Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning January 1, 2014, and ending December 31, 20 14

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization Snow College Foundation

Doing business as

Number and street (or P O box if mail is not delivered to street address) 150 E College Ave — Room/suite

City or town, state or province, country, and ZIP or foreign postal code Ephraim, UT 84627

D Employer identification number 94-2785555

E Telephone number 435-283-7061

G Gross receipts $ 924,706

F Name and address of principal officer Rosie Connor 150 E College Ave

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www snow edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation 1996 **M** State of legal domicile UT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities Provide support activities for the benefit of Snow College

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	701,768	922,926
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	1,780
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	701,768	924,706
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,048,129	633,874
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	22,079	35,076
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,070,208	668,951
	19	Revenue less expenses. Subtract line 18 from line 12	(2,368,440)	255,756
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1,033,596	1,283,884
	21	Total liabilities (Part X, line 26)	51,095	45,473
	22	Net assets or fund balances. Subtract line 21 from line 20	982,501	1,238,411

RECEIVED
MAY 21 2015
OGDEN, UT
IRS-OSC

SCANNED JUN 09 2015

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ RMConnor — Signature of officer — Date 5-15-15

▶ Rosie M. Connor, Executive Director — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

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Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

Provide support activities for the benefit of Snow College

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ including grants of $) (Revenue $)

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✓	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		✓
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		✓
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		✓
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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		✓
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV.*	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV.*	16		✓
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		✓
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		✓
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		✓
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		✓
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		✓
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	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	✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the 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	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter.					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter.					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**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.**					
a	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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 15			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		✓
6	Did the organization have members or stockholders?		6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	✓	
b	Each committee with authority to act on behalf of the governing body?		8b	✓	
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 Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	✓	
13	Did the organization have a written whistleblower policy?	13		✓
14	Did the organization have a written document retention and destruction policy?	14		✓
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	15a		✓
b	Other officers or key employees of the organization	15b		✓
	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?	16a		✓
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?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ UT

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ 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 policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records. ▶

Rosie Connor, 150 E College Ave , Ephraim, UT 84627

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) Randy Cox Chair	1			✓				0	0	0
(2) Gary Carlston Secretary	2			✓				0	0	0
(3) Spencer Hill Treasurer	2			✓				0	0	0
(4) Doug Barton Board Member	1		✓					0	0	0
(5) Eddie Cox Board Member	1		✓					0	0	0
(6) Dan Jorgenson Board Member	1		✓					0	0	0
(7) LeAnn Stoddard Board Member	1		✓					0	0	0
(8) David Blackham Board Member	1	✓						0	0	0
(9) Leonard Blackham Board Member	1	✓						0	0	0
(10) Michael Carlston Board Member	1	✓						0	0	0
(11) Mark Howard Board Member	1	✓						0	0	0
(12) Isaac Jacobson Board Member	1	✓						0	0	0
(13) Mark Jones Board Member	1	✓						0	0	0
(14) Dave Parrish Board Member	1	✓						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(15) Jim Tatton Board Member	1	✓						0	0	0
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										

	(D)	(E)	(F)
1b Sub-total . . . ▶	0	0	0
c Total from continuation sheets to Part VII, Section A . . . . ▶	0	0	0
d Total (add lines 1b and 1c) . . . ▶	0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		✓
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		✓
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		✓

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

			(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 Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	921,048				
g Noncash contributions included in lines 1a-1f: $ 1,878						
h **Total.** Add lines 1a–1f ▶			921,048			
Program Service Revenue		Business Code				
2a						
b						
c						
d						
e						
f All other program service revenue						
g **Total.** Add lines 2a–2f ▶						
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) ▶			1,780	1,780		
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties ▶						
	(i) Real	(ii) Personal				
6a Gross rents						
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) ▶						
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss) ▶						
8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	a					
b Less: direct expenses	b					
c Net income or (loss) from fundraising events ▶						
9a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d All other revenue						
e **Total.** Add lines 11a–11d ▶						
12 **Total revenue.** See instructions. ▶			924,706	1,780		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	633,874	633,874		
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 individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members . .				
5 Compensation of current officers, directors, trustees, and key employees .				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages . . .				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits .				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees . .				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion .				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates .				
22 Depreciation, depletion, and amortization	28,570	28,570		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Utilities	4,090	4,090		
b Mortgage	2,416	2,416		
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	668,951	668,951		
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) . .				

Part X Balance Sheet

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

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			141,258	1	346,702
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			120,979	3	76,113
	4	Accounts receivable, net				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				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 organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	799,929			
	b	Less accumulated depreciation	10b	38,597	771,359	10c	761,332
	11	Investments—publicly traded securities			0	11	99,737
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			1,033,596	16	1,283,884
Liabilities	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, 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			51,095	23	45,473
	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				25	
	26	**Total liabilities.** Add lines 17 through 25			51,095	26	45,473
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets				27	
	28	Temporarily restricted net assets			1,033,596	28	1,283,884
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			982,501	33	1,283,884
	34	Total liabilities and net assets/fund balances			1,033,596	34	1,238,411

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	924,706
2	Total expenses (must equal Part IX, column (A), line 25)	2	668,951
3	Revenue less expenses. Subtract line 2 from line 1	3	255,756
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	982,501
5	Net unrealized gains (losses) on investments	5	154
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,238,411

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990. ☐ Cash ☐ Accrual ☐ Other 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?	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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		✓
	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 of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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.	3b		

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
Snow College Foundation

Employer identification number
94-2785555

Part I **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).**
7 ☐ 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.)
9 ☐ An organization that normally receives: (1) more than 33⅓% 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 33⅓% 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).**
11 ☐ 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.

a ☐ **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**

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**

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.**

d ☐ **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.**

e ☐ 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.

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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.")		639,716	650,093	701,768	922,926	2,914,503
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		639,716	650,093	701,768	922,926	2,914,503
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)						1,485,452
6 **Public support.** Subtract line 5 from line 4						1,429,051

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4		639,716	650,093	701,768	922,926	2,914,503
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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						2,914,503

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2013 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

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.)

Section A. Public Support

Calendar 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 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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) | 15 | %

16 Public support percentage from 2013 Schedule A, Part III, line 15 | 16 | %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f)) | 17 | %

18 Investment income percentage from **2013** Schedule A, Part III, line 17 | 18 | %

19a **33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	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*	3c		
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		
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		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	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		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	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.***	6		
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		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
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 IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
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		

Section B. Type I Supporting Organizations

			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 C. Type II Supporting 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		

Section D. All Type III Supporting Organizations

			Yes	No
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		
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 E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions).***

a ☐ The organization satisfied the Activities Test *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test ***Answer (a) and (b) below.***			
a	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*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	2b		
3	Parent of Supported Organizations ***Answer (a) and (b) below.***			
a	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? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b 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-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 responsive (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)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(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				
c				
d				
e	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. $			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	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 3j and 4c.			
8	Breakdown of line 7			
a				
b				
c				
d	Excess from 2013 . . .			
e	Excess from 2014 . . .			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

SNOW COLLEGE FOUNDATION

2014 Board Members

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Eddie Cox	435-427-3331 (work)	edcox@cut.net
Randy Cox, *Chair*	801-535-4030 (work)	randy.cox@wfadvisors.com
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Snow College Support Staff

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2014
Open to Public Inspection

Name of the organization: Snow College Foundation
Employer identification number: 94-2785555

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

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).

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other ....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table·

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V **Endowment Funds.**
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ ....%

b Permanent endowment ▶ ....%

c Temporarily restricted endowment ▶ ....%

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		499,114		499,114
b Buildings		300,815	38,597	262,218
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				761,332

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13.)* ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
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			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	

Part XIII Supplemental Information.

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

Part XIII Supplemental Information *(continued)*

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990.*

Name of the organization

Snow College Foundation

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assi the selection criteria used to award the grants or assistance? . . . .

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance
(1) Snow College 150 E College Ave, Ephraim, UT84627	87-6000517	0	633,874			
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . .
3 Enter total number of other organizations listed in the line 1 table . . . .

Schedule I (Form 990) (2014)

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" to Form 990, Par
Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)
1					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additiona

The Snow College Controller's Office maintains the accounting records for Snow College Foundation.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
Snow College Foundation	94-2785555

Part V Line 3b - The Foundation did not have any unrelated business income

Part VI Line 11b - The Foundation prepared the 2014 form 990 tax return and presented it to all individuals listed on Part VII Section A for review prior to filing the return.

Part VI Line 12c - Those involved in financial transactions sign a conflict of interest statement annually. The College's internal auditor audits the conflict of interest of employees as part of her annual investment audit

Part VI Line 19 - The Foundation makes available all governing documents, conflicts of interest policy, and financial statements to the public by request.

Name of the organization	Employer identification number

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990.*

Name of the organization

Snow College Foundation

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	En
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))
(1) Snow College 150 E College Ave., Ephraim, UT 84627	Education	UT	Government	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on For
because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	No	Co amou of S (F
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Ye
line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share end-of-yea
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

Part V **Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 3

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity . . . .
b Gift, grant, or capital contribution to related organization(s) . . . .
c Gift, grant, or capital contribution from related organization(s) . . . .
d Loans or loan guarantees to or for related organization(s) . . . .
e Loans or loan guarantees by related organization(s) . . . .

f Dividends from related organization(s) . . . .
g Sale of assets to related organization(s) . . . .
h Purchase of assets from related organization(s) . . . .
i Exchange of assets with related organization(s) . . . .
j Lease of facilities, equipment, or other assets to related organization(s) . . . .

k Lease of facilities, equipment, or other assets from related organization(s) . . . .
l Performance of services or membership or fundraising solicitations for related organization(s) . . . .
m Performance of services or membership or fundraising solicitations by related organization(s) . . . .
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . .
o Sharing of paid employees with related organization(s) . . . .

p Reimbursement paid to related organization(s) for expenses . . . .
q Reimbursement paid by related organization(s) for expenses . . . .

r Other transfer of cash or property to related organization(s) . . . .
s Other transfer of cash or property from related organization(s) . . . .

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationshi

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	N
(1) Snow College	b	633,874	Ca
(2) Snow College	j	6,506	Ca
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV,

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its acti
or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Co amou of Sc (Fc
				Yes	No			Yes	No	
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

WELLS FARGO

2014 Form 1099
Tax Reporting Package

SNOW COLLEGE
Account Number: -209698
Tax ID Number: XX-XXX0517
Payer: Wells Fargo Bank, N.A
Tax Year. December 31, 2014

This is important tax information an
the Internal Revenue Service (except
are required to file a return, a neglig
sanction may be imposed on you if t
and the IRS determines that it has n

SNOW COLLEGE
ATTN MARVIN DODGE
150 COLLEGE AVE
EPHRIAM UT 84627

WELLS FARGO

SNOW COLLEGE

Forms 1099 for 2014

Recipient: SNOW COLLEGE, XX-XXX0517

Payer: Wells Fargo Bank, N.A., Tax ID Number 94-3080771

1099-DIV Dividends And Distributions (OMB No. 1545-0110) **Copy B, For Rec**

Please note that Box 7, Foreign country or U.S. possession, is shown in the detail section for Qualified and Nonqualified Divide from Foreign Investments Reported on Form 1099. Additionally, Box 12, State, and Box 13, State identification number, assoc with the amount in Box 14 are shown at the end of the Ordinary Dividends detail section.

Box	*Description*	*Amount*
1a	Total ordinary dividends	$102,745.24
1b	Qualified dividends	$30,436 64
2a	Total capital gain distributions	$74,422.56
2b	Unrecaptured Section 1250 gain	$5.55
2c	Section 1202 gain	$0.00
2d	Collectibles (28%) gain	$0.00
3	Nondividend distributions	$0.00
4	**Federal income tax withheld**	$0.00
5	Investment expenses	$0.00
6	Foreign tax paid	$908.74
8	Cash liquidation distributions	$0.00
9	Noncash liquidation distributions	$0 00
10	Exempt-interest dividends	$0.00
11	Specified private activity bond interest dividends	$0.00
14	State tax withheld	$0.00

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SNOW COLLEGE

Forms 1099 for 2014

Recipient: SNOW COLLEGE, XX-XXX0517

Payer: Wells Fargo Bank, N.A., Tax ID Number 94-3080771

1099-INT Interest Income (OMB No. 1545-0112) **Copy B, For Recipi**

Please note the following: Box 7, Foreign country or U.S. possession, Box 13, State, and Box 14, State identification number, are in the Interest Income detail section. Also, Box 12, Tax-exempt bond CUSIP number, is shown in the detail section for Tax-Exemp Reported on Form 1099. Additionally, Box 10 and 11 consist of Market Discount and Bond Premium from only covered securities required to be reported to the IRS Please refer to the detail sections for both covered and noncovered transactions for Market Dis and Bond Premium.

Box	*Description*	*Amount*
1	Interest income (not included in Box 3)	$0.00
2	Early withdrawal penalty	$0.00
3	Interest on U.S. Savings Bonds and Treasury obligations	$0.00
4	**Federal income tax withheld**	$0.00
5	Investment expenses	$0.00
6	Foreign tax paid	$0.00
8	Tax-exempt interest	$0 00
9	Specified private activity bond interest	$0 00
10	Market discount	$0.00
11	Bond premium	$0.00
	Taxable interest	$0.00
	U S. Savings Bonds and Treasury obligations	$0.00
	Tax-exempt Interest	$0 00
	Specified private activity bond interest	$0.00
15	State tax withheld	$0.00

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SNOW COLLEGE

Forms 1099 for 2014

Recipient: SNOW COLLEGE, XX-XXX0517

Payer: Wells Fargo Bank, N.A., Tax ID Number 94-3080771

1099-MISC Miscellaneous Income (OMB No. 1545-0115) **Copy B, For Re**

This section reports miscellaneous income reportable on your tax return Please note, Box 17, State/Payer's state number, anc State Income, associated with the amount in Box 16 are shown at the end of the Miscellaneous Income detail section. For add information we suggest that you consult your tax advisor and refer to the attached detailed list of assets.

Box	*Description*	*Amount*
1	Rents	$0.00
2	Royalties	$0.00
3	Other income	$1,667.03
4	**Federal income tax withheld**	$0.00
7	Nonemployee compensation	$0.00
8	Substitute payments in lieu of dividends or interest	$0.00
16	State tax withheld	$0.00

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SNOW COLLEGE

Forms 1099 for 2014

1099-B Proceeds From Broker and Barter Exchange Transactions (OMB No. 1545-0715) Copy B, F

For 2014, Form 1099-B has been redesigned to correlate to the box numbers on Form 8949. As a result, Box 1f and Box 1g have been 1099-B. If there is an amount in Box 1g, there will be a code in Box 1f explaining the adjustment. The definitions of the codes are as fol wash sales, "C" for collectibles, and "D" for Market Discount. Typically, collectibles are taxed at 28% rates. For your convenience, if app have included the portion subject to Section 988 translation gains and losses and Market Discount in the column titled "Portion Subject t Discount". We have also included gains on collectibles taxed at 28% rates in the last column If we have included a dagger symbol (†) transaction with a net loss, this indicates that Box 7 is checked and you can not take a loss on your tax return based on gross proceeds change in control or capital structure reported in Box 1d. Please see instructions for Box 7.

A schedule of your net gains and losses is shown below. Please note that if you have sold an asset for which the cost basis information shown separately in the section entitled Noncovered Security Transactions with Unknown Cost Basis. Please review these carefully whe return. Note also that asterisk symbol (*) next to tax cost indicates that the tax cost has been adjusted for current year's return of capital noncovered securities we report security description, cusip, date sold, units, federal income tax withheld and gross proceeds to the Inter Service but we do not report acquisition date, tax cost, adjustment code, adjustments, and type of gain or loss.

Short Term Covered Security Transactions (Box 2 Short Term, Box 3 Cost Basis Reported and Box 6 Gross Proceeds

DESCRIPTION (BOX 1a) / Date sold or disposed (Box 1c)	Date acquired (Box 1b)	CUSIP / Units (Box 1a)	Proceeds (Box 1d)	Cost or other basis (Box 1e)	Net Gain/Loss	Code (Box 1f)	Adjustments (Box 1g)	Portion Sul to 988 ar Market Disc (included in N
CAUSEWAY INTL VALUE FD-I 1271		**14949P208**						
09/17/14	09/10/14	4890.13	$79,317.96	$79,562 46	$-244.50	W	$102.72	
DELAWARE US GROWTH FD-I 104		**245917802**						
08/18/14	12/27/13	1.41	$37 26	$35 09	$2.17		$0.00	

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SNOW COLLEGE

Short Term Covered Security Transactions (Box 2 Short Term, Box 3 Cost Basis Reported and Box 6 Gross Procee

DESCRIPTION (BOX 1a)		CUSIP						
Date sold or disposed (Box 1c)	Date acquired (Box 1b)	Units (Box 1a)	Proceeds (Box 1d)	Cost or other basis (Box 1e)	Net Gain/Loss	Code (Box 1f)	Adjustments (Box 1g)	Portion to 98 Market [(included
DELAWARE US GROWTH FD-I 104		245917802						
08/18/14	12/06/13	0 52	$13.68	$12 53	$1.15		$0.00	
GOLDMAN SACHS SMALL CAP VALUE I 651		38142V209						
08/18/14	12/05/13	56.28	$3,261 88	$3,058.74	$203 14		$0.00	
HARBOR INTERNATION FD INST 2011		411511306						
09/17/14	09/10/14	1059 47	$75,275 21	$75,836 74	$-561 53	W	$95 98	
T. ROWE PRICE INSTL LG CAP GRWTH 139		45775L408						
01/17/14	12/18/13	1.71	$47 17	$45 49	$1 68		$0.00	
11/06/14	09/10/14	141 19	$4,138 25	$4,057 77	$80 48		$0.00	
MFS VALUE FUND-CLASS I 893		552983694						
08/18/14	03/27/14	26.85	$924 07	$887.02	$37 05		$0.00	
08/18/14	06/26/14	17.18	$591 47	$592.86	$-1 39	W	$1.39	
08/18/14	12/10/13	79.96	$2,752 19	$2,585 84	$166 35		$0 00	
08/18/14	09/18/13	13 46	$463.43	$423 99	$39 44		$0.00	
11/06/14	07/19/14	2.31	$81 76	$80.64	$1 12		$0.00	
NORTHERN MID CAP INDEX		665130100						
01/17/14	12/19/13	420.49	$7,135.66	$6,895.98	$239.68		$0.00	
11/06/14	09/10/14	1166 29	$21,191 46	$21,156 46	$35.00		$0.00	

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SNOW COLLEGE

Short Term Covered Security Transactions (Box 2 Short Term, Box 3 Cost Basis Reported and Box 6 Gross Proceeds (

DESCRIPTION (BOX 1a) Date sold or disposed (Box 1c)	Date acquired (Box 1b)	CUSIP Units (Box 1a)	Proceeds (Box 1d)	Cost or other basis (Box 1e)	Net Gain/Loss	Code (Box 1f)	Adjustments (Box 1g)	Portion Subj to 988 an Market Disc (included in Ne
THORNBURG INTL VALUE FUND-CL I 209		**885215566**						
07/17/14	12/24/13	3 65	$112.60	$114 92	$-2 32		$0 00	
07/17/14	06/24/14	32.85	$1,013 00	$1,016 93	$-3 93		$0 00	
VANGUARD 500 INDEX FUND-SIGN FD 1340		**922908496**						
07/17/14	12/23/13	11 33	$1,692 13	$1,576.14	$115 99		$0 00	
07/17/14	03/21/14	9 51	$1,420 17	$1,351 21	$68 96		$0 00	
07/17/14	06/20/14	9.41	$1,405 98	$1,407 65	$-1 67		$0 00	
VANGUARD 500 INDEX FD- ADM 540		**922908710**						
11/06/14	09/10/14	141 42	$26,552 00	$26,140 81	$411.19		$0 00	
11/06/14	09/19/14	12 71	$2,386 61	$2,356.80	$29.81		$0.00	
Total Short Term Gain/Loss from Covered Security Transactions			*$229,813.94*	*$229,196 07*	*$617.87*		*$200.09*	
Report each transaction on Form 8949, Part I, Box A			**Gross Proceeds**	**Tax Cost**	**Net Gain/Loss**		**Adjustments**	
			$229,813.94	**$229,196.07**	**$617.87**		**$200.09**	

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SNOW COLLEGE

Long Term Covered Security Transactions (Box 2 Long Term, Box 3 Cost Basis Reported and Box 6 Gross Proceeds

DESCRIPTION (BOX 1a)		CUSIP						
Date sold or disposed (Box 1c)	Date acquired (Box 1b)	Units (Box 1a)	Proceeds (Box 1d)	Cost or other basis (Box 1e)	Net Gain/Loss	Code (Box 1f)	Adjustments (Box 1g)	Portion S to 988 Market Di (included in
DELAWARE US GROWTH FD-I 104		245917802						
08/18/14	07/17/13	326 93	$8,614 69	$7,104 25	$1,510 44		$0.00	
FEDERATED TOTAL RET BD F/C INST 328		31428Q101						
12/16/14	10/06/12	191 93	$2,118 86	$2,239 77	$-120 91		$0 00	
12/16/14	09/28/12	15691.8	$173,237 42	$182,495 57	$-9,258 15	W	$372 31	
GOLDMAN SACHS SMALL CAP VALUE I 651		38142V209						
08/18/14	12/05/12	36 12	$2,093 46	$1,561.40	$532.06		$0.00	
08/18/14	12/28/12	0.89	$51 53	$38 91	$12 62		$0.00	
T. ROWE PRICE INSTL LG CAP GRWTH 139		45775L408						
01/17/14	03/16/12	569.72	$15,752 88	$10,801.97	$4,950 91		$0 00	
THORNBURG INTL VALUE FUND-CL I 209		885215566						
07/17/14	06/24/13	29 6	$912.77	$804 44	$108.33		$0 00	
07/17/14	03/17/13	14 35	$442 65	$444 95	$-2 30		$0.00	
07/17/14	02/19/13	541 52	$16,700 45	$15,817.78	$882.67		$0.00	
07/17/14	03/22/13	16 53	$509 63	$473.43	$36.20		$0 00	
07/17/14	09/28/12	3829 85	$118,112.48	$102,103 72	$16,008 76		$0.00	
VANGUARD 500 INDEX FUND-SIGN FD 1340		922908496						
07/17/14	09/28/12	94 81	$14,159 41	$10,402.22	$3,757 19		$0.00	

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SNOW COLLEGE

Long Term Covered Security Transactions (Box 2 Long Term, Box 3 Cost Basis Reported and Box 6 Gross Proceeds (

DESCRIPTION (BOX 1a) **CUSIP**

Date sold or disposed (Box 1c)	Date acquired (Box 1b)	Units (Box 1a)	Proceeds (Box 1d)	Cost or other basis (Box 1e)	Net Gain/Loss	Code (Box 1f)	Adjustments (Box 1g)	Portion Su to 988 a Market Dis (included in N
WELLS FARGO ADV TOT RT BD FD-IN 944		**94975J581**						
10/16/14	10/25/12	1452.13	$18,572 70	$19,719 89	$-1,147.19	W	$826.99	
10/16/14	09/28/12	3464 29	$44,308 20	$46,490 70	$-2,182 50	W	$2,182 49	
10/16/14	10/06/12	173 62	$2,220 65	$2,343 92	$-123 27	W	$123 27	
12/16/14	10/19/12	3062 46	$39,199 51	$40,791 98	$-1,592 47		$0 00	
12/16/14	10/27/12	173.62	$2,222 39	$2,326 56	$-104.17		$0 00	
12/16/14	12/07/12	2287 87	$29,284 79	$29,513 58	$-228 79		$0 00	
12/16/14	11/15/12	1046 82	$13,399 30	$14,111 14	$-711.84		$0.00	
12/16/14	09/12/12	174 21	$2,229.85	$2,306.50	$-76 65	W	$76 65	
12/16/14	04/30/13	93.6	$1,198 11	$1,212 14	$-14 03		$0 00	
12/16/14	09/28/12	59871 02	$766,349.03	$803,469.06	$-37,120.03	W	$94 43	
12/16/14	10/13/12	227.62	$2,913 48	$3,038 68	$-125 20		$0 00	
Total Long Term Gain/Loss from Covered Security Transactions:			*$1,274,604 24*	*$1,299,612 56*	*$-25,008 32*		*$3,676.14*	
Report each transaction on Form 8949, Part II, Box D			**Gross Proceeds**	**Tax Cost**	**Net Gain/Loss**		**Adjustments**	
			$1,274,604.24	**$1,299,612 56**	**$-25,008.32**		**$3,676.14**	

WELLS FARGO

SNOW COLLEGE

Long Term Noncovered Security Transactions (Box 2 Long Term, Box 5 Noncovered Security and Box 6 Gross Proce

DESCRIPTION (BOX 1a)		CUSIP						
Date sold or disposed (Box 1c)	Date acquired	Units (Box 1a)	Proceeds (Box 1d)	Cost or other basis	Net Gain/Loss	Code	Adjustments	Portion S to 988 Market Di (included in
GOLDMAN SACHS SMALL CAP VALUE I 651		38142V209						
08/18/14	07/06/09	3.55	$205.82	$91 15	$114.67		$0 00	
MFS VALUE FUND-CLASS I 893		552983694						
08/18/14	09/27/11	29 9	$1,029 05	$623 65	$405.40		$0 00	
08/18/14	12/10/09	76 06	$2,617.84	$1,564 35	$1,053.49		$0.00	
Total Long Term Gain/Loss from Noncovered Security Transactions.			*$3,852.71*	*$2,279 15*	*$1,573.56*		*$0.00*	
Report each transaction on Form 8949, Part II, Box E			**Gross Proceeds**	**Tax Cost**	**Net Gain/Loss**		**Adjustments**	
			$3,852.71	**$2,279.15**	**$1,573.56**		**$0.00**	

Total proceeds reported to IRS on Form 1099-B **$1,508,270.89**

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SNOW COLLEGE

Summary of Dividends and Distributions

Description	Reported on Forms 1099	Not Reported on Forms 1099	Total
Total ordinary dividends	$102,745 24	$0.00	$102,745 24
Qualified dividends	$30,436 64	$0 00	$30,436.64
Total capital gain distributions	$74,422 56	$0.00	$74,422.56
Unrecaptured Section 1250 gain	$5 55	$0 00	$5 55
Section 1202 gain	$0.00	$0 00	$0 00
Collectibles (28%) gain	$0 00	$0 00	$0.00
Nondividend distributions	$0 00	$0 00	$0 00
Federal income tax withheld	$0.00	$0.00	$0 00
Investment expenses	$0 00	$0 00	$0 00
Foreign tax paid	$908 74	$0 00	$908 74
Cash liquidation distributions	$0 00	$0 00	$0 00
Non-cash liquidation distributions	$0 00	$0 00	$0.00
Exempt-interest dividends	$0 00	$0 00	$0 00
Specified private activity bond interest dividends	$0 00	$0 00	$0 00
State tax withheld	$0.00	$0.00	$0 00

Summary of Interest Income

Description	Reported on Forms 1099	No on I
Interest income	$0.00	
Early withdrawal penalty	$0 00	
Interest on U S. Saving Bonds and Treasury obligations	$0 00	
Federal income tax withheld	$0 00	
Investment expenses	$0 00	
Foreign tax paid	$0 00	
Tax-exempt interest	$0.00	
Specified private activity bond int.	$0 00	
Market discount	$0 00	
Bond premium	$0.00	
Taxable interest	$0 00	
U S Bonds and Treasury oblig.	$0 00	
Tax-exempt interest	$0.00	
Spec private activity bond int	$0 00	
State tax withheld	$0.00	

Summary of Original Issue Discount

Original issue discount for 2014	$0 00	$0 00	$0.00
Federal income tax withheld	$0 00	$0.00	$0.00
Market discount	$0 00	$0 00	$0.00
Acquisition premium	$0 00	$0 00	$0 00
Taxable OID	$0 00	$0 00	$0.00
OID for US Treasury obligations	$0 00	$0 00	$0 00
Tax-exempt OID	$0 00	$0 00	$0 00
OID on US Treasury obligations	$0 00	$0 00	$0 00
Tax-exempt OID	$0.00	$0 00	$0.00
State tax withheld	$0 00	$0.00	$0 00

Summary of Miscellaneous Income

Rents	$0 00
Royalties	$0 00
Other income	$1,667 03
Federal income tax withheld	$0 00
Nonemployee compensation	$0 00
Substitute payments	$0 00
Ordinary losses	$0 00
Refund of foreign taxes paid	$0 00
Class action settlements	$0 00
State tax withheld	$0.00

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Supplemental 201

SNOW COLLEGE

Please note the information contained herein, including attachments, is not intended to be used or construed as tax advice. your tax advisor on your particular tax circumstances.

Summary of Tax-Exempt Income, Account Management Fees and Foreign Investments

Tax Exempt Income:	Subject to Alternative Minimum Tax:	Not Subject to Alternative Minimum Tax Tax Exempt Bonds:	Tax Exempt Funds:	Bond and Acquisition Premium:	Tax Exempt OID:
Tax-Exempt for Utah	$0 00	$0 00	$0.00	$0.00	$0
Taxable for Utah	$0.00	$0.00	$0.00	$0.00	$0
Totals:	$0.00	$0.00	$0.00	$0.00	$0

Account Management Fees:

Gross Fees paid for account management	$14,688.77
Portion Allocable to Taxable Income	$14,688.77

If applicable, fee allocation only considers income reported on this Tax Information Letter. Please see detail on the next page.

Foreign Dividends (included in income reported on Form 1099):	Qualified:	Nonqualified:	Total:
Other	$9,439.63	$1,104.75	$10,54
Total:	$9,439.63	$1,104.75	$10,54

Supplemental 201

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SNOW COLLEGE

Detail Supporting Forms 1099

This section provides detail for each transaction that is included in your Forms 1099. We do not report this level of detail to the IRS, bı helpful in preparing your returns. If your account has more than one Taxpayer, this detail includes just your share of activity

Ordinary Dividends

Generally, the stock for an otherwise qualified dividend must be held for more than 60 days during the 121 day period that begins 60 da dividend date in order for the dividend to qualify for the reduced tax rate applicable to qualified dividends. This holding period is increa during the 181 day period beginning 90 days before the ex-date in the case of certain preferred stock dividends. In either case, the ho not include days on which the taxpayer has a diminished risk of loss such as through puts, calls, or short sales. Where practical, we h these rules in determining qualifying and nonqualifying dividends in your account. However, we suggest that you consult with your tax return preparer to review the application of these rules to you.

Qualified Dividends from Mutual Funds

Shares	Description	Date	Amount of dividend
1,065	INVESCO SMALL CAP GROWTH FD-I 4764	12/16/2014	$278 63
Subtotal			**$278.63**
10,386	CAUSEWAY INTL VALUE FD-I 1271	12/22/2014	$87 71
Subtotal			**$87.71**
3,551	DELAWARE US GROWTH FD-I 104	12/23/2014	$390.08
Subtotal			**$390.08**
804	GOLDMAN SACHS SMALL CAP VALUE I 651	12/08/2014	$130 10
804	GOLDMAN SACHS SMALL CAP VALUE I 651	12/08/2014	$365 78
Subtotal			**$495.88**
2,450	HARBOR INTERNATION FD INST 2011	12/22/2014	$81.18
Subtotal			**$81.18**
6,480	T ROWE PRICE INSTL LG CAP GRWTH 139	12/19/2014	$57 66
6,480	T ROWE PRICE INSTL LG CAP GRWTH 139	12/19/2014	$893 77
Subtotal			**$951.43**
1,848	JP MORGAN SMALL CAP EQUITY-S 367	12/16/2014	$617 97
2,214	JP MORGAN SMALL CAP EQUITY-S 367	12/23/2014	$465 06
Subtotal			**$1,083.03**

WELLS FARGO

Supplemental 20

SNOW COLLEGE

Qualified Dividends from Mutual Funds

Shares	Description	Date	Amount of dividend
3,534	MFS VALUE FUND-CLASS I 893	03/31/2014	$887 02
3,561	MFS VALUE FUND-CLASS I 893	06/30/2014	$592 86
5,398	MFS VALUE FUND-CLASS I 893	09/29/2014	$1,031.92
5,426	MFS VALUE FUND-CLASS I 893	12/15/2014	$975 02
5,426	MFS VALUE FUND-CLASS I 893	12/15/2014	$500 07
Subtotal			**$3,986.89**
18,369	NORTHERN MID CAP INDEX	12/22/2014	$2,856 80
Subtotal			**$2,856.80**
3,507	T ROWE PRICE EQUITY INCOME 71	03/31/2014	$700.90
3,529	T ROWE PRICE EQUITY INCOME 71	06/30/2014	$528 89
5,465	T ROWE PRICE EQUITY INCOME 71	09/30/2014	$764.47
5,487	T ROWE PRICE EQUITY INCOME 71	12/15/2014	$932.10
Subtotal			**$2,926.36**
4,435	THORNBURG INTL VALUE FUND-CL I 209	06/26/2014	$6.29
Subtotal			**$6.29**
2,085	VANGUARD 500 INDEX FUND-SIGN FD 1340	03/24/2014	$1,351.21
2,095	VANGUARD 500 INDEX FUND-SIGN FD 1340	06/23/2014	$1,407.65
3,233	VANGUARD 500 INDEX FUND-SIGN FD 1340	09/22/2014	$2,356.80
Subtotal			**$5,115.66**
2,645	VANGUARD 500 INDEX FD- ADM 540	12/18/2014	$2,734 52
Subtotal			**$2,734.52**
Total Qualified Dividends from Mutual Funds			**$20,994.46**

Qualified Dividends Attributable to U.S. Government Obligations

This section indicates the dividends reported on Form 1099-DIV, Box 1a that are from Mutual Funds that are invested in U.S. Govern
Although taxable as qualifying dividends for federal tax purposes, some states exempt them from taxation. We suggest that you con
advisor regarding the treatment applicable to you.

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Detail for Qualified Dividends Attributable to U.S. Government Obligations

Shares	Description	Date	Amount of dividend
7,101	DELAWARE US GROWTH FD-I 104	12/23/2014	$0.21
Subtotal			**$0.21**
3,507	T ROWE PRICE EQUITY INCOME 71	03/31/2014	$0 56
3,529	T ROWE PRICE EQUITY INCOME 71	06/30/2014	$0 42
5,465	T ROWE PRICE EQUITY INCOME 71	09/30/2014	$0.61
5,487	T ROWE PRICE EQUITY INCOME 71	12/15/2014	$0.75
Subtotal			**$2.34**
Total Qualified Dividends Attributable to U.S. Government Obligations			**$2.55**

Nonqualified Dividends from Mutual Funds

Shares	Description	Date	Amount of dividend
1,065	INVESCO SMALL CAP GROWTH FD-I 4764	12/16/2014	$673 96
Subtotal			**$673.96**
59,789	DODGE & COX INCOME FD COM 147	12/23/2014	$5,050 78
59,789	DODGE & COX INCOME FD COM 147	12/23/2014	$580.55
Subtotal			**$5,631.33**
53,457	FEDERATED TOTAL RET BD F/C INST 328	02/04/2014	$1,755.01
53,620	FEDERATED TOTAL RET BD F/C INST 328	03/04/2014	$1,733 34
53,787	FEDERATED TOTAL RET BD F/C INST 328	04/02/2014	$1,776 92
53,953	FEDERATED TOTAL RET BD F/C INST 328	05/02/2014	$1,774 11
54,119	FEDERATED TOTAL RET BD F/C INST 328	06/03/2014	$1,795 20
54,282	FEDERATED TOTAL RET BD F/C INST 328	07/02/2014	$1,753 12
54,449	FEDERATED TOTAL RET BD F/C INST 328	08/04/2014	$1,788 68
54,615	FEDERATED TOTAL RET BD F/C INST 328	09/03/2014	$1,782.08
90,712	FEDERATED TOTAL RET BD F/C INST 328	10/02/2014	$2,513.41
90,975	FEDERATED TOTAL RET BD F/C INST 328	11/04/2014	$2,816 25
91,244	FEDERATED TOTAL RET BD F/C INST 328	12/02/2014	$2,886.31
75,360	FEDERATED TOTAL RET BD F/C INST 328	01/02/2015	$873 57
75,722	FEDERATED TOTAL RET BD F/C INST 328	01/05/2015	$2,553 48
Subtotal			**$25,801.48**
804	GOLDMAN SACHS SMALL CAP VALUE I 651	12/08/2014	$377 38

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Nonqualified Dividends from Mutual Funds

Shares	Description	Date	Amount of dividend
804	GOLDMAN SACHS SMALL CAP VALUE I 651	12/08/2014	$134 22
Subtotal			**$511.60**
2,450	HARBOR INTERNATION FD INST 2011	12/22/2014	$30 31
Subtotal			**$30.31**
6,480	T. ROWE PRICE INSTL LG CAP GRWTH 139	12/19/2014	$71.95
6,480	T. ROWE PRICE INSTL LG CAP GRWTH 139	12/19/2014	$1,115.16
Subtotal			**$1,187.11**
	MET WEST TOTAL RETURN BOND CL I 512	02/04/2014	$545.14
	MET WEST TOTAL RETURN BOND CL I 512	03/04/2014	$619.23
	MET WEST TOTAL RETURN BOND CL I 512	04/02/2014	$700 94
	MET WEST TOTAL RETURN BOND CL I 512	05/02/2014	$721.38
	MET WEST TOTAL RETURN BOND CL I 512	06/03/2014	$711 93
	MET WEST TOTAL RETURN BOND CL I 512	07/01/2014	$669.47
	MET WEST TOTAL RETURN BOND CL I 512	08/01/2014	$683 89
	MET WEST TOTAL RETURN BOND CL I 512	09/03/2014	$623.79
	MET WEST TOTAL RETURN BOND CL I 512	10/01/2014	$873.39
	MET WEST TOTAL RETURN BOND CL I 512	11/03/2014	$913.10
	MET WEST TOTAL RETURN BOND CL I 512	12/01/2014	$917.98
62,066	MET WEST TOTAL RETURN BOND CL I 512	12/15/2014	$949.03
	MET WEST TOTAL RETURN BOND CL I 512	01/02/2015	$1,013 05
Subtotal			**$9,942.32**
18,369	NORTHERN MID CAP INDEX	12/22/2014	$1,039.50
18,369	NORTHERN MID CAP INDEX	12/22/2014	$1,034.77
Subtotal			**$2,074.27**
	WF ADV CASH INV FD-INST 451	02/03/2014	$0.48
	WF ADV CASH INV FD-INST 451	03/03/2014	$0 42
	WF ADV CASH INV FD-INST 451	04/01/2014	$0 47
	WF ADV CASH INV FD-INST 451	05/01/2014	$0 44
	WF ADV CASH INV FD-INST 451	06/02/2014	$0.44
	WF ADV CASH INV FD-INST 451	07/01/2014	$0.43
	WF ADV CASH INV FD-INST 451	08/01/2014	$0.57
	WF ADV CASH INV FD-INST 451	09/02/2014	$0.71
	WF ADV CASH INV FD-INST 451	10/01/2014	$1.82

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Nonqualified Dividends from Mutual Funds

Shares	Description	Date	Amount of dividend
	WF ADV CASH INV FD-INST 451	11/03/2014	$1 48
	WF ADV CASH INV FD-INST 451	12/01/2014	$1 41
	WF ADV CASH INV FD-INST 451	01/02/2015	$1.76
Subtotal			**$10.43**
	WELLS FARGO ADV TOT RT BD FD-IN 944	02/04/2014	$1,187 00
	WELLS FARGO ADV TOT RT BD FD-IN 944	03/04/2014	$1,358 70
	WELLS FARGO ADV TOT RT BD FD-IN 944	04/02/2014	$1,584.02
	WELLS FARGO ADV TOT RT BD FD-IN 944	05/02/2014	$931 10
	WELLS FARGO ADV TOT RT BD FD-IN 944	06/03/2014	S1,559 96
	WELLS FARGO ADV TOT RT BD FD-IN 944	07/02/2014	S1,320 92
	WELLS FARGO ADV TOT RT BD FD-IN 944	08/04/2014	S1,371 42
	WELLS FARGO ADV TOT RT BD FD-IN 944	09/03/2014	$1,531.75
	WELLS FARGO ADV TOT RT BD FD-IN 944	10/02/2014	$1,825 94
	WELLS FARGO ADV TOT RT BD FD-IN 944	11/04/2014	$2,406.56
	WELLS FARGO ADV TOT RT BD FD-IN 944	12/02/2014	$1,956.78
	WELLS FARGO ADV TOT RT BD FD-IN 944	01/05/2015	$1,513.52
Subtotal			**$18,547.67**
Total Nonqualified Dividends from Mutual Funds			**$64,410.48**

Nonqualified Dividends Attributable to U.S. Government Obligations

This section indicates the dividends reported on Form 1099-DIV, Box 1a that are from Mutual Funds that are invested in U.S. Governm Although taxable as nonqualifying dividends for federal tax purposes, some states exempt them from taxation. We suggest that you cc tax advisor regarding the treatment applicable to you.

Detail for Nonqualified Dividends Attributable to U.S. Government Obligations

Shares	Description	Date	Amount of dividend
59,789	DODGE & COX INCOME FD COM 147	12/23/2014	$150 85
59,789	DODGE & COX INCOME FD COM 147	12/23/2014	$17 34
Subtotal			**$168.19**
53,457	FEDERATED TOTAL RET BD F/C INST 328	02/04/2014	$61 77

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Detail for Nonqualified Dividends Attributable to U.S. Government Obligations

Shares	Description	Date	Amount of dividend
53,620	FEDERATED TOTAL RET BD F/C INST 328	03/04/2014	$61.01
53,787	FEDERATED TOTAL RET BD F/C INST 328	04/02/2014	$62.54
53,953	FEDERATED TOTAL RET BD F/C INST 328	05/02/2014	$62.44
54,119	FEDERATED TOTAL RET BD F/C INST 328	06/03/2014	$63 19
54,282	FEDERATED TOTAL RET BD F/C INST 328	07/02/2014	$61.70
54,449	FEDERATED TOTAL RET BD F/C INST 328	08/04/2014	$62.96
54,615	FEDERATED TOTAL RET BD F/C INST 328	09/03/2014	$62.72
90,712	FEDERATED TOTAL RET BD F/C INST 328	10/02/2014	$88 46
90,975	FEDERATED TOTAL RET BD F/C INST 328	11/04/2014	$99.12
91,244	FEDERATED TOTAL RET BD F/C INST 328	12/02/2014	$101.59
75,360	FEDERATED TOTAL RET BD F/C INST 328	01/02/2015	$30.75
75,722	FEDERATED TOTAL RET BD F/C INST 328	01/05/2015	$89.87
Subtotal			**$908.12**
	MET WEST TOTAL RETURN BOND CL I 512	02/04/2014	$106 94
	MET WEST TOTAL RETURN BOND CL I 512	03/04/2014	$121 47
	MET WEST TOTAL RETURN BOND CL I 512	04/02/2014	$137.51
	MET WEST TOTAL RETURN BOND CL I 512	05/02/2014	$141.51
	MET WEST TOTAL RETURN BOND CL I 512	06/03/2014	$139 66
	MET WEST TOTAL RETURN BOND CL I 512	07/01/2014	$131.33
	MET WEST TOTAL RETURN BOND CL I 512	08/01/2014	$134.16
	MET WEST TOTAL RETURN BOND CL I 512	09/03/2014	$122.37
	MET WEST TOTAL RETURN BOND CL I 512	10/01/2014	$171.34
	MET WEST TOTAL RETURN BOND CL I 512	11/03/2014	$179.13
	MET WEST TOTAL RETURN BOND CL I 512	12/01/2014	$180 08
62,066	MET WEST TOTAL RETURN BOND CL I 512	12/15/2014	$186.17
	MET WEST TOTAL RETURN BOND CL I 512	01/02/2015	$198.73
Subtotal			**$1,950.40**
	WELLS FARGO ADV TOT RT BD FD-IN 944	02/04/2014	$241.06
	WELLS FARGO ADV TOT RT BD FD-IN 944	03/04/2014	$275.92
	WELLS FARGO ADV TOT RT BD FD-IN 944	04/02/2014	$321 68
	WELLS FARGO ADV TOT RT BD FD-IN 944	05/02/2014	$189.09
	WELLS FARGO ADV TOT RT BD FD-IN 944	06/03/2014	$316 80
	WELLS FARGO ADV TOT RT BD FD-IN 944	07/02/2014	$268.25

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Detail for Nonqualified Dividends Attributable to U.S. Government Obligations

Shares	Description	Date	Amount of dividend
	WELLS FARGO ADV TOT RT BD FD-IN 944	08/04/2014	$278 51
	WELLS FARGO ADV TOT RT BD FD-IN 944	09/03/2014	$311.07
	WELLS FARGO ADV TOT RT BD FD-IN 944	10/02/2014	$370.81
	WELLS FARGO ADV TOT RT BD FD-IN 944	11/04/2014	$488.72
	WELLS FARGO ADV TOT RT BD FD-IN 944	12/02/2014	$397 38
	WELLS FARGO ADV TOT RT BD FD-IN 944	01/05/2015	$307.37
Subtotal			**$3,766.66**
Total Nonqualified Dividends Attributable to U.S. Government Obligations			**$6,793.37**

Qualified Foreign Dividends from Mutual Funds

Other

Shares	Description	Date	Amount of dividend	Foreigr
6,526	ACADIAN EMERGING MARKETS PTF-1 1260	01/02/2015	$1,580.30	
Subtotal			**$1,580.30**	
10,386	CAUSEWAY INTL VALUE FD-I 1271	12/22/2014	$4,068 94	
Subtotal			**$4,068.94**	
3,551	DELAWARE US GROWTH FD-I 104	12/23/2014	$28 69	
Subtotal			**$28.69**	
2,450	HARBOR INTERNATION FD INST 2011	12/22/2014	$2,580.32	
Subtotal			**$2,580.32**	
4,435	THORNBURG INTL VALUE FUND-CL I 209	06/26/2014	$1,181.38	
Subtotal			**$1,181.38**	
Total for Other			**$9,439.63**	
Total Qualified Foreign Dividends from Mutual Funds			**$9,439.63**	

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Nonqualified Foreign Dividends from Mutual Funds

Other

Shares	Description	Date	Amount of dividend	For
6,526	ACADIAN EMERGING MARKETS PTF-1 1260	01/02/2015	$141 35	
Subtotal			**$141.35**	
2,450	HARBOR INTERNATION FD INST 2011	12/22/2014	$963.40	
Subtotal			**$963.40**	
Total for Other			**$1,104.75**	
Total Nonqualified Foreign Dividends from Mutual Funds			**$1,104.75**	

Total Foreign Tax Paid (Box 6, 1099-DIV)

Total Ordinary Dividends (Box 1a, 1099-DIV)

Total Qualified Dividends (Box 1b, 1099-DIV)

Total Dividends Attributable to U.S. Government Obligations (Included in Box 1a, 1099-DIV)

Where we have received information that a security paid qualified dividends, the dividends from that security are included as qualifyi
1b. All dividends are shown in Box 1a.

Capital Gain Distributions

Shares	Description	Date	Amount of gain
1,065	INVESCO SMALL CAP GROWTH FD-I 4764	12/16/2014	$6,029.31
Subtotal			**$6,029.31**
3,551	DELAWARE US GROWTH FD-I 104	12/23/2014	$2,467.69
Subtotal			**$2,467.69**
59,789	DODGE & COX INCOME FD COM 147	12/23/2014	$2,690 50
Subtotal			**$2,690.50**
75,360	FEDERATED TOTAL RET BD F/C INST 328	01/02/2015	$448 56
Subtotal			**$448.56**
804	GOLDMAN SACHS SMALL CAP VALUE I 651	12/08/2014	$2,757.97
Subtotal			**$2,757.97**
6,480	T. ROWE PRICE INSTL LG CAP GRWTH 139	12/19/2014	$11,470.33
Subtotal			**$11,470.33**

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Capital Gain Distributions

Shares	Description	Date	Amount of gain
1,848	JP MORGAN SMALL CAP EQUITY-S 367	12/16/2014	$8,370.32
Subtotal			**$8,370.32**
5,426	MFS VALUE FUND-CLASS I 893	12/15/2014	$4,497 26
Subtotal			**$4,497.26**
62,066	MET WEST TOTAL RETURN BOND CL I 512	12/15/2014	$535 63
Subtotal			**$535.63**
18,369	NORTHERN MID CAP INDEX	12/22/2014	$13,354 59
Subtotal			**$13,354.59**
5,487	T ROWE PRICE EQUITY INCOME 71	12/15/2014	$9,767 54
Subtotal			**$9,767.54**
1,664	WF ADV GROWTH FUND - I 3105	12/15/2014	$12,027 31
Subtotal			**$12,027.31**
Total Capital Gain Distributions (Included in Box 2a, 1099-DIV)			**$74,417.01**

Capital Gain Distributions - Unrecaptured 1250 Gain

Shares	Description	Date	Amount of gain
804	GOLDMAN SACHS SMALL CAP VALUE I 651	12/08/2014	$5.55
Subtotal			**$5.55**
Total Capital Gain Distributions - Unrecaptured 1250 Gain (Box 2b, 1099-DIV)			**$5.55**

Total Capital Gain Distributions (Box 2a, 1099-DIV)

Miscellaneous Income

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Other Income

Date	Description	Units	Amount
01/07/2014	MISC OTHER INCOME		$6 62
01/14/2014	MISC OTHER INCOME		$25.82
01/15/2014	MISC OTHER INCOME		$38 53
02/18/2014	MISC OTHER INCOME		$44 24
02/19/2014	MISC OTHER INCOME		$14 35
02/20/2014	MISC OTHER INCOME		$50.06
02/26/2014	MISC OTHER INCOME		$52 18
03/12/2014	MISC OTHER INCOME		$93 89
03/20/2014	MISC OTHER INCOME		$13 43
03/27/2014	MISC OTHER INCOME		$30.01
04/09/2014	MISC OTHER INCOME		$67.98
04/24/2014	MISC OTHER INCOME		$14 96
05/08/2014	MISC OTHER INCOME		$134 90
05/21/2014	MISC OTHER INCOME		$13 92
05/22/2014	MISC OTHER INCOME		$28 04
05/27/2014	MISC OTHER INCOME		$51 46
05/28/2014	MISC OTHER INCOME		$11.97
06/04/2014	MISC OTHER INCOME		$13.14
06/12/2014	MISC OTHER INCOME		$14 56
06/25/2014	MISC OTHER INCOME		$71.31
07/14/2014	MISC OTHER INCOME		$8 64
07/23/2014	MISC OTHER INCOME		$29.39
07/29/2014	MISC OTHER INCOME		$12 50
07/31/2014	MISC OTHER INCOME		$96 26
08/07/2014	MISC OTHER INCOME		$84 20
08/27/2014	MISC OTHER INCOME		$28 45
09/11/2014	MISC OTHER INCOME		$22 59
09/17/2014	MISC OTHER INCOME		$40 00
09/18/2014	MISC OTHER INCOME		$42 47
09/25/2014	MISC OTHER INCOME		$15 69

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Other Income

Date	Description	Units	Amount
10/23/2014	MISC OTHER INCOME		$13 93
10/28/2014	MISC OTHER INCOME		$29 11
10/29/2014	MISC OTHER INCOME		$44 99
11/05/2014	MISC OTHER INCOME		$113 64
11/12/2014	MISC OTHER INCOME		$17.09
11/24/2014	MISC OTHER INCOME		$13 95
11/25/2014	MISC OTHER INCOME		$119.58
12/04/2014	MISC OTHER INCOME		$77.34
12/11/2014	MISC OTHER INCOME		$23 62
12/17/2014	MISC OTHER INCOME		$19.62
12/18/2014	MISC OTHER INCOME		$13 03
12/23/2014	MISC OTHER INCOME		$9.57
Total			**$1,667.03**
Total Other Income (Box 3, 1099-MISC)			**$1,667.03**