

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

OMB No 1545-0047

Inspection

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.

Open to Public

<u> </u>	or th	e 2014 calendar year, or tax year beginning , 2014, an	na enaing			, 20			
р.		C Name of organization	_	D Employer idea	ntification i	number			
	heck liep	HEALTHY ENVIRONMENT ALLIANCE OF UTAH							
	Addres			84-1	409393	3			
	Name	change Number and street (or P O. box if mail is not delivered to street address) Roc	om/suite	E Telephone nu	mber				
	Initial	return 824 SOUTH 400 WEST	B-111	(801) 355-5055					
	Final r	sturn/ City or town, state or province country and ZIP or foreign postal code		1					
	Ameno	ted CATH TARE CTMY IM 04101		G Gross receipt	s \$	310,504			
-	Applic	etion F Name and address of principal officer		H(a) is this a grou		Yes X No			
٠	pendir			subordinates*	Ž	H. 14			
1	Tayay	empt status	527	H(b) Are all subordi					
÷	Websit		1 321						
-			T	H(c) Group exemp					
			L Year of format	ion: 1997 M	State of leg	al domicile			
	art i	Summary							
		Briefly describe the organization's mission or most significant activities: HEAL UT!		S RENEWA	BLE EN	ERGY AND			
Activities & Governance		DEFENDS UTAH FROM NUCLEAR, TOXIC AND DIRTY ENERGY	THREATS						
Ē									
8		Check this box 🕨 🔛 if the organization discontinued its operations or disposed of			3.				
õ	3	Number of voting members of the governing body (Part VI, line 1a)			3	9			
8	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	<u> </u>			
=	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)			5	5			
疲	6	Total number of volunteers (estimate if necessary)			6	35			
ď	7a	Total unrelated business revenue from Part VIII, column (C), line 12			7a				
		Net unrelated business taxable income from Form 990-T, line 34			7b				
		^		Prior Year		Current Year			
60	8	Contributions and grants (Part VIII, line 1h)		353,7	92	302,696			
Revenue	9	Program service revenue (Part VIII, line 2g)							
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	••••	9,2	11	7,808			
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	····			.,,,,,			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).	,>··	363,0	03	310,504			
		One-to-end-delete-consistent (Delete-consistent (De	/ · · · 	303,0	"	310,304			
		Benefits paid to or for members (Part IX, column (A), lines 1-3)	••••						
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	• • • • • • • • • • • • • • • • • • • •	177,3	00	202,377			
Expenses		Professional fundraising fees (Part IX, column (A), line 1.1e)	• • • • • • • • • • • • • • • • • • • •	111,3	-	202,311			
쿌		Total fundraising expenses (Part IX, column (D), line 25).	• • • • • • • • • • • • • • • • • • • •						
Ä		Other expenses (Bort IV selvers (A) lines 44s 444 445 (34s)		104 5		04 E00			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	• • • • • • • • • • • • • • • • • • • •	124,5 301,8		84,502			
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)				286,879			
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12		61,1		23,625 End of Year			
t Assets or ed Balances		Table of the two	Begin	ning of Current Y					
Safa	20	Total assets (Part X, line 16)	• • • • •	286,9		307,215			
4 E	21	Total liabilities (Part X, line 26)		10,6		10,818			
		Net assets or fund balances Subtract line 21 from line 20		276,2	771	296,397			
	rt II	Signature Block							
tru	der per 9. corre	ialties of perjury, I declare that I have examined this return, including accompanying schedules ct, and complete. Declaration of preparer (other than officer) is based on all information of which p	and statements, a preparer has any ki	and to the best of nowledge	my knowl	edge and belief, it is			
		M/ To a d	· · · · · · · · · · · · · · · · · · ·		2/20	10			
Sig	ın	MIONE CIC		. <u></u>	2100	<u></u>			
He		Signature of officer		Date					
		Mutt Parenza Executive Director							
		Type or print name and title							
Paid	-		Date	Check X	if PTIN				
	a parer	JOSEPH B GLASS	11/6/2015	self-employ	be	P00476309			
	Only	Firm's name ➤ JOSEPH B GLASS CPA PO		Firm's EIN 🕨	37-043	5881			
		Firm's address ▶ 821 MARION VIILINGE RD, SANDY, UT 84094	4			4-3325			
May	the II	RS discuss this return with the preparer shown above? (see instructions)			T	Yes No			
For	Paper	rwork Reduction Act Notice, see the separate Instructions.			٠,٨	Form 990 (2014)			
	-				18	C77			
AZI					1 ~	776			

Department of the Treasury Internal Revenue Service

Part	Checklist of Required Schedules			
	· ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		X
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	Х	
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		x
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		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 Schedule D, Part III	8		x
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		x
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	x	
h	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	<u></u>		
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11ь		x
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	11.5		- -
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
ч	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		 -
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	111	 	- -
124		12a		x
.	complete Schedule D, Parts XI and XII. Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	128	 -	
U	· · · · · · · · · · · · · · · · · · ·	42h		x
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	-	X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?	148		
D	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			x
4=	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		-
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
4.0	for any foreign organization? 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 other			
4-	assistance to or for foreign individuals? 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			
4-	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	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," complete Schedule G, Part III	19	<u> </u>	X
	•	20a	<u> </u>	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	X

Part	Checklist of Required Schedules (continued)			
	(Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	ļ	X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete 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 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
C	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		х
d		24d		x
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
		25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
	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		x
26		230		
20	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	26		х
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		
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		X
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	I		
		28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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_		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		X
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		х
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		х
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? <i>If "Yes," complete Schedule R,</i>			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		 	 -
	·		x	
	19? Note. All Form 990 filers are required to complete Schedule O	_ 55	000	

Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		ليام
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	مد	Yes	No
	The the hamber reported in Dox of Ferni 1000 Enter of in Not applicable,			
	Effect the number of Forms W-26 included in line 1a. Effect -0- in not applicable,			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	х	
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 5			Á
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
5 0	(FBAR)	5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b_		Х
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		X
	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
ч	If "Yes," indicate the number of Forms 8282 filed during the year	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			4
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	, , , , , , , , , , , , , , , , , , , ,	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII. line 12			
	Initiation fees and capital contributions included on Part VIII, line 12			Ė
11	Section 501(c)(12) organizations. Enter:			i i
	Gross income from members or shareholders			ł
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12 a	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
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 reserves on hand 13b			
	Enter the amount of reserves on hand	14a		Х
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	 	

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See i. Check If Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year		tions.
1a Enter the number of voting members of the governing body at the end of the tax year		_
1a 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 authority to an executive committee or similar committee, explain in Schedule O 1b Enter the number of voting members included in line 1a, above, who are independent	Yes	No
If there are material differences in voling rights among members of the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voling members included in line 1a, above, who are independent. 2 Did any officer, director, trustee, or key employees have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a significant of 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? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Ded the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 The governing body? 10 Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the organization is mailing address? If Yes, provide the names and addresses in Schedule O. 10 Did the organization have local chapters, branches, or affiliates? 10 If Yes, did the organization have local chapters, branches, or affiliates? 11 Besction B. Policles (This Section B requests information about policies not required by the Internal Revenue Cocon between the organization have a written conflict of interest policy? If 'No," go to line 13 11 Did the organization have a written conflict of interest policy? If 'No," go to line 13 12 Did the organization have		
be bdy 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. 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 employees have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 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? 8 Draw any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Draw any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Draw the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 8 Draw any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organizations' mailing address? If "Yes," provide the names and addresses in Schedule O and 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? 10a Did the organization have written policies and procedures governing the activities of such chapters, branches, or affiliates, or affiliates, or organization's exempt purposes? 10b If "Yes," did the organization have a written winsteblower policy? or portion of the		
b Enter the number of voting members included in line 1a, above, who are independent. 2 Did any officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employee? 4 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? 5 Did the organization make any significant changes to its governing documents since the prior form 990 was filed? 5 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization device the governing body? 9 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 10 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 10 Each committee with authority to act on behalf of the governing body? 2 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coc of the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 Did the organization have a written conflict of interest policy? If "No." go to line 13 10 Did the organization have a written conflict of interest policy? If "No." go to line 13 11 Be the organization nave a written with substance of the governing body before filing the farm? 12 Did the organization have a written obcument retention and destruction policy? If "Yes." of the organization have a written obcument		
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? 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? 4 Did the organization bacome aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 7 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Dr any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Dr de organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 5 Each committee with authority to act on behalf of the governing body? 8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's maling address? If "Yes," provide the names and addresses an Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coordinates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 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 Did the organization have a written organization to review this Form 990. 11 Did the organization have a written organization for procedures governing body before filing the form? 12 Did the organization have a written molicin of interest policy? If "No." go to line 13 13 Did the organization regularly and consist		
any other officer, director, trustee, or key employee? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filled? Did the organization have members of the governing documents since the prior Form 990 was filled? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members or stockholders. Table of the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Did the organization freetor, 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coconnection of the organization have deviated by the organization to review this Form 990. Did the organization have a 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? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Did the organization have a written policy or proc		
supervision of officers, directors, or trustees, or key employees to a management company or other person?	<u> </u>	X
Did the organization make any significant changes to its governing documents since the prior Form 990 was filled?		
5 Did the organization become aware during the year of a significant diversion of the organization's assets?. 5 Did the organization have members or stockholders? 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? 5 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? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Each committee with authority to act on behalf of the governing body? 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 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Coc. 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11b Has the organization have a written conflict of interest policy? If "No," go to line 13 11c Did the organization have a written conflict of interest policy? If "No," go to line 13 11d Did the organization have a written conflict of interest policy? If "No," go to line 13 11d Did the organization have a written whistleblower policy? 11d Did the organization have a written document retention and destruction policy? 11d Did the organization have a written document retention and destruction policy? 11d Did the organization have a written document retention and destruction policy? 11d Did the organizatio	ļ	X
Did the organization have members or stockholders? To Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? To Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? The governing body and governing body before filing the form? The governing body and governing body before filing the form? The governing body and governing body before filing the form? The governing body? The governing body? The g	<u> </u>	X
Ta 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? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? By the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Beach committee with a written actions and procedures governing the activities of such chapters, affiliates? In a the organization have a written policies and procedures governing the activities of such chapters, affiliates? Beach committee with a companization have a written conflict of interest policy? If "No." go to line 13 Bid the organization resularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done Beach conflicts? Bid the organization have a written whistleblower policy? Bid the organization ha	Ļ	X
a heave any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body? B Each committee with authority to act on behalf of the governing body before filing the form? B Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? B Each committees to conflicts? C Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done C Did the organization have a written whistleblower policy? C Did the organization have a written whistleblower policy? The organization have a written whistleblower policy? The organization invest in, contribute assets to, or p	<u> </u>	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? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? c Section B read of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? c Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Cock of the organization have local chapters, branches, or affiliates? 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? 10a Did the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11a Has the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," and the organization have a written document retention and destruction policy? 1 Did the organization have a written whistleblower policy? The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization of the following persons include a review and approval by independent		
stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?. b Each committee with authority to act on behalf of the governing body? list 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coccession of the organization have local chapters, branches, or affiliates? 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? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 10a bid the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12a Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Did the organization have a written document retention and destruction policy? 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? 15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or proced		X
B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?. b Each committee with authority to act on behalf of the governing body? s 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coc. 10a Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. 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. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 12b Did the organization have a written will be organization and destruction policy?. 13c Did the organization have a written will be 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? 15a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organizatio		l
the year by the following: a The governing body?. b Each committee with authority to act on behalf of the governing body? ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's malling address? If "Yes," provide the names and addresses in Schedule O. gesction B. Policies (This Section B requests information about policies not required by the Internal Revenue Coc. 10a Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review it 57. 2 Did the organization have a written conflict of interest policy? If "No," go to line 13. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 12b Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 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 exe ye employees of the organization 15a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joi	<u> </u>	X
a The governing body?. b Each committee with authority to act on behalf of the governing body? list 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coc. 10a Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12b Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the organization SCEO, Executive Director, or top management official 15c Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b 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		Ì
b Each committee with authority to act on behalf of the governing body? 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coc. 10a Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12b Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written whistleblower policy? 15 Did the organization of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the org	l	
stetion B. Policies (firector, 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Cocococococococococococococococococococ	X	₩
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coccion B. Policies (This Section B requests information about policies not required by the Internal Revenue Coccion B. Policies (This Section B requests information about policies not required by the Internal Revenue Coccion B. Internal Revenue Coccion B. Policies (This Section B requests information about policies not required by the Internal Revenue Coccion B. Int	X	₩
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Coc 10a Did the organization have local chapters, branches, or affiliates?		
b if "Yes," did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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	Ц	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?	I	T
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?	Yes	No
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	├ ─	X
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . 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		
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		+-
Did the organization have a written conflict of interest policy? If "No," go to line 13	X	+-
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 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? 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? 15 The organization's CEO, Executive Director, or top management official 15 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 Did the organization 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed parallable for public inspection. Indicate how you made these available. Check all that apply.		
rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15 The organization's CEO, Executive Director, or top management official 15 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 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? 18 Section C. Disclosure 19 List the states with which a copy of this Form 990 is required to be filed Paralleled for public inspection. Indicate how you made these available. Check all that apply.	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		
describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15 The organization's CEO, Executive Director, or top management official 15 Did the organization's CEO, Executive Director, or top management official 15 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16 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 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed participated in applicable, 990, and 990-T (Section 501 available for public inspection. Indicate how you made these available. Check all that apply.	X	$+\!-\!\!\!-$
Did the organization have a written whistleblower policy?	l	
14 Did the organization have a written document retention and destruction policy?	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? a The organization's CEO, Executive Director, or top management official	├	X
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	ـــ	X
a The organization's CEO, Executive Director, or top management official		
b Other officers or key employees of the organization		1
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	X	
with a taxable entity during the year?	1	Ì
b 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? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶		
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?	↓—	X
organization's exempt status with respect to such arrangements?	į	
Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶	-	
 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501 available for public inspection. Indicate how you made these available. Check all that apply. 	Щ	⊥
Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501 available for public inspection. Indicate how you made these available. Check all that apply.		
Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501 available for public inspection. Indicate how you made these available. Check all that apply.		
	c)(3):	s only
Own website Another's website X Upon request Other (explain in Schedule O)		
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	polic	y, an
financial statements available to the public during the tax year.		
State the name, address, and telephone number of the person who possesses the organization's books and records:		

01111 330 (20	J 17)										_ogc ·
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	onti	actors								

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor	any related	orga	niza	tion	coi	mpen	sate	ed any current offic	er, director, or trus	tee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	neck ss pe	more rson	e than or Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		6	stee			nsated				
(1) CHRISTOPHER THOMAS										
EXECUTIVE DIRECTOR	47	X			X	Х		44,000		4,952
(2) BOB ARCHIBALD										
CO-PRESIDENT	2	X		X	ļ		_			
(3) MARY ELLEN NAVAS			ı							
CO-PRESIDENT (4) TROY KNIGHTON	2	X	-	X	 					
TREASURER	2	x		x						
(5) SUE CORETH		_	-	_			-			
BOARD MEMBER	2	x								
(6) JEFF CLAY	<u> </u>	 -		-	├				<u> </u>	
BOARD MEMBER	2	x								
(7) ED FIRMAGE JR	. -	- - -								
BOARD MEMBER	2	x								
(8) CLARE GILMORE										
BOARD MEMBER	2	x								
(9) STEVE NELSON		_								-
BOARD MEMBER	2	х								
(10)										
(11)										
(12)										
(13)			-		-					
(14)										

Part VII Section A. Officers, Directors, Tre	ustees, Ke	y En	plo	ye	es,	and I	lig	hest Compensat	ed Employ	ees (co	ontinued)	
(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than o box, unless person is both officer and a director/trust						(D) Reportable compensation from	(E) Reportable compensation from related	n from	(F) Estimated amount of other	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-f	ons	compensa from th organizat and relat organizati	e tion ed
(15)												
(16)												
(17)												
(18)		-						 -				
(19)		<u> </u>										
(20)												
(21)	ļ											
(22)												
(23)												
(24)												
(25)												
1b Sub-total c Total from continuation sheets to Part VII, d Total (add lines 1b and 1c)	Section A						> > >	44,000				, 952 , 952
Total number of individuals (including but no reportable compensation from the organization)	ot limited to			sted			who		an \$100,00	00 of	_	,,,,,
3 Did the organization list any former off employee on line 1a? If "Yes," complete Scheen	icer, direct	or, o	r tr	uste	ee,	key	em	ployee, or highes	st compens	ated	Yes	s No X
4 For any individual listed on line 1a, is the organization and related organizations g	sum of re	porta	ble 50,0	con	npe ? <i>I</i>	nsatio	on a	and other comper complete Sched	nsation from ule J for	the such	4	x
 individual 5 Did any person listed on line 1a receive of for services rendered to the organization? If " 	r accrue co	ompe	nsat	ıon	fro	m any	y u	nrelated organizat	ion or indiv	idual	5	X
Section B. Independent Contractors												
 Complete this table for your five highest concompensation from the organization. Report year. 												
(A) Name and business add	dress							(B) Description of se	ervices	С	(C) ompensation	<u> </u>
							ļ.					
							\downarrow					
Total number of independent contractor received more than \$100,000 of compensat						ited	 to	those listed abo	ove) who			

Par	t VII		· · · · · · · · · · · · · · · · · · ·			
	•	Check if Schedule O contains a response or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	302 606			
Program Service Revenue	2a b c d e f	All other program service revenue	302,696			
Other Revenue	3 4 5 6a b c d 7a b c d 8a	Investment income (including dividends, interest, and other similar amounts). Income from investment of tax-exempt bond proceeds. Royalties	7,808			
	11a b c d e	Net income or (loss) from sales of inventory. Miscellaneous Revenue Business Code All other revenue Total. Add lines 11a-11d Total revenue. See instructions	310.504			

Part IX Statement of Functional Expenses

Part IX Statement of Functional Expens		- All -4b		(4)
Section 501(c)(3) and 501(c)(4) organizations Check if Schedule O contains a re		- '- d D UV		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign	l l			
Individuals See Part IV, lines 15 and 16 4 Benefits paid to or for members		-		
5 Compensation of current officers, directors,	1	_		
trustees, and key employees		32,005	6,848	5,147
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)		93,849	16,052	29,107
8 Pension plan accruals and contributions (include	•			
section 401(k) and 403(b) employer contributions		3,432	1,126	898
9 Other employee benefits	12 012	0 670	1 607	0.624
10 Payroll taxes	13,913	9,672	1,607	2,634
11 Fees for services (non-employees) a Management				
b Legal		4,666		
c Accounting			570	
d Lobbying	•			
e Professional fundraising services See Part IV, line 17				
f Investment management fees 9 Other (If line 11g amount exceeds 10% of line 25, colum				
(A) amount, list line 11g expenses on Schedule O)	6 633	4,498	1,001	1,134
12 Advertising and promotion		150		124
13 Office expenses	750	140	312	249
14 Information technology	•	189	312	249
15 Royalties		9,314	1,509	2,532
17 Travel	3 530	2,645	7	868
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	475	201	174	
19 Conferences, conventions, and meetings	·	301	1/4	
20 Interest				
22 Depreciation, depletion, and amortization		338	111	88
23 Insurance	9,467	5,880	2,033	1,554
24 Other expenses Itemize expenses not covered				
above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O)				
a BANK CHARGES	2,195		2,195	
b POSTAGE AND PRINTING	10,759	2,796	1,079	6,884
c FOOD AND ENTERTAINMENT TELEPHONE AND INTERNET	11,750	6,106	691	4,953
4	4,285	3,167 9,336	2,768	700 3,022
e All other expenses 25 Total functional expenses Add lines 1 through 24e	006 070	188,484	38,501	59,894
26 Joint costs. Complete this line only if the			<u> </u>	
organization reported in column (B) joint costs from a combined educational campaign and				
fundraising solicitation Check here following SOR 98 2 (ASC 958 739)				
following SOP 98-2 (ASC 958-720)		<u> </u>		

Form 990 (2014)
Part X Balance Sheet

	`	Check if Schedule O contains a response or note to any line in this Par			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	59,998	1	114,354
	2	Savings and temporary cash investments	63,538	2	33,681
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	7,390	4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section		5	
	6	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			
ß		organizations (see instructions). Complete Part II of Schedule L		6	. <u> </u>
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
1	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or			
		other basis Complete Part VI of Schedule D 10a 5,272			
	b	Less: accumulated depreciation	2,593	10c	2,056
	11	Investments - publicly traded securities	152,386	11	156,546
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	. <u>-</u>	14	
	15	Other assets See Part IV, line 11	1,018		578
	16	Total assets. Add lines 1 through 15 (must equal line 34)	286,923		307,215
	17	Accounts payable and accrued expenses	10,646	17	10,818
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
jab		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		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	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	10,646	25	10 010
	26	Total liabilities. Add lines 17 through 25	10,646	26	10,818
es		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
JIC.	27	Unrestricted net assets	173,353	27	251,897
3al	28	Temporarily restricted net assets	102,924	28	44,500
Ď	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	276,277	33	296,397
_	34	Total liabilities and net assets/fund balances	286,923	34	307,215
				 -	Form 990 (2014

Form **990** (2014)

Form 990 (2014) Page 12 Part XI **Reconciliation of Net Assets** Check if Schedule O contains a response or note to any line in this Part XI 310,504 Total revenue (must equal Part VIII, column (A), line 12) 1 286,879 2 2 23,625 3 3 276,277 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 -3,505 5 6 6 7 7 8 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 296,397 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990: Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Consolidated basis Separate basis Both consolidated and separate basis 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight 2c X of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in X 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2014)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

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

OMB No 1545-0047 2014

Open to Public

Inspection

Name of the organization

Employer identification number

HEALTHY ENVIRONMENT ALLIANCE OF UTAH 84-1409393 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (iv) is the organization (described on lines 1-9 listed in your governing support (see other support (see above or IRC section instructions) instructions) document? (see instructions)) Yes No (A) (B) (C) (D) (E)

Scried	Jule A (Form 990 or 990-EZ) 2014						Fage Z
Par	Support Schedule for Orga (Complete only if you checke Part III. If the organization fai	d the box on	line 5, 7, or 8	of Part I or if the	he organizatio	n failed to qua	
Sec	tion A. Public Support	to quality a	1101 110 10010	110.00 DO.O11, p	nodo compio	10 1 411 111.7	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization'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		ļ. <u> </u>				
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 amount shown on line 11 column (f).						
6	Public support. Subtract line 5 from line 4			1		<u> </u>	Ļ
	tion B. Total Support	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
_	andar year (or fiscal year beginning in)	(a) 2010	(6) 2011	(6) 2012	(u) 2013	(e) 2014	(I) Total
7 8	Amounts from line 4						
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 VI)						
11	Total support. Add lines 7 through 10					 	
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is forganization, check this box and stop here	<u></u>					
Sec	tion C. Computation of Public Sup		· -			, , ,	
14	Public support percentage for 2014 (li					14	
15	Public support percentage from 2013					15	%
16a	331/3% support test - 2014. If the o						
b	this box and stop here. The organizate 33 1/3% support test - 2013. If the contect this box and stop here. The organization of the context this box and stop here.	organization did	l not check a b	ox on line 13 o	or 16a, and line	e 15 is 331/3%	or more,
	10%-facts-and-circumstances test - 2 10% or more, and if the organization Part VI how the organization meets to organization	2014. If the orgoneets the "facts-and-control organization of the "facts-and-control organization of the o	ganization did notes and circums circumstances" t	ot check a box stances" test, ch est. The organi	on line 13, 16 neck this box a zation qualifies	a, or 16b, and and stop here. It is as a publicly s	line 14 is Explain in supported
b	10%-facts-and-circumstances test - 2 15 is 10% or more, and if the orga Explain in Part VI how the organizati supported organization	anization meets on meets the '	s the "facts-an "facts-and-circu	d-circumstances mstances" test	" test, check t The organization	this box and stood on qualifies as	top here.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

<u>Sec</u>	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")	262,317	297,753	263,437	353,792	302,696	1,479,995
2	Gross receipts from admissions, merchandise					_	
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an	•	-				
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities					•	
·	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	262,317	297,753	263,437	353,792	302 696	1,479,995
	Amounts included on lines 1, 2, and 3	202,52.	23.7.33	200,10,	3337.32	302,030	2,1.3,333
<i>,</i> a	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						
8 8	Add lines 7a and 7b						
•	Public support (Subtract line 7c from						1,479,995
Sec	tion B. Total Support						2,473,333
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
		262,317	297,753	263,437	353,792	302,696	1,479,995
9 10a	Amounts from line 6				3337.52		
	payments received on securities loans,						
	rents, royalties and income from similar	121	2,070	11,488	9,211	4,303	27,193
.	Unrelated business taxable income (less		2,0.0			1,000	
b	section 511 taxes) from businesses						
	,						
_	acquired after June 30, 1975	121	2,070	11,488	9,211	4,303	27,193
	Add lines 10a and 10b		2,070	11,400	3,211	4,303	27,133
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 VI)					<u></u>	
13	Total support. (Add lines 9, 10c, 11,	262 430	200 000	274 225	262 002	306 000	1 507 100
	and 12)	262,438	299,823	274,925	363,003	306,999	
14	First five years. If the Form 990 is for						
	organization, check this box and stop here			· · · · · · · · · · · · · · · · · · ·	<u></u>		····
	tion C. Computation of Public Sup				-		00 1050 0
15	Public support percentage for 2014 (line 8						98.1958 %
16	Public support percentage from 2013 Sche			· · · · · · · · · · · · · · · · · · ·		16	98.3525 %
	tion D. Computation of Investmer						1 9042 %
17	Investment income percentage for 2014 (li					17	1.8042 %
18	Investment income percentage from 2013					18	1.6475 %
19 a	331/3% support tests - 2014. If the organization						
	17 is not more than 331/3%, check th						
b	33 1/3 % support tests - 2013. If the orga						_
	line 18 is not more than 331/3 %, check		_		•		
20	Private foundation. If the organization	did not check a	a box on line 1	4, 19a, or 19b	, check this bo	x and see insti	ructions 🕨 🔃

Part IV **Supporting Organizations**

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

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Par	t V.)		
Secti	on A. All Supporting Organizations	_	Tv	A1 =
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		Yes	No
2	class or púrpose, describe the designation. If historic and continuing relationship, explain Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	ļ	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
с 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		ļ. <u>.</u>
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	V Supporting Organizations (continued)			
	•		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		ļ	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u></u>
Section	on B. Type I Supporting Organizations		,- <u></u> -	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1_		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
Occin	on o. Type if cupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1_1_		
Section	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2		⊢'-		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Section	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instance of the organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions).			
				No
2	Activities Test. Answer (a) and (b) below.			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>			
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	<u>nization</u> :	<u> </u>				
1 Check here if the organization satisfied the Integral Part Test as a qualifying			structions. All			
other Type III non-functionally integrated supporting organizations must con Section A - Adjusted Net Income						
1 Net short-term capital gain	1		(optional)			
2 Recoveries of prior-year distributions	2	 -				
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3	4					
5 Depreciation and depletion	5		-			
6 Portion of operating expenses paid or incurred for production or	+*+		<u> </u>			
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7		-			
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
Aggregate fair market value of all non-exempt-use assets (see		· · · · · · · · · · · · · · · · · · ·				
instructions for short tax year or assets held for part of year):						
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other						
factors (explain in detail in Part VI)						
2 Acquisition indebtedness applicable to non-exempt-use assets	2		-			
3 Subtract line 2 from line 1d	3					
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,						
see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions)	6					
7 Check here if the current year is the organization's first as a non-functional	y-integra	ited Type III supporting	organization (see			
instructions).	y-iiil o gi c	itea Type iii supportiiit	, organization (See			

Part		Supporting Organizat	ilons (continuea)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organia	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
:	Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2014		
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
b				
С	Remainder Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if	:		
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)	_		
7	Excess distributions carryover to 2015. Add lines 3 _j	•		
	and 4c	_		
88	Breakdown'of line 7:			
а				
b				
С				
d	Excess from 2013			
ее	Excess from 2014			
			Cabadula	A (Farm 000 as 000 ET) 2044

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

Section 527 organizations Complete Part I-A only

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

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

Tax)	(see sepa	erate instructions), ther		y Tax) (see separate i	nstructions) or Form 990-l	EZ, Part V, line 35c (Proxy
			anizations Complete Part III.		T	
	e of orgai				' '	ntification number
			LLIANCE OF UTAH		84-14093	
			organization is exempt unde			nization.
1			organization's direct and indirect			
2						
3 		er hours		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	
Par	t I-B	Complete if the c	organization is exempt under	section 501(c)(3).		
1			cise tax incurred by the organizati			
2			cise tax incurred by organization r			
3			a section 4955 tax, did it file Form			
4a	Was a	correction made?				Yes No
_		" describe in Part IV.				
Par			organization is exempt unde		• , ,,	<u>3).</u>
1	Enter th	ne amount directly e	xpended by the filing organization	on for section 527 e	exempt function	
2			ng organization's funds contribute es			
3	line 17	b	enditures. Add lines 1 and 2 E			
4 5	Did the Enter the organize the am	filing organization file ne names, addresses ation made payment ount of political conf	e Form 1120-POL for this year? and employer identification numes. For each organization listed, eight or a political action committee	ber (EIN) of all secti nter the amount pai mptly and directly de	on 527 political organiz d from the filing organiz elivered to a separate po	Yes No ations to which the filing ration's funds Also enter olitical organization, such
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				_		
(2)						
(3)						
(4)	•			-		
(5)						
(6)						

_	edule C (Form 990 of 990-EZ) 2014			rage &
P	complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
A		belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend		oup member's
В	Check ▶ if the filing organization	checked box A and "limited control" provisi	ons apply.	
		ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group totals
18	Total lobbying expenditures to influence	867		
ŧ	Total lobbying expenditures to influence	a legislative body (direct lobbying) [147	
(: Total lobbying expenditures (add lines 1	a and 1b)	1,014	
(187,470	
•		d lines 1c and 1d) [188,484	
f	Lobbying nontaxable amount. Enter the	e amount from the following table in both		
	columns		37,697	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	9,424	
ł	Subtract line 1g from line 1a. If zero or le	ess, enter -0		
i	Subtract line 1f from line 1c If zero or le	ss, enter -0		
j	If there is an amount other than zero	on either line 1h or line 1i, did the organiza	tion file Form 4720	
	reporting section 4911 tax for this year?		<u></u>	Yes No
	•	4-Year Averaging Period Under Section 501(h)		
		section 501(h) election do not have to compl		ns below.
	See	the separate instructions for lines 2a through	2f.)	

	Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total				
2a Lobbying nontaxable amount	36,653	36,754	42,720	37,697	153,824				
b Lobbying ceiling amount (150% of line 2a, column (e))					230,736				
c Total lobbying expenditures	1,579	552	839	1,014	3,984				
d Grassroots nontaxable amount	9,163	9,189	10,680	9,424	38,456				
e Grassroots ceiling amount (150% of line 2d, column (e))					57,684				
f Grassroots lobbying expenditures	935	170	575	867	2,547				

Schedule C (Form 990 or 990-EZ) 2014

	(election under section 501(h)).	(a	<u> </u>	ſ	(b		
	each "Yes," response to lines 1a through 1ı below, provide in Part IV a detailed ription of the lobbying activity	Yes	No		Amo		
1	During the year, did the filing organization attempt to influence foreign, national, state or local			 -			
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
а	Volunteers?		X				
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	1			
C	Media advertisements?		X				
d	Mailings to members, legislators, or the public?		X				
е	Publications, or published or broadcast statements?		X				
f	Grants to other organizations for lobbying purposes?		x				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?		X				
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?		X				
j	Other activities? Total. Add lines 1c through 1:	-					
J 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912			1			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			-			
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	c)(5)	, or s	section	<u> </u>		
	501(c)(6).	,,,					
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	<u> </u>	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)					L	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes." Dues, assessments and similar amounts from members			1 1	, iine	3, IS	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amoun political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	٠.		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lob			.			
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			5			
Pai		• •] 3			
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated se instructions); and Part II-B, line 1. Also, complete this part for any additional information	gro	up lis	t); Part	II-A, li	nes 1	and
		-					
			_	<u> </u>			
					·		

Schedule C (Form 990 or 990-EZ) 2014 Part IV Supplemental Information (continued)						
Part IV	Supplemental Information (continued)					
	· · · · · · · · · · · · · · · · · · ·					
	A					
	· · · · · · · · · · · · · · · · · · ·					
	· <u> </u>	_				
	<u> </u>					
						
	· · · · · · · · · · · · · · · · · · ·					

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements
► Complete if the organization answered "Yes" to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

	al Revenue Service	► Information about Schedule	D (Form 990) and its instructions is at www.ir		Inspection
	of the organization			Employer identifie	cation number
		MMENT ALLIANCE OF UTAH		84-140939	3
Pa			rised Funds or Other Similar Funds or	Accounts.	
	Comple	te if the organization answered	I "Yes" to Form 990, Part IV, line 6.		
			(a) Donor advised funds	(b) Funds an	d other accounts
1	Total number at	end of year			-
2		of contributions to (during year)		_	
3		of grants from (during year)			
4		at end of year			
5	Did the organiza	ation inform all donors and donor	r advisors in writing that the assets held	in donor advised	1
	funds are the org	ganization's property, subject to th	e organization's exclusive legal control? .		Yes No
6	Did the organiza	ition inform all grantees, donors, a	and donor advisors in writing that grant for	unds can be used	i
	only for charitab	le purposes and not for the bene	fit of the donor or donor advisor, or for a	ny other purpose	,
	conferring imper	missible private benefit?	<u></u>		Yes No
Pa		ation Easements.			
	Complet	te if the organization answered	l "Yes" to Form 990, Part IV, line 7.		
1	Purpose(s) of co	enservation easements held by the	e organization (check all that apply)		
	Preservati	ion of land for public use (e.g , rec	reation or education) Preservation	of a historically in	mportant land area
	Protection	of natural habitat	Preservation	of a certified hist	oric structure
	Preservati	ion of open space			
2	Complete lines 2	2a through 2d if the organization h	eld a qualified conservation contribution in		
		e last day of the tax year.		Held at th	e End of the Tax Year
а	Total number of	conservation easements		2a	
b	Total acreage re	stricted by conservation easement	s	2b	
С	Number of conse	ervation easements on a certified	historic structure included in (a)	2c	
d	Number of cons	ervation easements included in (c) acquired after 8/17/06, and not on a		
	historic structure	listed in the National Register		2d	
3	Number of cons	ervation easements modified, trai	nsferred, released, extinguished, or termir	nated by the orga	anization during the
	tax year ▶				
4	Number of states	s where property subject to conse	ervation easement is located >		
5			garding the periodic monitoring, inspec		f C
			sements it holds?		└ Yes └ No
6	Staff and volunte	eer hours devoted to monitoring, in	nspecting, and enforcing conservation eas	sements during the	e year
	>				
7	Amount of exper	nses incurred in monitoring, inspe	cting, and enforcing conservation easeme	nts during the yea	r
	▶ \$				
8			e 2(d) above satisfy the requirements of se)(ı)
	and section 170((h)(4)(B)(ii)?			└─ Yes └─ No
9			conservation easements in its revenue and	,	•
			of the footnote to the organization's financ	ial statements tha	t describes the
		counting for conservation easeme			
Ра			of Art, Historical Treasures, or Othe	r Similar Asset	S.
		· · · · · · · · · · · · · · · · · · ·	"Yes" to Form 990, Part IV, line 8.		
1a	If the organization	on elected, as permitted under S	FAS 116 (ASC 958), not to report in its ar assets held for public exhibition, edu	revenue stateme	nt and balance shee
	public service, pr	rovide, in Part XIII, the text of the f	ootnote to its financial statements that des	scribes these item	S.
b			SFAS 116 (ASC 958), to report in its re		
	works of art, his	storical treasures, or other simil	ar assets held for public exhibition, edu	cation, or resea	rch in furtherance o
	•	rovide the following amounts relat	•		
					\$
2			rt, historical treasures, or other similar		ial gaın, provide the
			SFAS 116 (ASC 958) relating to these item		
a	Revenue include	d in Form 990, Part VIII, line 1		▶	\$
b	Assets included	in Form 990, Part X		<i>.</i> > :	\$

Par	t III Organizations Maintaining Coll	ections of Art, Hist	torical Treasures,	or Other Simil	ar Assets (continued)				
3									
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).								
а									
b									
C									
4	Provide a description of the organization's	s collections and expla	ain how they furthe	r the organization	's exempt ournose in Part				
	XIII	s concentration and expire	am now they raine	r the organization	a exempt purpose in rain				
5	During the year, did the organization solicit	or receive donations of	of art. historical treas	ures, or other simil	ar				
	assets to be sold to raise funds rather than								
Par	t IV Escrow and Custodial Arrangen	nents. Complete if the	ne organization an	swered "Yes" to I	Form 990, Part IV, line 9,				
	or reported an amount on Form	990, Part X, line 21.							
			-						
1 a	Is the organization an agent, trustee, custo								
	included on Form 990, Part X?				Yes No				
b	If "Yes," explain the arrangement in Part X	III and complete the fo	llowing table:						
					mount				
C	Beginning balance								
d	Additions during the year								
e f	Distributions during the year	• • • • • • • • • • • • • • • • • • • •	<u>1e</u>	9					
и 2 а	Ending balance	Form 000 Port V line	<u>1f</u>	unatadial apparent lie	Shille O Van I Na				
_	If "Yes," explain the arrangement in Part X								
Par									
		urrent year (b) Prio							
1a	Davis de la la	(2)	(6) 1110 ye	(4)	Caro back (b) t bar yours back				
b	Contributions		-						
	Net investment earnings, gains,	 							
	and losses								
d	Grants or scholarships								
e	Other expenditures for facilities								
	and programs								
	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column (a)) held as:					
a	Board designated or quasi-endowment	- 							
b		0.4							
С	Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2c sh	% 							
32			tion that are hold a	ad administrated for	the				
Ja	Are there endowment funds not in the possession of the organization that are held and administered for the								
	organization by: (i) unrelated organizations 3a(i)								
	(ii) related organizations				3a(ii)				
b									
4	Describe in Part XIII the intended uses of t								
Par	VI Land, Buildings, and Equipment.				 _				
	Complete if the organization and								
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value				
1a	Land								
b	Buildings								
C	Leasehold improvements		3,756	1,700	2,056				
d									
$\overline{}$	Other								
Tota	. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part	X, column (B), line 1	0(c))▶	2,056				

	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
1) Financi	al derivatives		Cost of elic-or-year marke	
	-held equity interests			
/A\				
(C)				
(D)			·	_
(E)			·	
_ <u>(F)</u>				
_(G)				
_ <u>(H)</u>				
	n (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		
Part VIII	Complete if the organization answ	ered "Yes" to Form 990	, Part IV, line 11c. See Form 990, F	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuate Cost or end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)	=			
	 n (b) must equal Form 990, Part X, col. (B) line 13) ▮			_
Part IX	Other Assets.		<u> </u>	
art ix	Complete if the organization answ	ered "Yes" to Form 990	, Part IV, line 11d. See Form 990, I	Part X, line 15.
	Complete if the organization answ	rered "Yes" to Form 990 a) Description	, Part IV, line 11d. See Form 990, I	Part X, line 15. (b) Book value
	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1) SALE	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1)SALE (2) (3)	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1) SALE (2) (3) (4)	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1)SALE (2) (3) (4) (5)	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1) SALE (2) (3) (4) (5) (6)	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1)SALE (2) (3) (4) (5) (6) (7)	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1)SALE (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answ		, Part IV, line 11d. See Form 990, I	(b) Book value
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answ (S TAX RECEIVABLE	a) Description		(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col	a) Description		(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answ (S TAX RECEIVABLE) umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ	(B) line 15.)		(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25.	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25.	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col Part X (1) Fede (2)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col Part X (1) Fede (2) (3)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col) Part X (1) Fede (2) (3) (4)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) rotal. (Col Part X (1) Fede (2) (3)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col Part X (1) Fede (2) (3) (4) (5)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col Part X (1) Fede (2) (3) (4) (5) (6)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)	, Part IV, line 11e or 11f. See Form	(b) Book value 578
(1)SALE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col Part X (1) Fede (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answ (S TAX RECEIVABLE umn (b) must equal Form 990, Part X, col Other Liabilities. Complete if the organization answ line 25. (a) Description of liability	(B) line 15.)vered "Yes" to Form 990	, Part IV, line 11e or 11f. See Form	(b) Book value 578

Page	4

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1		T	206 000
_	Total revenue, gains, and other support per audited financial statements	1	306,999
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	ł	
b	Donated services and use of facilities 2b	{	
C	Recoveries of prior year grants 2c	ļ	
d	Other (Describe in Part XIII.)	ł _	0 505
e	Add lines 2a through 2d	2e	-3,505
3	Subtract line 2e from line 1	3	310,504
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 4a	4	
b	Other (Describe in Part XIII.)	1	
_	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		310,504
Part		ırn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		206 070
1	Total expenses and losses per audited financial statements	1	286,879
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
þ	Prior year adjustments 2b	4 1	
C	Other losses 2C	4	
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d Subtract line 2a from line 1	2e	
	Subtract line 2e nom line 1	3	286,879
3	Amounto included on Form 000 Port IV line 25 but not on line 1:		
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
_	Investment expenses not included on Form 990, Part VIII, line 7b		
4 a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) 4b		
4 a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	4c	
4 a b c	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c 5	286,879
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lin	5 art V, line	

Schedule D (Fo	orm 990) 2014	Page 5
Part XIII	Supplemental Information (continued)	
•		
		·
		
		
		•
	_	
		
		
		
		<u> </u>
	•	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

20**14**Open to Public

OMB No 1545-0047

Open to Public Inspection

Employer identification number

HEAL	HEALTHY ENVIRONMENT ALLIANCE OF UTAH 84-1409393													
FORM	990	PART	_vi	SECTON E	3 LINE	12c s	SEE 2	ATTACH	ED S	CATEN	ÆNT			
FORM	990	PART	VI	SECTION	SCHEET	LE B	LIN	E 15a,	15b	SEE	ATTACHED	STAT	PEMENT	
FORM	990	PART	VI	SECTION	C LINE	19 5	SEE 2	ATTACH	ED S	CATEN	ÆNT			
FORM	990	PART	VI	SECTION	B LINE	11b	SEI	E ATTA	CHED	STAT	PEMENT			
FORM	990	PART	11:	I LINE 4	i SEE A	TTACI	HED :	STATEM	ENT					<u>-</u>
												_		
										_				
				-										
	_													
		•							_					
								-						

Name of the organization	Employer identification number
HEALTHY ENVIRONMENT ALLIANCE OF UTAH	84-1409393
•	