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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

_	<u>alend</u>	ar year 2014 or tax year beginning , a	ind ending				
	e of four				A Emplo	yer identification number	
					07	06E1022	
		ETH C. SAVAGE FAMILY FOUNDAT				-0651832	
		street (or P O box number if mail is not delivered to street address)	Ro	om/suite		ione number (see instructions L – 944 – 6608	5)
		V LEGACY CENTER WAY			801	L-344-00U0	
	or town,	state or province, country, and ZIP or foreign postal code ALE UT 84047			C If exem	nption application is pending,	check here
			m of a formar public ob	ortu	D 4 For	reign organizations, check he	<u></u> ▶□
3 C	heck a		n of a former public ch	iarity			
		Final return Amended				reign organizations meeting tl % test, check here and attach	
		Address change Name cha	<u> </u>		05	w test, cribox fiere and attack	Computation
		ype of organization 🕱 Section 501(c)(3) exempt private	foundation		•	te foundation status was term	ninated under
	ection		e private foundation		section	1 507(b)(1)(A), check here	
Fa	ır marl	ket value of all assets at J Accounting method	X Cash Acci	rual		oundation is in a 60-month te	_
en	d of ye	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere
line	e 16) 🕽	\$ 341,010 (Part I, column (d) must	be on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net invi	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	incon		псоте	purposes (cash basis only)
			75,000			· · · · · · · · · · · · · · · · · · ·	(Gasir Dasis Offiy)
	1	Contributions, gifts, grants, etc., received (attach schedule)	73,000				·····
1	2	Check ▶ ☐ If the foundation is not required to attach Sch. B	909		909		
	3	Interest on savings and temporary cash investments	309		303		
	4	Dividends and interest from securities			1	•	
	5a	Gross rents					
စ္	b	Net rental income or (loss)					
ĭ	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a			0		
Ē	7	Capital gain net income (from Part IV, line 2)			<u> </u>	0	
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	75,909	PEC	909	0	
ဖွ	13	Compensation of officers, directors, trustees, etc	/3 /		-VED		<u> </u>
enses	14	Other employee salaries and wages		APR .	***************************************	- 7	
ben	15	Pension plans, employee benefits		00	2010-	78/	
Exp	16a	Legal fees (attach schedule)		GOLAX	6415	<u>~ / / / / / / / / / / / / / / / / / / /</u>	
(a)	b	Accounting fees (attach schedule) STMT 1	1,130		1,130	2/	-
and Administrative	С	Other professional fees (attach schedule)			W a c	/	<u> </u>
tra	17	Interest			"Salahin	1	
is	18	Taxes (attach schedule) (see instructions)					
ni l	19	Depreciation (attach schedule) and depletion					
þ	20	Occupancy					
4 P	21	Travel, conferences, and meetings					
Ē	22	Printing and publications	<u> </u>				
	23	Other expenses (att sch) STMT 2	150		150		
Operating	24	Total operating and administrative expenses.				_	_
673		Add lines 13 through 23	1,280	******	1,280	0	
ď	25	Contributions, gifts, grants paid	38,950				38,950
J	26	Total expenses and disbursements. Add lines 24 and 25	40,230		1,280	0	38,950
	27	Subtract line 26 from line 12					
			35,679	l	1		
	а	Excess of revenue over expenses and disbursements				•••••	
		Net investment income (if negative, enter -0-)			0	0	

Fo	rm 990	PF (2014) KENNETH C. SAVAGE FAMILY FOUR	ITACN	ON 87-065183	32	Page 2
	Part I	Ralance Sheets Attached schedules and amounts in the description colur	πn	Beginning of year		of year
		Should be for end-or-year amounts only (See instruction	s)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		205 221	241 010	341 010
	2	Savings and temporary cash investments		305,331	341,010	341,010
١	3	Accounts receivable ▶				
-		Less allowance for doubtful accounts ▶				
- 1	4	Pledges receivable ▶		1		
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				_
	7	Other notes and loans receivable (att. schedule)	^			
H	ı	Less allowance for doubtful accounts ▶	0			
হ	8	Inventories for sale or use		<u> </u>	····	
Assets	9	Prepaid expenses and deferred charges				<u> </u>
څ	10a	Investments – U S and state government obligations (attach schedule)		<u> </u>		
- 1	b	Investments – corporate stock (attach schedule)		 		<u> </u>
	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch) ▶				<u> </u>
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
1	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach sch.)	,	<u> </u>		
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the		305,331	341,010	341,010
4		instructions Also, see page 1, item I)		303,331	341,010	341,010
	17	Accounts payable and accrued expenses				
G	18	Grants payable				
abilities	19	Deferred revenue				
≣	20	Loans from officers, directors, trustees, and other disqualified persons		+	·	
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)	,		····	
	22	Other liabilities (describe)	0	0	
4	23_	Total liabilities (add lines 17 through 22)		0		
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		Į		
8						
ă	24	Unrestricted				
Net Assets or Fund Balances	25	Temporarily restricted				•
힏	26	Permanently restricted	► X			
킖		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
Ы						
হ	27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund		-		
šš	28			305,331	341,010	
Ž	29	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions)		305,331	341,010	7
ş	30	Total liabilities and net assets/fund balances (see		337,332		
	31			305,331	341,010	
۲	Dart I	instructions) Analysis of Changes in Net Assets or Fund Balar	nces	300,002		<u> </u>
	Part I	net assets or fund balances at beginning of year – Part II, column (a), li		ist agree with		<u> </u>
7		net assets or fund balances at beginning of year – Part II, Column (a), ii of-year figure reported on prior year's return)	55 (1110	o. ug.oo mai	1	305,331
•		•			2	35,679
		r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶			3	1
		lines 1, 2, and 3			4	341,010
		eases not included in line 2 (itemize) ▶			5	·
		net assets or fund balances at end of year (line 4 minus line 5) – Part II	, column ((b), line 30	6	341,010

	nd Losses for Tax on Investm tibe the kind(s) of property sold (e.g., real estate,	ent Income	(b) How		Date acquired	(d) Date sold
	rehouse, or common stock, 200 shs MLC Co)			rchaea I	mo day, yr)	(mo , day, yr)
1a N/A						
<u>b</u>						
С						
d					_	
		1				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		Cost or other basis s expense of sale			(f) minus (g)
<u>a</u>		ļ		 -		
<u>b</u>						
<u>c</u>		· · · · —	<u> </u>			
<u>d</u>					_	
Complete only for assets showing	gain in column (h) and owned by the f	oundation on 12	2/31/69			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k)	Excess of col (i)		col (k), but n	o! (h) gain minus ot less than -0-) or (from co! (h))
a						
b						
С						
d						
е				<u></u>		
2 Capital gain net income or (net ca	If gain, also enter in If (loss), enter -0- in		}	2		
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)				
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss),	enter -0- ın]			
Part I, line 8	der Section 4940(e) for Reduc		<u> </u>	3		<u></u>
	is part blank ion 4942 tax on the distributable amour ify under section 4940(e) Do not comp	* *	the base period	l?		Yes X No
1 Enter the appropriate amount in e	each column for each year, see the inst	ructions before	making any enti	ies		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) It value of noncharita	ble-use assets		(d) stribution ratio) divided by cot (c))
2013	31	,320		369,348		0.084798
2012		,850		252,285		0.118319
2011		,495		201,911		0.146079
2010		,905	·	174,205		0.303694
2009	85	,829		178,090		0.481942
2 Total of line 1, column (d)					2	1.134832
<u> </u>	5-year base period – divide the total on as been in existence if less than 5 year		y the		3	0.226966
4 Enter the net value of noncharitab	ple-use assets for 2014 from Part X, line	∋ 5			4	325,039
5 Multiply line 4 by line 3					5	73,773
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)				6	
7 Add lines 5 and 6	,				7	73,773
8 Enter qualifying distributions from	Part XII, line 4				8	38,950
	I line 7, check the box in Part VI, line 1t	o, and complete	that part using	a 1% tax rate S	ee the	

Form	990-PF (2014) KENNETH C. SAVAGE FAMILY FOUNDATION 87-0651832			P;	age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	·····			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	-			
	here ▶ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				0
6	Credits/Payments				
а	2014 estimated tax payments and 2013 overpayment credited to 2014				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities	-		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No_
	participate or intervene in any political campaign?		1a	-	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				x
	Instructions for the definition)?		1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities		4.	ı	X
C	Did the foundation file Form 1120-POL for this year?		1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers \$		2	Ì	X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				- 12
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		2	- 1	X
	·		4a		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4b		
b	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-1,	5		х
5	If "Yes," attach the statement required by General Instruction T				
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
6	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	х	
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
va	UT	İ		1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
IJ	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
•	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
			QC	n_PF	(2014)

Form	990-PF (2014) KENNETH C. SAVAGE FAMILY FOUNDATION 87-0651832			<u>Pa</u>	age 5
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	l	13	<u> </u>	
	Website address ► NONE				_
14	The books are in care of ▶ JOHN K. SAVAGE Telephone no ▶	801-9	44-	660	8
	901 W LEGACY CENTER WAY				
	Located at F 1115 Villa	84047			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here				▶
	and enter the amount of tax-exempt interest received or accrued during the year	5	-		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	ı		Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If				
	"Yes," enter the name of the foreign country			1	
_Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)	₹ ₽			
	(1) Eligago III the sale of exercises a feet of	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ਓ			
	disquamica porson	X No X No			
	(b) Turnish goods, controls, or recommon to (or strong to the control of the cont				
	(4) 1 dy compensation to, or pay or removable the expenses	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	X No			
	the benefit of add of a diodaminal perform,	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				
	foundation agreed to make a grant to or to employ the official for a period after	X No			
	Communication of Government of the Communication of	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	N/A	1b		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		-15		
	Organizations relying on a current notice regarding disaster assistance check here				
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	N/A	1c	1	
_	were not corrected before the first day of the tax year beginning in 2014?	-17	10		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and				
а	6e, Part XIII) for tax year(s) beginning before 2014?	X No			
	lf "Yes." list the years ▶ 20 , 20 , 20 , 20				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
D	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to				
	all years listed, answer "No" and attach statement – see instructions)	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
•	► 20 , 20 , 20 , 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
	at any time during the year?	X No			
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or				
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	_			
	foundation had excess business holdings in 2014)	N/A	3b	L	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	L	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b	<u> </u>	X
		F	orm 9 9	90-PF	(2014)

orm	990-PF (2014) RENNETH C. SAVAGE FAMILI FOUNDA					Pa	age o
_	art VII-B Statements Regarding Activities for Which Form	1720 May Be R	Required (cont	inued)			
5a	During the year did the foundation pay or incur any amount to			, .			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4		'	res X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to	o carry on,	п,	.			
	directly or indirectly, any voter registration drive?		—	res X No res X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		L ,	res X No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in		res X No			
	section 4945(d)(4)(A)? (see instructions)	. advantional		res 🔀 No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational		res X No			
	purposes, or for the prevention of cruelty to children or animals?	ar the eventions d		res <u>I</u> NO			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under			N/A	5b	ĺ	
	Regulations section 53 4945 or in a current notice regarding disaster assistance				35		
_	Organizations relying on a current notice regarding disaster assistance check he If the answer is "Yes" to question 5a(4), does the foundation claim exemption from						
С		ill the tax	N/A 🗍	res No			
	because it maintained expenditure responsibility for the grant?		21/22	les [110			
٥-	If "Yes," attach the statement required by Regulations section 53 4945–5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pe	y premiums					
6a	on a personal benefit contract?	ly premiums	\Box	res X No			
L	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	rsonal benefit contr		163 [22] 110	6ь	ŀ	X
b	If "Yes" to 6b, file Form 8870	Sonai Denent Conti	aut.		0.0		
70	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		res X No			
	If "Yes," did the foundation receive any proceeds or have any net income attribute			N/A	7b	Ì	
_	Information About Officers, Directors, Trustees, Fo	undation Man	agers. Highly				
	and Contractors						
1 1	ist all officers, directors, trustees, foundation managers and their compens	ation (see instruc	tions).			_	
		(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name and address	hours per week	(If not paid,	employee benefit plans and deferred		ense ac r allowar	
		devoted to position	enter -0-)	compensation	- Out-to	anovra	
SE	E STATEMENT 3						
			\ <u></u>		<u> </u>		
				İ			
					ļ		
					ļ		
					<u> </u>		
		<u> </u>					
2	Compensation of five highest-paid employees (other than those included of	on line 1 – see ins	tructions). If nor	e, enter			
	"NONE."		1.		_		
		(b) Title, and average	_	(d) Contributions to employee benefit	(e) Ex	pense ac	count
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowa	
				compensation	├		
NC	DNE						
					┼		
		<u> </u>		_	 -	_	
				1			
				-	1		
		+	 	 	 		
T = 4 -	Il number of other employees paid over \$50,000	.1	<u> </u>	<u> </u>		. T	0
ota	il liumber of other employees paid over \$50,000				om 99	n-DE	
				,	JIIII 9	I	(2014)

Form 990-PF (2014) KENNET	H C. SAVAGE FAMILY FOUNDATI	ON 87-0651832	Page 7
	About Officers, Directors, Trustees, Found		Employees,
	tors (continued)		
3 Five highest-paid independ	lent contractors for professional services (see instr	uctions). If none, enter "NONE."	
	and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
		İ	
Total number of others receiving or	ver \$50,000 for professional services		
Part IX-A Summary of	f Direct Charitable Activities		
	table activities during the tax year. Include relevant statistical information if, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
·			
2			
			
3			
			
4			
Parally D. Comment	5 Decrees Polated Investments (see instru	·otions)	<u> </u>
	f Program-Related Investments (see instru	ictions)	<u> </u>
1 N/A	restments made by the foundation during the tax year on lines 1 and 2		Amount
I N/A			
2			†
-			
All other program-related investments. See i	nstructions		
3			

Total. Add lines 1 through 3

		<i>i</i> 1	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	<u>38,950</u>
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	38,950

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2014)

Pa	art XIII Undistributed Incom	e (see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part	XI,	Corpus	Years prior to 2013	2013	2014
	line 7	ļ				16,252
2	Undistributed income, if any, as of the e	end of 2014				
	Enter amount for 2013 only	-				
b	Total for prior years: 20 , 20				·····	
3	Excess distributions carryover, if any, to					
	From 2009	76,948				
	From 2010	44,201				
-	From 2011	19,399				
-	From 2012	17,236				
е	From 2013	12,853	170,637			
f	<u>~</u>	 	170,637			
4	Qualifying distributions for 2014 from Pa	art XII,				
	line 4 ▶ \$ 38,950					
	Applied to 2013, but not more than line	Tri i			······································	
þ	Applied to undistributed income of prior	years				
	(Election required – see instructions)	.,				
С	Treated as distributions out of corpus (E	ection				
	required – see instructions)	 				16,252
	Applied to 2014 distributable amount		22,698			10,232
	Remaining amount distributed out of co	•	22,090			
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))	İ				
6	Enter the net total of each column as					
_	indicated below:	oct line 5	193,335			
	Corpus Add lines 3f, 4c, and 4e Subtra		250,000		·····	
D	Prior years' undistributed income Subtra	acı				
_	line 4b from line 2b	huted				
C	Enter the amount of prior years' undistri income for which a notice of deficiency					
	been issued, or on which the section 49					
	tax has been previously assessed	42(a)				
	Subtract line 6c from line 6b Taxable	-				
u	amount – see instructions					
_	Undistributed income for 2013 Subtract	t line				
-	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2014 Subtract	tlines				
•	4d and 5 from line 1. This amount must					
	distributed in 2015					0
7	Amounts treated as distributions out of	comus				
•	to satisfy requirements imposed by sect					
	170(b)(1)(F) or 4942(g)(3) (Election may					
	required—see instructions)	,				
8	Excess distributions carryover from 200	9 not	-			
-	applied on line 5 or line 7 (see instruction		76,948			
9	Excess distributions carryover to 201	1				
-	Subtract lines 7 and 8 from line 6a		116,387			
10	Analysis of line 9	ľ				
a	Excess from 2010	44,201				
b	Excess from 2011	19,399				
c	Excess from 2012	17,236				
d	Excess from 2013	12,853				
e	Excess from 2014	22,698				
						- 990 PE

************	1990-PF (2014) KENNETH C. S					Page 10
	ert XIV Private Operating For				<u> </u>	
1a	If the foundation has received a ruling or		<u>=</u>	iting		
	foundation, and the ruling is effective for		•			
b	Check box to indicate whether the found		ating foundation descr T		42(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
	investment return from Part X for			}		
	each year listed		<u> </u>	 		
b	85% of line 2a		 	 		
С	Qualifying distributions from Part XII,					
	line 4 for each year listed		 	 		
d	Amounts included in line 2c not used directly		ľ	ľ		
	for active conduct of exempt activities			 		
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c	 				
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test – enter					
	(1) Value of all assets		ļ			ļ
	(2) Value of assets qualifying under		ļ	}		J
	section 4942(j)(3)(B)(i)		<u> </u>			
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed	·			<u> </u>	
C	"Support" alternative test – enter		1	ļ		
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					Ī
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)			<u> </u>	·	<u></u>
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					<u></u>
Pa	rt XV Supplementary Inform	nation (Complete	this part only if	the foundation ha	d \$5,000 or more	e in assets at
	any time during the ye	<u>ear – see instruc</u>	tions.)			
1	Information Regarding Foundation Ma	nagers:				
а	List any managers of the foundation who	have contributed mor	re than 2% of the total	contributions received t	y the foundation	
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000)	(See section 507(d)(2))	
	NONE					
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally large	portion of the	
	ownership of a partnership or other entity) of which the foundar	tion has a 10% or grea	ter interest		
	NONE					
2	Information Regarding Contribution, G	irant, Gift, Loan, Scl	nolarship, etc., Progra	ams:		
	Check here ▶ 🗓 if the foundation only	makes contributions	to preselected charital	ole organizations and de	oes not accept	
	unsolicited requests for funds. If the found	dation makes gifts, gi	ants, etc (see instruct	ions) to individuals or o	rganizations under	
	other conditions, complete items 2a, b, c	and d				
а	The name, address, and telephone numb	er or e-mail address	of the person to whom	applications should be	addressed	
	N/A					
						<u> </u>
b	The form in which applications should be	submitted and inform	nation and materials the	ey should include		
	N/A					
С	Any submission deadlines					
_	N/A					
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable fi	elds, kinds of institution	s, or other	
	factors	, , , , , , , , , , , , , , , , , , ,	·			
	N/A					
DAA						Form 990-PF (2014)

Part XV Supplementary Information (co	ontinued)		 	
3 Grants and Contributions Paid During the		-uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE STATEMENT 4				
				22 25
				38,950
			1	
			1	
			-	
			1	
Total		l.	▶ 3a	38,95
b Approved for future payment	····	T		
N/A				
Total			▶ 3b	
				222 55

F	art XVI-A	Analysis of Income-Producing Acti	vities				
		unts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(-1
	5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue			3000		(See instructions)
	а				ļ		 -
							
							<u> </u>
	d						
					<u> </u>		
				<u></u>	ļ		
	g Fees and	d contracts from government agencies			<u> </u>		
	-	dues and assessments			-		
3		avings and temporary cash investments			14	909	
4		nd interest from securities					
5		come or (loss) from real estate		[ļ		
		anced property			<u> </u>		
		-financed property	ļ 	-	 -		
		come or (loss) from personal property			<u> </u>		
	Other invest				1		
	*	s) from sales of assets other than inventory			 		
		or (loss) from special events			-		-
		or (loss) from sales of inventory					-
11		ue a					
					1		
					1		
					 		
42	e	d columns (b), (d), and (e)		0	1	909	0
		ne 12, columns (b), (d), and (e)		<u> </u>		13	
		in line 13 instructions to verify calculations)					
-	Part XVI-B		complishm	ent of Exempt P	urpose	es	
	Line No.	Explain below how each activity for which income i	s reported in o	column (e) of Part XVI-	A contrib	outed importantly to the	
_	V	accomplishment of the foundation's exempt purpor	ses (other than	n by providing funds to	r such p	urposes) (See instruct	ions)
	N/A						
_						· · ·	
_			· ·				
							_ · · · · · · · · · · ·
				<u> </u>			
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SALT LAKE CITY, UT 84101

		Information Reg	-	ansfers To and	d Transaction	ns and Relation	nships Wit	h Noncharital	ole				
		Exempt Organiza					 				<u> </u>		
	_	anization directly or ind								Yes	No		
	in section 5	01(c) of the Code (other	er than secti	on 501(c)(3) organı	izations) or in sec	ction 527, relating to	o political				ĺ		
	organization	ns?											
а	Transfers fr	om the reporting found	ation to a n	oncharitable exemp	ot organization of						i		
	(1) Cash								1a(1)	-	<u>X</u>		
	(2) Other a	ssets							1a(2)		X		
b	Other transa	actions											
	(1) Sales of	f assets to a noncharit	able exemp	torganization					1b(1)		$\frac{\mathbf{x}}{\mathbf{x}}$		
	(2) Purchas	ses of assets from a no	oncharitable	exempt organization	on				1b(2)				
	(3) Rental of	of facilities, equipment,	or other as	sets					1b(3)				
	(4) Reimbu	rsement arrangements	3					1b(4)					
	(5) Loans of	r loan guarantees							1b(5)		<u>X</u>		
	(6) Perform	nance of services or me	embership o	or fundraising solicit	ations				1b(6)		<u> </u>		
С	Sharing of f		1c		X								
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market													
	value of the	goods, other assets, o	or services g	jiven by the reportin	ng foundation. If t	he foundation rece	ived less than	faır market					
	value in any	transaction or sharing	arrangeme	nt, show in column	(d) the value of	the goods, other as	sets, or service	es received					
(;	a) Line no	(b) Amount involved	(c) Nam	ne of noncharitable exemp	t organization	(d) Description	on of transfers, tra	nsactions, and sharing	ırrangemen	ts			
N/F	<u> </u>												
						·							
				-									
		,											
										-			
2a	Is the found	ation directly or indirec	tly affiliated	with, or related to,	one or more tax-	exempt organization	ns						
		section 501(c) of the							Ye	s X	No		
b		nplete the following sc									<u> </u>		
		a) Name of organization		(b) Type of or	rganization		(c) Descrip	tion of relationship					
N	I/A												
	•												
		··											
	·							-					
	Under per	nalties of perjury, I declare th	at I have exam	ined this return, including	accompanying sche	dules and statements, a	nd to the best of	ny knowledge and belie	f, it is true,	_			
	correct, a	nd complete Declaration of	oreparer (other	than taxpayer) is based	on all information of v	vnich preparer has any k	nowleage	May the IRS dis	cuss this ref	tum			
Sign	,	1 1	· /			, /		with the prepare			¬ "		
lere				_	1/	/21/ -		(see instruction	s)? X \	res	No		
		/ who !	You		- 17/	2///5	PRES	IDENT					
	S/gn	ature of officer or trustee			Date		Title						
	Print/Tv	/pe preparer s name			Preparer's signatur	8		Date		Check	<u> </u>		
	4					, ,	1	- 1			r		
aid	RICH	ARD N. GREENE	, CPA		Buch	red N. X	huse -	04/2	23/15		•		
repa	arer Firm's i			REYNOLDS,	LLC	-(0143	259	<u> </u>		
Jse (Only			GRANDE ST	STE 200				-002				
	'""			CITY, UT	84101		ľ		1-269				

Phone no

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Employer identification number

2014

KENNETH C. S	SAVAGE FAMILY FOUNDATION	87-0651832									
Organization type (check	cone).										
Filers of:	Section:										
Form 990 or 990-EZ	501(c)() (enter number) organization										
	4947(a)(1) nonexempt charitable trust not treated as a private foun	ndation									
	527 political organization										
Form 990-PF	X 501(c)(3) exempt private foundation										
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion									
	501(c)(3) taxable private foundation										
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and	d a Special Rule See									
General Rule											
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contribut y or property) from any one contributor. Complete Parts I and II. See instruction contributions										
Special Rules											
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 and that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 C	or 990-EZ), Part II, line of the greater of (1)									
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reg the year, total contributions of more than \$1,000 exclusively for religious, characteristics, or for the prevention of cruelty to children or animals. Complete	aritable, scientific,									
contributor, during contributions tota during the year fo General Rule ap	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reg the year, contributions exclusively for religious, charitable, etc., purposes, but led more than \$1,000. If this box is checked, enter here the total contributions or an exclusively religious, charitable, etc., purpose. Do not complete any of the plies to this organization because it received nonexclusively religious, charitable, more during the year.	ut no such s that were received ne parts unless the									
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does not file t must answer "No" on Part IV, line 2, of its Form 990, or check the box on line 2 to certify that it does not meet the filing requirements of Schedule B (Form	e H of its Form 990-EZ or on its									

Name of organization

KENNETH C. SAVAGE FAMILY FOUNDATION

Employer identification number 87-0651832

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SAVAGE SERVICES CORPORATION 901 W LEGACY CENTER WAY MIDVALE UT 84047	\$ 75,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO.	rame, address, and En - v	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

_							
		Charitable Purpose	0		Charitable Purpose		o o
	unting Fees	Adjusted Net		r Expenses	Adjusted		٥ «
ederal Statements	990-PF, Part I, Line 16b - Accounting Fees	Net Investment	\$ 1,130	Part I, Line 23 - Other	Net Investment		\$ 150
Federal	Statement 1 - Form 990-PF, P	Total	\$ 1,130	Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses	Total		\$ 150
87-0651832	State	Description	ACCOUNTING FEES TOTAL	Stat	Description	EXPENSES BOARD MEETING COSTS	TOTAL

87-0651832	Federal St	atements	
Form 99	90-PF, Part XV, Line 1a - Manage	rs Who Contributed Ove	er 2% or \$5.000
<u>1 01111 04</u>	Name of Manager		ount
NONE TOTAL		\$\$ \$	0
Forn	n 990-PF, Part XV, Line 1b - Man	agers Who Own 10% or	More Stock
	Name of Manager		ount
NONE TOTAL		\$\$ \$	0

87-0651832

Statement 4 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Federal Statements

	Amount		000 ' T	750		7,500		2,000	1	2,000		1,000	1	6,500		200		4,000	0	2,500		007'9	2,000	38,950
	Purpose																							
ļ			UNKESTRICIEU	UNRESTRICTED		UNRESTRICTED		UNRESTRICTED		UNRESTRICTED		UNRESTRICTED		UNRESTRICTED		UNRESTRICTED		UNRESTRICTED		UNRESTRICTED	1 C C C C C C C C C C C C C C C C C C C	ONKESTRICTED	UNRESTRICTED	
Address	hip Status	575 NORTH 100 EAST	SOUTH FOOTHILL DRIVE		389		EST TEMPLE STREET		69TH AVE N		UNTSMAN WAY		PO BOX 971382		WEST 3300 NORTH		AST 3900 SOUTH		ST100 SOUTH #605		EST 940 NORTH		x 1103	
	Relationship	575 NG	525 80)	ASB C389		210 WEST		1200 69TH		500 HUNT		PO BO		1582 WES		670 EAST		10 WEST1		1 280 WEST		PO BOX 1	
Name	Address	ALPINE SCHOOL FOUNDATION	AMERICAN FORK UT 84003	SALT LAKE CITY UT 84113	BRIGHAM YOUNG UNIVERSITY	PROVO UT 84602	CALIFORNIA COMMUNITY FOUNDATION	LOS ANGELES CA 90012	GOSPEL HEALS INTERNATIONAL	BROOKLYN CENTER MN 55430	HUNTSMAN CANCER FOUNDATION	SALT LAKE CITY UT 84108	IN HARMS WAY	OREM UT 84097	LINCOLN ACADEMY CHARTER SCHOOL	PLEASANT GROVE UT 84062	MARCH OF DIMES	SALT LAKE CITY UT 84107	OUELESSEBOUGOU ALLIANCE	SALT LAKE CITY UT 84101	PROVO SCHOOL DISTRICT FOUNDATION	PROVO UT 84604	TIMPANOGOS SYMPHONY ORCHESTRA AMERICAN FORK UT 84003	TOTAL