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DLN: 93493237005416

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)

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

► Information about Form 990 and its instructions is at <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2014 cal	endar year, or tax year beginnin	g 07-01-2014 , and ending 06-3	0-2015				
		pplicable	C Name of organization UTAH STATE BAR				D Emplo	yer iden	tification number
_	dress ch	-					87-0	271610	
∏ Na	me chai	nge	Doing business as						
Ind	tıal retui	rn					E Teleph	one numb	er
⊢ Fin	al urn/tern	nınated	Number and street (or P O box if m 645 SOUTH 200 EAST	naıl ıs not delivered to street address) Ro	oom/suite		(801	)531-90	177
	ended i		City or town, state or province, cou	ntn, and ZID or foreign nortal code			(001	7 3 3 1 - 3 (	
_		pending	SALT LAKE CITY, UT 84111	ntry, and ZIP or foreigh postar code			<b>G</b> Gross	receipts \$	6,821,966
i Api	Jilcation	pending		1 - <b>6</b> 6	F .				
			F Name and address of prir	ncipal officer	H(	<b>a)</b> Is this	s a group dinates?		for □ Yes 🔽 No
						34501	amaces		
					H(	<b>b)</b> Are al		ınates	┌ Yes 🗸 No
	x-exem	ıpt status		(insert no )		ınclud If "No		nalist (	see instructions)
1 W	oheite	• <b>=</b> \Λ/\Λ	WW UTAHBAR ORG						
					H(-	c) Group	exemp	tion num	iber <b>F</b>
			Corporation Trust Association	n Other 🟲	L	. Year of for	mation 19	991 <b>M</b> 9	State of legal domicile UT
Pa	rt I	Sum	ımary						
		,	escribe the organization's mission	on or most significant activities TE OF UTAH AND TO SERVE TI	JE DIIRITA	~ V N D T H	ELEGA	I DDAE	ECCION BV
				AL EXCELLENCE, CIVILITY, ETH					
2	1	_A W							
ĕ	-								
E .									
Governance	2	Check tl	hıs box ┡॑ if the organızatıon dı	scontinued its operations or disp	osed of mo	re than 2!	5% of its	net ass	ets
Activities &	3 1	Number	of voting members of the govern	ing body (Part VI, line 1a)			•	3	14
È	I			of the governing body (Part VI, li				4	14
ទ្ធ	I			calendar year 2014 (Part V, line	-			5	41
•			•	ecessary)			•	6	174
	1			art VIII, column (C), line 12 .			•	7a	-316,981
	b l	Vet unre	elated business taxable income f	rom Form 990-T, line 34	<u> </u>			7b	-453,100
						Prior	Year		Current Year
<u>a</u>	8			ne 1h)	<u> </u>			4 = =	0
enu	9			ne 2g)	_		6,388,		6,610,176
Revenue	10			n (A), lines 3, 4, and 7d)				581	31,607
_	11			lines 5, 6d, 8c, 9c, 10c, and 11e (must equal Part VIII, column (A	_		-308,	293	-313,886
	12		<del>_</del>	(mast equal) art viii, column (x			6,129,	765	6,327,897
	13			IX, column (A), lines 1-3) .			6,578		110,715
	14	Benef	its paid to or for members (Part I	X, column (A), line 4)			73,	889	73,887
	15			ee benefits (Part IX, column (A), l	ines		2,795,	767	2,865,693
Expenses	16-	5-10	,	(A.) line 11-)	_				. ,
ক্	16a			column (A), line 11e)	· ·				
五	b	Total fu	ındraısıng expenses (Part IX, column (D	), line 25) ► <u>0</u>	— <u> </u>				
	17			lines 11a-11d, 11f-24e)	_		2,753,	081	2,655,354
	18			st equal Part IX, column (A), line			5,629,		5,705,649
	19	Reven	nue less expenses Subtract line	18 from line 12			500,	-	622,248
Not Assets or Fund Balances					1	Beginning V	of Curre ear	nt	End of Year
See See	20	Total	accets (Part V June 16)		-	- 1	8,141,	230	8,427,692
8.A.B.	21				_		3,202,		2,866,446
2 E	22			line 21 from line 20			4,938,		5,561,246
Pa	t III		nature Block		· · <u> </u>		.,,		5,552,215
				amined this return, including acco	mpanving	schedule	s and sta	atement	s, and to the best of
my k	nowled	dge and	belief, it is true, correct, and con	nplete Declaration of preparer (o					
prepa	arer ha	is any k	nowledge						
		l l				20.	16-02-22		
Sigr	1	Signa	ature of officer			Da			
Her			N C BALDWIN Executive Direc						
		<u> </u>	e or print name and title						
			Print/Type preparer's name RANDY HUIZENGA	Preparer's signature RANDY HUIZENGA	Date		k 🔽 ıf	PTIN P001060	 096
Paid	d	<u> </u>	Firm's name  HUIZENGA & COMPAN'				employed 's EIN 🟲	1	
Pre	pare Onl		Fırm's address ► 1003 E MOBINA CT				ne no (80:		00

SALT LAKE CITY, UT 84117

May the IRS discuss this return with the preparer shown above? (see instructions) .

✓ Yes ☐ No

Form	990 (2014)					Р	age
Par		_	rice Accomplishment ponse or note to any line in				<u>.</u> اح
1	Briefly describe th	e organization's missio	n				
			UTAH AND TO SERVE TH ILITY, ETHICS, RESPECT				
2	Did the organizatio the prior Form 990		cant program services durii	ng the year which we	ere not listed on	┌ Yes ┌ No	
	If "Yes," describe t	hese new services on S	Schedule O				
3	Did the organizatio	_ ·	make sıgnıfıcant changes ı	n how it conducts, a	ny program	┌ Yes ┌ No	)
	If "Yes," describe t	hese changes on Sche	dule O				
4	expenses Section	501(c)(3) and 501(c)(	ce accomplishments for ea 4) organizations are require r each program service rep	ed to report the amo			
4a	(Code	) (Expenses \$	2,635,046 including gra	ants of \$	) (Revenue \$	)	
			PRACTICE LAW IN THE STATE OF DNTINUING LEGAL EDUCATION	UTAH THROUGH COLLEC	CTION OF MANDATORY LICE	ENSING FEES,	
4b	(Code	) (Expenses \$	1,196,064 including gra	ants of \$	) (Revenue \$	)	
	REGULATE AND DISCI WHERE APPROPRIATE		ING LAW IN THE STATE OF UTAH	THROUGH THE INVESTIG	GATION OF COMPLAINTS AN	D PROSECUTING CASES	ŝ
4c	(Code	) (Expenses \$	761,941 including gra	ants of \$	) (Revenue \$	)	
	PROMOTE PROFESSIO AND ANNUAL CONFER		IN THE PRACTICE OF LAW PROVI	DING EDUCATIONAL OPP	ORTUNITIES TO ATTORNEY	S BY MEANS OF SEMINA	\RS
4d	Other program co	rvices (Describe in Sch	andula O )				
Tu	(Expenses \$	·	cluding grants of \$	) (Re	venue \$	)	

5,238,602

Total program service expenses ▶

Part IV	Checklist of	Required	Schedule

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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 $I^{\bullet}$	3		N o
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		Νο
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? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
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 $I^{2}$	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
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		No
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 $V^{\bullet}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	Yes	
	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		No
	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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		No
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		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No.
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	<b>)</b> (2014)

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	<u> </u>	<u> </u>	厂_
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 83  Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
2-	Did the organization have unrelated business gross income of \$1,000 or more during the year?	20	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	Yes	
	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	100	No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		No
D	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).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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			
L	required?	7g		
	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?			NI -
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		No No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
0	Section 501(c)(7) organizations. Enter			
	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			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		Νo
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	  -4-		NI
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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														. \to
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Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
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		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod <b>Yes</b>	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?	event		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization to evaluate its	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.
  - Own website Another's website V 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 ►KELLIE BARTZ

645 SOUTH 200 EAST

SALT LAKE CITY, UT 841113834 (801) 297-7020

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

#### 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, or 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) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h an or/tr	offic ustee	ess er e)	(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			
		be e	ustee			ensated							
(1) JAMES D GILSON	1 00	,,						6 000	0				
President	0 00	X						6,000	0	0			
(2) FELSHAW KING	1 00							_	_	_			
COMMISSIONER	0 00	X						0	0	0			
(3) MARY KAY GRIFFIN	1 00												
COMMISSIONER	0 00	X						0	0	0			
(4) ROBERT O RICE	1 00												
COMMISSIONER	0 00	X						0	0	0			
(5) JOHN LUND	1 00												
COMMISSIONER	0 00	Х						0	0	0			
(6) ANGELINA TSU	1 00												
PRESIDENT-ELECT	0 00	X						3,000	0	0			
(7) EVELYN FURSE	1 00												
COMMISSIONER	0 00	X						0	0	0			
(8) LORI W NELSON	1 00												
President	0 00	X						0	0	0			
(9) HERM OLSEN	1 00												
COMMISSIONER	0 00	Х						0	0	0			
(10) SU J CHON	1 00												
COMMISSIONER	0 00	Х						0	0	0			
(11) H DICKSON BURTON	1 00												
COMMISSIONER	0 00	Х						0	0	0			
(12) MIKE LEAVITT	1 00												
COMMISSIONER	0 00	Х						0	0	0			
(13) THOMAS W SEILER	1 00												
COMMISSIONER	0 00	Х						0	0	0			
(14) STEVEN R BURT AIA	1 00												
COMMISSIONER	0 00	Х						0	0	0			
555525/IEN	1 000	l								Form <b>990</b> (2014)			

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec k, unle n offic ustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) JOHN C BALDWIN  Executive Direc	40 00			х				184,325	0	18,433
(16) BILLY LEE WALKER Chief Discipl C	40 00 0 00			х				151,839	0	15,184
(17) JONI SEKO CHF ADMSSN OFCR	40 00 0 00			х				124,957	0	12,496
(18) ELIZABETH WRIGHT GENERAL COUNSEL	40 00			х				111,100	0	11,110
(19) JEFFREY S EINFELDT  CFO/DIR LICENSE	40 00 0 00			х				124,957	0	12,496
(20) RICHARD M DIBBLEE ASST EXEC DIR	40 00			х				129,303	0	12,930

1b	Sub-Total	۰		
c	Total from continuation sheets to Part VII, Section A	•		
d	Total (add lines 1b and 1c)	•	835,481	82,649

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►6

			Yes	No			
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	,					
	on time 1a. 17 res, comprete senegate 7 for such marviaga.	3		No			
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						
	ındıvıdual	4	Yes				
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 I for such person	5		Νo			

Section	ı R	Ind	lene	ndent	Contra	ctors
Section	ı D.	THU	ICNC	HUCHL	CUILLIE	ICLUI 3

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	<b>(C)</b> 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

Statement of Revenue	Form 99								Page <b>9</b>
Total levelue   Related or   Union total free   Company   Compan	Part V	π			nse or note to any lir	ne in this Part VIII			
Description						(A)	(B) Related or exempt function	<b>(C)</b> Unrelated business	Revenue excluded from tax under sections
Description	~ £	1a	Federated camp	paigns 1a					
Description	ant	b	Membership du	es <b>1b</b>					
Description	Ę, Ģ	С	Fundraising eve	ents <b>1</b> c					
Description	iffs ar A	d	Related organiz	zations 1d					
Description	s, G	e	Government grants	s (contributions) <b>1e</b>					
Description	io I Si	f	All other contribution	ons, gifts, grants, and <b>1f</b>					
Description	the the	, a							
Description	onti d O		1a-1f \$			0			
1990   1990	<u>ع ۾</u>	h	lotal. Add lines	sla-lf		0			
3   Investment income (including dividends, interest, and other aimilar amounts)   31,607	e E	3-	ANNUAL CONVENTA	IONC	Business Code		554.454		
3   Investment income (including dividends, interest, and other aimilar amounts)   31,607	even	l _				· ·	<del></del>		
3   Investment income (including dividends, interest, and other aimilar amounts)   31,607	or ⊊			3 & ADM133					
3   Investment income (including dividends, interest, and other aimilar amounts)   31,607	ř					·			
3   Investment income (including dividends, interest, and other aimilar amounts)   31,607	<i>3</i> 5 ⊆	e	MANDATORY CLE F	EES			· · · · · · · · · · · · · · · · · · ·		
3   Investment income (including dividends, interest, and other aimilar amounts)   31,607	je je	f	All other progra	am service revenue					
and other similar amounts)	Š	g	Total. Add lines	s 2a-2f	►	6,610,176			
Browne from merestment of tax exempt bond proceeds   0   0		3				31,607			31,607
10   10   10   10   10   10   10   10		4				·			·
Ga Gross rents   40,969		5	Royalties		🕨	0			
Description   1998   1998   1999					(11) Personal				
Rental income   -433,100   -45				,					
Next			expenses	·					
Comparison of the comparison		C	or (loss)			452.400		452 400	
Ta Gioss amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gian or (loss)  d Net gain or (loss)		d	Net rental incor			-453,100		-453,100	
assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss)  d Net gain or (loss)  d Net gain or (loss)  d Net gain or (loss)  c See Part IV, line 18  b Less direct expenses b  c Net income or (loss) from fundraising events >  b Less direct expenses b  c Net income or (loss) from gaming activities See Part IV, line 19  a b Less direct expenses b  c Net income or (loss) from gaming activities >  b C Net income or (loss) from gaming activities >  b Less cost of goods sold . b  c Net income or (loss) from sales of inventory . >  Miscellaneous Revenue  Business Code  11a BAR JOURNAL b OTHER MISCELLANEOUS REVS  812900  3.095  c d All other revenue  e Total. Add lines 11a-11d   >  139,214		7a		(i) Securities	(II) Other				
b tess cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$			assets other						
a b Less direct expenses		ь	Less cost or						
A Net gain or (loss)			sales expenses						
Sa Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses b c Net income or (loss) from fundraising events > 0  9a Gross income from gaming activities See Part IV, line 19		l _			_	0			
events (not including s of contributions reported on line 1c) See Part IV, line 18					· · · · •	Ŭ			
9a Gross income from gaming activities See Part IV, line 19	<u> </u>		events (not inc						
9a Gross income from gaming activities See Part IV, line 19	塹		of contributions						
9a Gross income from gaming activities See Part IV, line 19	Э́е Э		See Part IV, lin						
9a Gross income from gaming activities See Part IV, line 19	ē	ь	Less direct ex						
See Part IV, line 19 a  b Less direct expenses b  c Net income or (loss) from gaming activities 0  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  0  Miscellaneous Revenue Business Code  11a BAR JOURNAL 136,119 136,119  b OTHER MISCELLANEOUS REVS 812900 3,095  c d All other revenue	₹	С	Net income or (	(loss) from fundraising	events 🛌	0			
b Less direct expenses b  c Net income or (loss) from gaming activities ▶ 0  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 . ▶ 0  Miscellaneous Revenue Business Code  11a BAR JOURNAL 136,119 136,119  b OTHER MISCELLANEOUS REVS 812900 3,095 3,095  c d All other revenue		9a							
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 BAR JOURNAL  OTHER MISCELLANEOUS REVS  812900  3,095  c  d All other revenue  e Total. Add lines 11a-11d									
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 BAR JOURNAL  b OTHER MISCELLANEOUS REVS  812900  3,095  c  d All other revenue  e Total revenue. See Instructions					vities	0			
b Less cost of goods sold . b  c Net income or (loss) from sales of inventory .   Miscellaneous Revenue Business Code  11a BAR JOURNAL 136,119  b OTHER MISCELLANEOUS REVS 812900 3,095  c		104							
c Net income or (loss) from sales of inventory .									
Miscellaneous Revenue       Business Code         11a BAR JOURNAL       136,119         b OTHER MISCELLANEOUS REVS       812900         c       3,095         d All other revenue			<del>-</del>		entory <b>•</b>	0			
b OTHER MISCELLANEOUS REVS  c				-					
c d All other revenue e Total Add lines 11a-11d		11a	BAR JOURNAL	<u> </u>		136,119		136,119	
d All other revenue  e Total Add lines 11a-11d		b	OTHER MISCE	LLANEOUS REVS	812900	3,095			3,095
d All other revenue  e Total Add lines 11a-11d		C							
139,214		l _	All other revenu	ue					
12 Total revenue. See Instructions		e	Total. Add lines	s 11a-11d	🕨	139 214			
		12	Total revenue.	See Instructions .	🗚	6,327,897	6,610,176	-316,981	34,702

# Part IX Statement of Functional Expenses

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

	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX I			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	100,893	100,893		
2	Grants and other assistance to domestic individuals See Part IV, line 22	9,822	9,822		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0	3,022		
4	Benefits paid to or for members	73,887	73,887		
5	Compensation of current officers, directors, trustees, and key employees	909,130	768,800	140,330	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,443,477	1,424,712	18,765	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	108,735	101,725	7,010	
9	Other employee benefits	252,840	236,540	16,300	
10	Payroll taxes	151,511	141,743	9,768	
11	Fees for services (non-employees)	, , , , , , , , , , , , , , , , , , ,	,		
а	Management	0			
ь	Legal	19,802	17,822	1,980	
c	Accounting	69,425		69,425	
d	Lobbying	0		62,120	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	37,276		37,276	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0		37,270	
12	Advertising and promotion	705	670	35	
13	Office expenses	153,229	146,951	6,278	
14	Information technology	125,319	124,066	1,253	
15	Royalties	0	121,000	1,233	
16	Occupancy	145,764	134,103	11,661	
17	Travel	129,298	126,712	2,586	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	120,712	2,300	
19	Conferences, conventions, and meetings	1,460,676	1,446,069	14,607	
20	Interest	0	_, ,	2.,557	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	88,153	83,745	4,408	
23	Insurance	52,389	55,1.5	52,389	
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)				
а	Printing and Publications	207,613	203,461	4,152	
b	LEGISLATIVE	67,807		67,807	
c	BANK AND CC CHARGES	52,284	52,284		
d	PAYMENTS TO SECURITY FUND RESP	40,271	40,271		
e	All other expenses	5,343	5,076	267	
25	Total functional expenses. Add lines 1 through 24e	5,705,649	5,239,352	466,297	0
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

	τχ	Check if Schedule O contains a response or note to any line in t	this Part	:x	<u> </u>		· · · · · · · · · · · · · · · · · · ·
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing			2,886,142	1	2,855,457
	2	Savings and temporary cash investments			3,298,168	2	3,633,810
	3	Pledges and grants receivable, net				3	0
	4	Accounts receivable, net			4,223	4	1,460
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	irectors art II of	, trustees, key		5	0
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary erorganizations (see instructions) Complete Part II of Schedule 1	contribu mployee	ting employers		6	0
Š	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	_				125,315		82,458
	9	Prepaid expenses and deferred charges	1 1		125,315	9	82,438
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	5,234,016			
	b	·	10b	3,379,509	1,827,382		1,854,507
	11	Investments—publicly traded securities				11	0
	12	Investments—other securities See Part IV, line 11		12	0		
	13	Investments—program-related See Part IV, line 11		13	0		
	14	Intangible assets		-		14	0
	15	Other assets See Part IV, line 11				15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34) $$ .			8,141,230	16	8,427,692
	17	Accounts payable and accrued expenses		•	630,264	17	619,236
	18	Grants payable				18	
	19	Deferred revenue			2,362,522	19	2,115,832
	20	Tax-exempt bond liabilities		•		20	
ω.	21	Escrow or custodial account liability Complete Part IV of Sche				21	
<u>a</u>	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqualit	ors, trus				
Liabilit		persons Complete Part II of Schedule L				22	
ï	23	Secured mortgages and notes payable to unrelated third partie				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Pa	ted third	parties,			
		D			209,446	25	131,378
	26	Total liabilities. Add lines 17 through 25			3,202,232	26	2,866,446
ş Ç		Organizations that follow SFAS 117 (ASC 958), check here ►   lines 27 through 29, and lines 33 and 34.	✓ and o	omplete			
ang	27	Unrestricted net assets		•	4,063,712	27	4,580,288
<u></u>	28	Temporarily restricted net assets			875,286	28	980,958
=	29	Permanently restricted net assets				29	
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere ► ୮	and			
9	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
!S S						32	
d.	32	Retained earnings, endowment, accumulated income, or other f  Total net assets or fund balances			4,938,998		5,561,246
¥	33				· · ·	33	· ·
	34	Total liabilities and net assets/fund balances	· · ·	•	8,141,230	34	8,427,692

Par	Reconcilliation 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		6,3	327,897
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,7	05,649
3	Revenue less expenses Subtract line 2 from line 1	3		6	522,248
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			38,998
5	Net unrealized gains (losses) on investments	5		•	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		5,5	561,246
Par	t 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				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	ne <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
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?	е	3a		No
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		

DLN: 93493237005416

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

**Political Campaign and Lobbying Activities** 

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III **Employer identification number** Name of the organization UTAH STATE BAR 87-0271610 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ No Was a correction made? Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	<b>F</b>	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	<b>F</b>	\$ <u></u>		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	<b> -</b>	\$		
4	Did the filing organization file Form 1120-POL for this year?			┌ Yes	√ No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

5 c	hedule C (Form 990 or 990-EZ) 2014					Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).					
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)	(b)		
	rity.	Yes	No	An	nount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c	)(5), c	r sec	ction	l
	301(0)(0).				res	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 Y	'es	
ar	tt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1		4	,031	,25
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a	Current year	2a			6/	,80
b	Carryover from last year	2b				0.0
c	Total	2c				,80
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	<b>3</b>			6/	,72
	political expenditure next year?	4				8
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gi (see instructions), and Part II-B, line 1 Also, complete this part for any additional information	oup list),	Part II	-A, lin	es 1 a	and
	Return Reference Explanation					

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493237005416

OMB No 1545-0047

**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 <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

	me of the organization		Employer identification number
υľA	H STATE BAR		87-0271610
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990,	, Part IV, line 6.	unds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the organization of		nor advised <b>Yes No</b>
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?	it of the donor or donor advisor, or for a	ny other purpose Yes No
aı	<b>t III</b> Conservation Easements. Complete if	the organization answered "Yes" t	o Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education)	n historically important land area certified historic structure
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in t	the form of a conservation
	,		Held at the End of the Year
a	Total number of conservation easements		2a
<b>o</b>	Total acreage restricted by conservation easements		2b
;	Number of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c
I	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d
	Number of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by the organization during
	the tax year 🛌		
	Number of states where property subject to conservati	on easement is located 🕨	
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?		dling of violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments during the year
			a domina Maria a
	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the year
	<b>*</b> \$		4704747077
	Does each conservation easement reported on line $2(c)$ and section $170(h)(4)(B)(II)$ ?	I) above satisfy the requirements of sec	Tyes No
	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia nts	l statements that describes
ar	Complete if the organization answered "Yes		or Other Similar Assets.
1	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X		<b>►</b> \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS		or financial gain, provide the
1	Revenue included in Form 990, Part VIII, line 1		<b>►</b> \$
b	Assets included in Form 990. Part X		<b>&gt;</b> \$

_	Organizations Maintaining Collections of Art,	, His	tori	<u>cal Tı</u>	<u>reasu</u>	ires, or Otl	<u>1er</u>	<u>Similar Asse</u>	ets (co	ntınued)
	Using the organization's acquisition, accession, and other record collection items (check all that apply)	ds, ch	neck	any of	the foll	owing that ar	eas	ignificant use of	fits	
аГ	Public exhibition	d	Γ	Loan	orexc	hange progra	ms			
ь「	Scholarly research	e	Γ	Othe	r					
c 「	Preservation for future generations									
	Provide a description of the organization's collections and explai Part XIII	n hov	w the	y furthe	er the d	organization's	exe	mpt purpose ın		
	During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as j						ımıl		Yes	□ No
Part	IV Escrow and Custodial Arrangements. Comple	te ıf	the	organ	ızatıoı		"Ye:			, 140
	Part IV, line 9, or reported an amount on Form 99 sthe organization an agent, trustee, custodian or other interme					or other asse	s no	t		
	ncluded on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the	follov	vina t	able				I	Yes	No
	explain the analysiment in fact All I and somplete the		·····g ·				Т	Amo	unt	
C	Beginning balance					1	c			
d	Additions during the year					1	d			
e	Distributions during the year					1	e			
_	Ending balance					1	f			
	Did the organization include an amount on Form 990, Part X, line	21,	for e	scrow	rcust	ــــ odıal account	lıab	ılıty?	Yes	┌ No
b ,	f "Yes," explain the arrangement in Part XIII Check here if the	evnla	anatı	on has	heen r	rovided in Pa	rt XI	II		$\Gamma$
Part									• •	•
	(a)Current year		<b>)</b> Prior			wo years back			Four y	ears back
1a	Beginning of year balance									
Ь	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities and programs									
f ,	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current year end balanc	e (lın	ie 1g	, colum	n (a))	held as				
<b>a</b> [	3oard designated or quasi-endowment ▶									
<b>b</b>	Permanent endowment 🕨									
	Femporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%									
	Are there endowment funds not in the possession of the organiza	tion	that	are hel	d and a	administered i	or th	ne		
	organization by							2-73	Yes	No
	(i) unrelated organizations		•				•	3a(i) 3a(ii)		
	( <b>ii)</b> related organizations f "Yes" to 3a(ii), are the related organizations listed as required	· I on S	Sched	· · Iule R?				3a(11)	<u> </u>	<u> </u> 
	Describe in Part XIII the intended uses of the organization's end						-		<u> </u>	<u> </u>
Part					n ansv	wered 'Yes'	to F	orm 990, Part	IV, lıı	ne
	Description of property			) Cost or is (inves		(b)Cost or oth basis (other)		(c) Accumulated depreciation	( <b>d</b> ) Bo	ook value
	and					633,1	42			
<b>1a</b> La										633,142
	uildings					2,979,0	39	2,331,458		633,142 647,581
<b>b</b> Bu	uildings					2,979,0	39	2,331,458		•
<b>b</b> Bu <b>c</b> Le						2,979,0 751,5		2,331,458 423,453		•
<b>b</b> Bu <b>c</b> Le <b>d</b> Ed	easehold improvements						89	· ·		647,581

Part VII Investments—Other Securities. Com	plete 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	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Co	mplete if the organizatioi	n answered 'Yes' to Form 990, Part IV, line 11
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total (Column (h) must equal Form 990 Part X col (B) line 13.)		
Total (Column (B) must equal form 350, fart X, col (B) mic 15 )		
(a) Descrip		(b) Book value
		<u> </u>
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	· · · · ·	
Part X Other Liabilities. Complete if the organ		
Form 990, Part X, line 25.	(b) Pook value	
1 (a) Description of liability	(b) Book value	
Federal income taxes  CAPITALIZED LEASES - ST AND LT	6,378	
CLIENT SECURITY FUND PAYABLE-ST AND LT	125,000	
CHENT SECONTITIONS FATABLE STANSET	123,000	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	121 270	
10tal. (Column (b) must equal Form 990, Part X, col (b) line 25 )	131,378	

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Rever the organization answered 'Yes' to Form 990, Part IV, line 12a.	nue per	Retu	<b>rn</b> Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	L	6,754,349
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments 2a			
b	Donated services and use of facilities	,452		
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII ) 2d			
e	Add lines 2a through 2d	. 2	e	426,452
3	Subtract line <b>2e</b> from line <b>1</b>	. 3	3	6,327,897
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII )			
c	Add lines <b>4a</b> and <b>4b</b>	. 4	с	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)			6,327,897
Part	Reconciliation of Expenses per Audited Financial Statements With Expense if the organization answered 'Yes' to Form 990, Part IV, line 12a.	nses p	er Re	turn. Complete
1	Total expenses and losses per audited financial statements	. :	1	6,132,201
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	5,552		
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII).............. <b>2d</b>			
e	Add lines <b>2a</b> through <b>2d</b>	. 2	e e	426,552
3	Subtract line <b>2e</b> from line <b>1</b>	. [	3	5,705,649
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII)............... 4b			
C	Add lines <b>4a</b> and <b>4b</b>	. 4	k	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18 )	. !	5	5,705,649
Par	t XIII Supplemental Information			
Part	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b at V, lines 4, Part XI, lines 2d and 4b. Also complete this primation		ovide a	ny additional
	Return Reference Explanation			

Senedate S (1 orm 33 o) 2 o 2 o			
Part XIII Supplemental Information	on (continued)		
Return Reference	Explanation		
l			
-			

Schedule D (Form 990) 2014

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

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

**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. OMB No 1545-0047

DLN: 93493237005416

Open to Public Inspection

	e or the organization	Employer identification number		
UTA	AH STATE BAR	87-0271610		
Pa	rt 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 assistance, the selection criteria used to award the grants or assistance?		✓ Yes ┌	

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LAW RELATED EDUCATION 645 S 200 E SALT LAKE CITY, UT 84111			65,000	2,952			SUPPORT FOR ITS EXEMPT PURPOSE
(2) SALT LAKE PEER COURT 645 S 200 E SALT LAKE CITY, UT 84111			0	6,253			SUPPORT FOR ITS EXEMPT PURPOSE
(3) UTAH DISPUTE RESOLUTION 645 S 200 E SALT LAKE CITY, UT 84111			10,000	11,588			SUPPORT FOR ITS EXEMPT PURPOSE

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3
3	Enter total number of other organizations listed in the line 1 table	0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) BOOKS FROM BARRISTERS	25	9,822			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
Grantmaker's Description of How Grants are Used	BAR COMMISSION PROVIDES DIRECTION TO EXECUTIVE DIRECTOR FOR ALL GRANTS AND CONTRIBUTIONS MADE TO WORTHY CHARITIES						

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DLN: 93493237005416

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

7

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization UTAH STATE BAR

**Employer identification number** 

87-0271610 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5b Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown o  (i) Base compensation	f W-2 and/or 1099-MIS  (ii) Bonus &  Incentive  compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
			compensation	compensation				FUIIII 990
BILLY LEE WALKER, Chief Discipl C	(i) (ii)	150,336	1,503		15,184		167,023	
	(i) (ii)	182,500	1,825		18,433		202,758	

Schedule J (Form 990) 2014

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2014

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#### **SCHEDULE 0** (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.

Name of the organization **Employer identification number** UTAH STATE BAR 87-0271610

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4d Other Program Services Description	
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	ALL ATTORNEYS WISHING TO PRACTICE IN UTAH MUST BE MEMBERS OF THE UTAH STATE BAR THE BAR R EQUIRES ANNUAL LICENSING BY JUNE 30 OF EACH YEAR THE BAR SUSPENDS ATTORNEYS NOT MAINTAINING AN APPROPRIATE LICENSE
Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	THE UTAH BAR COMMISSION OVERSEES THE UTAH STATE BAR ELEVEN BAR COMMISSIONERS ARE ELECTED BY BAR MEMBERS TO THE COMMISSION, THE PRESIDENT AND PRESIDENT-ELECT ARE ALSO ELECTED BY BA R MEMBERS TO THOSE OFFICES AND THEY ALSO SERVE AS MEMBERS OF THE BAR COMMISSION, AND TWO N ON-LAWY ER COMMISSIONERS ARE APPOINTED BY THE UTAH SUPREME COURT ALL COMMISSIONERS SERVE A THREE-YEAR TERM THE PRESIDENT-ELECT IS NOMINATED BY THE BODY OF COMMISSIONERS AND IS ELE CTED BY ALL MEMBERS OF THE BAR ANNUALLY THE PRESIDENT-ELECT SUCCEEDS THE SITTING PRESIDEN T
Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	THE SUPREME COURT OF UTAH HAS DELEGATED RESPONSIBILITY OF THE UTAH STATE BAR'S MANAGEMENT TO THE BAR COMMISSION, BUT RETAINS ULTIMATE AUTHORITY OVER THE MANAGEMENT, ADMINISTRATION AND DISCIPLINE OF ATTORNEY'S PRACTICING IN THE STATE OF UTAH
Form 990, Part VI, Line 11b Form 990 Review Process	FORM 990 IS REVIEWED BY EXECUTIVE DIRECTOR AND FINANCIAL ADMINISTRATOR
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	MEMBERS OF THE BAR COMMISSION ARE REQUIRED TO ANNUALLY DISCLOSE CONFLICTS OF INTEREST OR R ELATIONSHIPS REQUIRED TO BE DISCLOSED ADHERENCE TO CONFLICT OF INTEREST POLICY REQUIREMEN TS ARE REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	BAR COMMISSION DETERMINES APPROPRIATE LEVEL OF EXECUTIVE DIRECTOR COMPENSATION BASED ON AL L AVAILABLE DATA EXECUTIVE DIRECTOR DETERMINES APPROPRIATE LEVEL OF KEY EMPLOYEE AND MANA GEMENT COMPENSATION BASED ON ALL AVAILABLE DATA
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	EXECUTIVE DIRECTOR DETERMINES APPROPRIATE LEVEL OF KEY EMPLOYEE AND MANAGEMENT COMPENSATION BASED ON ALL AVAILABLE DATA
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE UTAH STATE BAR WEBSITE CONTAINS BAR COMMSSION NAMES, ADDRESSES AND CONTACT INFORMATION IT ALSO CONTAINS CERTAIN GOVERNING DOUCMENTS AND POLICIES, ANNUAL AUDITED FINANCIAL STAT EMENTS, BAR COMMISSION MEETING AGENDAS AND MINUTES
Form 990, Part XII, Line 2 Change of Oversight or Selection Process	THE BUDGET AND FINANCE COMMITTEE, IN CONCERT WITH THE BAR COMMISSION, THE EXECUTIVE DIRECT OR AND FINANCIAL ADMINISTRATOR, REVIEWS THE QUALIFICATIONS OF A SMALL GROUP OF AUDITORS IN MAKING SELECTION AND APPOINTMENT OF THE INDEPENDENT AUDITOR