	5,589.		
Total. Add lines 1a through 1e (Column	(d) must equal Fo	orm 990, Part X, c			▶		3,589.		
BAA	· · · ·	· · · · · · · · · · · · · · · · · · ·			Schedu	ule D (Form 99			

TEEA3302L 08/25/14

(a) Description of security or category (including name of security)	(b) Book value	(c) Me	ethod of valuation	Cost or end-of-	year market value
1) Financial derivatives					
2) Closely-held equity interests					
3) Other					
<u>4)</u>					
3) 			<u>-</u> _		
C)					
D) 					
A) B) C) D) E) F) G)					
F)					
					
H)					
(1)				 	
otal. (Column (b) must equal Form 990, Part X, column (B) line 12)		1	7 / 7		
Part VIII Investments – Program Related. Complete if the organization answered	d 'Yes' to Form 990) Part IV li	N/A une 11c Se	e Form 99	0. Part X. line 13
(a) Description of investment type	(b) Book value	(c) Method	of valuation	Cost or end-c	of-year market value
(1)		· · · · · · · · · · · · · · · · · · ·			
(2)					
(3)		1			· <u>···</u>
(4)	 				
(5)	 				
(6)					
(7)					
(8)					
(9)					
					
		†			
(10)	-		-		
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets	 		11.1.0		0. Da t V. lua 15
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere	d 'Yes' to Form 990), Part IV, I	ıne 11d. Se	e Form 99	0, Part X, line 15
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (a) De), Part IV, I	ıne 11d. Se	e Form 99	(b) Book value
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (a) December 1	d 'Yes' to Form 990), Part IV, I	ıne 11d. Se	e Form 99	(b) Book value
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (a) December (1) World Trade Center Membership (2)	d 'Yes' to Form 990), Part IV, I	ıne 11d. Se	e Form 99	(b) Book value
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (1) World Trade Center Membership (2) (3)	d 'Yes' to Form 990	D, Part IV, I	ine 11d. Se	e Form 99	(b) Book value
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (1) World Trade Center Membership (2) (3) (4)	d 'Yes' to Form 990	D, Part IV, I	ine 11d. Se	e Form 99	(b) Book value
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (1) World Trade Center Membership (2) (3)	d 'Yes' to Form 990	D, Part IV, I	ıne 11d. Se	e Form 99	(b) Book value
(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (a) December 1 (b) World Trade Center Membership (2) (3) (4) (5) (6) (7)	d 'Yes' to Form 990	D, Part IV, I	ıne 11d. Se	e Form 99	(b) Book value
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(10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answere (a) December (a) December (b) Must equal Form 990, Part X, column (b) must equal Form 990, Part X, column (c) Total. (Column (b) must equal Form 990, Part X, column (c) Part X Other Liabilities. Complete if the organization answered 'Yes' to line (column (c) must equal Form 990, Part X, column (c) Form 990, Part X	d 'Yes' to Form 990 escription (B), line 15)	1e or 11f. See		>	0, Part X, line 15 (b) Book value 200,000
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Schedule D. (Form 990) 2014 UTAH WORLD TRADE CENTER 20-3755734 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 818,361. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a **b** Donated services and use of facilities 2 b 2 c c Recoveries of prior year grants 2 d d Other (Describe in Part XIII) 2 e e Add lines 2a through 2d 3 3 Subtract line 2e from line 1 818,361. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4Ь b Other (Describe in Part XIII) 4 c c Add lines 4a and 4b 5 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 818,361 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 616,105. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2 a a Donated services and use of facilities **b** Prior year adjustments 2 b c Other losses 2 c d Other (Describe in Part XIII) 2 d 2 e e Add lines 2a through 2d 3 3 Subtract line 2e from line 1 616,105. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4 a **b** Other (Describe in Part XIII) 4 b

Part XIII Supplemental Information.

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

c Add lines 4a and 4b.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

BAA

4 c

5

616,105

SCHEDULE 0 (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.

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.

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UTAH WORLD TRADE CENTER

Employer identification number

20-3755734

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No documents available to the public.