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WCHANGEO OF ACCOUNTING PERIOD OMB No 1545-0047 Return of Organization Exempt From Income Tax 2015 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 Open to Public Department of the Treasury Internal Revenue Service Inspection Information about Form 990 and its instructions is at www irs gov/form990. For the 2015 calendar year, or tax year beginning 07/01/15 09/30/15 , and ending C Name of organization D Employer identification number Check if applicable UTAH SPORTS COMMISSION FOUNDATION Address change Doing business as 87-0651075 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite 801-328-2372 201 SOUTH MAIN STREET #2125 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated SALT LAKE CITY UT 84111 1,465,796 G Gross receipts \$ Amended return Name and address of principal officer H(a) is this a group return for subordinates? Yes Application pending JEFF ROBBINS No 201 SOUTH MAIN STREET H(b) Are all subordinates included? SALT LAKE CITY UT 84111 If "No." attach a list (see instructions) X 501(c)(3) 501(c) ( ) < (insert no ) 4947(a)(1) or Tax-exempt status WWW.UTAHSPORTSCOMMISSION.COM Website > H(c) Group exemption number ▶ X Corporation Trust Association Year of formation 2000 Form of organization M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities THE ORGANIZATION IS GOVERNED BY AN ALL-VOLUNTEER BOARD OF TRUSTEES 1 9 2 Activities & Governance CONSISTING OF STATEWIDE SPORTS, BUSINESS, COMMUNITY, AND GOVERNMENT LEADERS CREATED TO FOSTER NATIONAL AND INTERNATIONAL SPORTS COMPETITIONS. 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 29 3 Number of voting members of the governing body (Part VI, line 1a) 3 28 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 0 250 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 Prior Year **Current Year** SCANNEGOREP 4,612,591 1,411,125 8 Contributions and grants (Part VIII, line 1h) 63,425 52,186 9 Program service revenue (Part VIII, line 2g) 7,992 2,485 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 834 0 4,687,842 1,465,796 12 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 325,718 78,822 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 7,771 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 909,341 2,008,826 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A) tine 25) 2,087,648 3,235,059 1,452,783 -621,85219 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year RS-08 5,960,729 7,961,583 20 Total assets (Part X, line 16) AUG 19 2016 3,737,556 1,114,850 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 4,845,879 4,224,027 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 0/6 Sign Zobbins Here Type or print name and title Print/Type preparer's name Date Check Paid

DAVID L. CRANDALL 08/12/16 self-employed P00080310 Preparer LARSON & COMPANY, 87-0516083 Firm's EIN ▶ Firm's name **Use Only** 9065 SOUTH 1300 EAST SANDY, UT 84094 801-313-1900 Firm's address Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes | No

For Paperwork Reduction Act Notice, see the separate instructions

Form **990** (2015)

Part III Statement of Program Service Accomplishments

the total expenses, and revenue, if any, for each program service reported

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

X;

)

1 Briefly describe the organization's mission

SEE	SCHEDULE	0
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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 X No If "Yes," describe these new services on Schedule O

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes X No If "Yes," describe these changes on Schedule O

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,

4a (Code ) (Expenses \$ 1,072,964 including grants of \$ ) (Revenue \$ SPORTS AWARDS AND SPONSORSHIPS - THE SPORTS AWARDS AND SPONSORSHIP PROGRAM IS DESIGNED TO ASSIST ORGANIZATIONS IN ATTRACTING AND RETAINING SPORT OPPORTUNITIES IN UTAH. THE APPLICANT MUST DEMONSTRATE THAT THE AWARD IS A KEY COMPONENT TO THE BIDDING ON, HOSTING OF, AND/OR THE OVERALL SUCCESS OF THE EVENT. GENERALLY, THE ORGANIZATION DOES NOT PARTICIPATE FINANCIALLY IN THE CREATION OR START-UP OF EVENTS WITH LITTLE OR NO OPERATING HISTORY AND ALL GRANTS ARE SUBJECT TO THE AVAILABILITY OF FUNDING. SINCE ORGANIZATION INCEPTION THROUGH THE 2015 FISCAL YEAR, THE SPORTS AWARDS AND SPONSORSHIP PROGRAM HAS PROVIDED FUNDING TO APPROXIMATELY 400 EVENTS ACROSS 27 DIFFERENT CITIES THROUGHOUT UTAH. THE TOTAL MEDIA VALUE FROM THOSE SAME EVENTS APPROXIMATES \$350 MILLION. THE ABOVE DATA IS DEEMED TO BE ACCURATE

912,801 including grants of \$ 4b (Code ) (Expenses \$ ) (Revenue \$ WEB.COM TOUR UTAH CHAMPIONSHIP - THE UTAH SPORTS COMMISSION, AS A 501(C)(3) ENTITY, CONTRACTS DIRECTLY WITH THE PGA TOUR TO ACT AS HOST ORGANIZATION FOR THE WEB.COM TOUR'S UTAH CHAMPIONSHIP, THE ONLY OFFICIALLY SANCTIONED PGA TOUR EVENT HOSTED IN THE STATE OF UTAH. SUPPORT FOR THE TOURNAMENT COMES PRIMARILY FROM PRIVATE SECTOR SPONSORSHIPS FROM THE CORPORATE COMMUNITY IN THE FORM OF CASH AND IN-KIND DONATIONS, WHICH OFFSET DIRECT EVENT EXPENSES. PAST WINNERS OF THE UTAH CHAMPIONSHIP HAVE GONE ON TO ACHIEVE TREMENDOUS SUCCESS ON THE PGA TOUR, INCLUDING JOHN DALEY AND ZACH ONE OF THE PGA TOUR'S PRIMARY OBJECTIVES THROUGH ITS TOURNAMENTS IS TO GIVE BACK TO THE LOCAL COMMUNITY THROUGH CHARITABLE GIVING AND THE UTAH CHAMPIONSHIP HAS ASSISTED IN THIS GOAL, WITH THE PRIMARY BENEFICIARY

4C (Code ) (Expenses \$ 41,168 including grants of \$ ) (Revenue \$ EVENT ATTRACTION, CREATION, RETENTION AND EXPANSION - THROUGH THE JOINT EFFORTS OF THE ORGANIZATION, ITS PARTNERS, AND THE STATE OF UTAH, THERE IS A STRATEGY AND TEAM IN PLACE TO WORK WITH THE PUBLIC AND PRIVATE SECTORS TO PROMOTE THE STATE OF UTAH AS A MAJOR PLAYER IN THE NATIONAL AND INTERNATIONAL SPORTS MARKETPLACE. THE ORGANIZATION THROUGH ITS STRATEGIC AND MARKETING INITIATIVES, WILL ATTRACT, COORDINATE, AND HOST SPORTING EVENTS THAT WILL MAKE A SIGNIFICANT CONTRIBUTION TO UTAH'S ECONOMY, IMAGE AND SPORTS INDUSTRY. SINCE INCEPTION THROUGH THE 2015 FISCAL YEAR, THE ORGANIZATION HAS PARTNERED ON APPROXIMATELY 650 EVENTS WITH ITS TEAM UTAH PARTNERS ACROSS 27 DIFFERENT CITIES AND TOWNS THROUGHOUT UTAH.

4d	Other program services (Describe in Sche	edule O )		<del>-</del> ·
	(Expenses \$ 23,384	including grants of \$	) (Revenue \$	)
4e	Total program service expenses ▶	2,050,317		<u> </u>

**Checklist of Required Schedules** 

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			٠,,
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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,	_		x
6	Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	_ 5		
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	Ť		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
~ 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		X
С	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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		**	
	Schedule D, Parts XI and XII	12a	X	
a	Was the organization included in consolidated, independent audited financial statements for the tax year? If	40:		v
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		X
b		14a		
U	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	176		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
			900	1 (2015)

Part IV Checklist of Required Schedules (continued)

			Yes	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	l	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		X
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		x
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32_		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_	X
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		X
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		X_
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	X	<u> </u>

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

	Check if Schedule O contains a response of note to any line in this part v			
10	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0	-		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			
С	reportable gaming (gambling) winnings to prize winners?	1 40		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		
Za				
h		ا بر		
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		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	20		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a		
b 4a		_3b		<del> </del>
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1 :		
	account)?	4a		x
b	If "Yes," enter the name of the foreign country	70		<del></del>
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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			<del> </del> -
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	- <b>X</b> -	_
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
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		<u> </u>
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		<del>                                     </del>
0	Section 501(c)(7) organizations. Enter			
a b	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	-		
ا 1	Section 501(c)(12) organizations. Enter	-		
a	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
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?	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			
С	Enter the amount of reserves on hand	<u> </u>		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Form 990 (2015) UTAH SPORTS COMMISSION FOUNDATION 87-0651075 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 X Section A. Governing Body and Management No Yes 29 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 28 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 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 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 X 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? X 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 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? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization X 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 safequard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE 17 List the states with which a copy of this Form 990 is required to be filed > 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 Another's website X Upon request Own website Other (explain in Schedule O) 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 State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION 201 SOUTH MAIN STREET, NO 2125

801-328-2372

UT 84111

SALT LAKE CITY

DAA

Form **990** (2015)

# 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 orga	F	/ rela	ted o			ion comp			
(A) Name and Title	(B) Average hours per week (list any	DO:	x, unic	Pos check ess pe	rson i	than one is both an ir/trustee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) JEFF ROBBINS									_
	40.00								_
PRESIDENT & CEO	0.00_	X		X	L		43,010	0	0
(2) SCOTT ANDERSON	1 00								
	1.00	3,5							^
TRUSTEE (3) CURTIS BRAMBLE	0.00	X		<del> </del>			0	0	0
(3) CORITS BRANBLE	1.00			1					
TRUSTEE	0.00	x					0	0	0
(4) CINDY CRANE	0.00				-	<del>  </del> -			
(,,	1.00								
TRUSTEE	0.00	x					0	0	0
(5) TOM DOLAN	-								,
	1.00								
TRUSTEE	0.00	X					0	0	0
(6) MIKE DOWSE									
	1.00	l							
TRUSTEE	0.00	X		-	-		0	0	0
(7) GREG EASTON	1 00								
mpiicmee	1.00	$ \mathbf{x} $					0	o	0
TRUSTEE (8) SPENCER ECCLES	0.00	<u> </u>	-						
(8) SPENCER LCCEES	1.00	İ							
TRUSTEE	0.00	x					0	o	0
(9) DELL LOY HANSEN		†==							
(-7	1.00	1							
TRUSTEE	0.00	x					0	0	0
(10) ERIC HEIDEN									
	1.00								
TRUSTEE	0.00	X					0	0	0
(11) GARY HERBERT									
	1.00								
HONORARY CHAIR	0.00	X	L.	<u> </u>	<u>L</u>	<u> </u>	0	0	0

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	es, a	nd Highest Compensated	Employees (continued)	· · · · · · · · · · · · · · · · · · ·
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per	( (	o not		sition more	than c	one	Reportable compensation	Reportable compensation from	Estimated amount of
	week	bo	x, unli	ess pe	erson	is both	an	from	related	other
	(fist any hours for	<u> </u>			_	r/trust		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	de Me	Institutional	Officer	Tey o	Highest	Former	(W-2/1099-MISC)		organization
	organizations below dotted	ecto	ğ	۳ ا	l due	st co	<u> </u>			and related organizations
	line)	Individual trustee or director	al tr		employee	mpe				
		l e	trustee			st compensated yee				
(12) GREG HUGHES		$\vdash$	<del>  -</del>			-				
	1.00			ŀ						
TRUSTEE	0.00	x			ŀ			0	0	0
(13) DAVID LAYTON										
	1.00									
TRUSTEE	0.00	X		L				0	0	0
(14) AL MANSELL										
	1.00									
TRUSTEE	0.00	X	_		ļ			0	0	0
(15) BEN MCADAMS										
	1.00	l								
TRUSTEE	0.00	X	_			<u> </u>		0	0	0
(16) STEPHEN MILLE						i				
MDIICMER	1.00	v	İ						_	_
TRUSTEE (17) PETER MOUSKON		X						0	0	0
(17) PEIER MOUSKON	1.00									
TRUSTEE	0.00	x						0	o	o
(18) WAYNE NIEDERH	<u> </u>	-	<del>                                     </del>							
(50) (1111111 1111111111111111111111111111	1.00									
TRUSTEE	0.00	x	-	-	-	-	-		0	
(19) JASON PERRY										
	1.00									
TRUSTEE	0.00	X						0	0	0
1b Sub-total							<b>•</b>	43,010		
c Total from continuation she	ets to Part VII,	Secti	ion A	4			<b>•</b>			
d Total (add lines 1b and 1c)							<u> </u>	43,010		
2 Total number of individuals (in reportable compensation from				hose	e liste	ed at	ove	) who received more than \$	\$100,000 of	
Toportable compensation from	the organization	_								Yes No
3 Did the organization list any fo								yee, or highest compensate	ed	3 X
employee on line 1a? If "Yes,"  4 For any individual listed on line								and other compensation fr	rom the	3 X
organization and related organ										
individual										4 X
5 Did any person listed on line 1 for services rendered to the organization.									ndividual	5 X
Section B. Independent Contracto		C3, (	201114	nete	<u> </u>	cuule	<u> </u>	or such person	-	5 21
1 Complete this table for your five		ensat	ed ır	ndep	ende	ent co	ontra	actors that received more th	an \$100,000 of	
compensation from the organiz	zation Report co	mpe	nsat	ion f	or th	e cal	enda	ar year ending with or withir	n the organization's tax yea	
Name and	(A) business address							Descrip	(B) tion of services	(C) Compensation
	<u> </u>									
					_					
<del></del>										<del>-  </del>
										<del></del>
								. <u> </u>		
2 Total number of independent of received more than \$100,000 or	contractors (inclu	ding	but i	not li	mite	d to t	hose	e listed above) who		
Teceived more man \$100,000 to	or compensation	11011	· ine	orga	111140	HOH			00	5 990 (0045

(B)

Average

Part VII

(A)

Name and title

Reportable

(D)

Reportable

(F)

Estimated

	week (list any	bo	x, unl	ess pe	rson i	s both	an	compensation from the	related organizations (W-2/1099-MISC)	:	amount of other compensation from the		
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(44-271033-4413-0)		organiza and rela organiza	ation ated	
(20) MIKE PLANT	1.00					ŀ							
TRUSTEE	0.00	x						0	0				0
(21) J. STEVEN PRI													
TRUSTEE	1.00	x						0	o				0
(22) DAVID SIMMONS		1				<u> </u>				<u> </u>	·		
	1.00												
TRUSTEE	0.00	X	ļ	<u> </u>	<u> </u>			0	0				0
(23) JAMES L. SORE													
TRUSTEE	1.00	x						0	0				0
(24) BRAD WILSON	0.00				<u> </u>						-		
	1.00												
TRUSTEE	0.00	X						0	0				0
(25) DAVID WINDER	1 00												
TRUSTEE	1.00	x						О	o				0
(26) DAVID WUNDERI							-						
	1.00						ļ						
TRUSTEE	0.00	X	_	_			_	0	0				-0
1b Sub-total		1		<u> </u>		l	<b>•</b>		·				
c Total from continuation shee	ets to Part VII,	Secti	ion A	4			•						
d Total (add lines 1b and 1c)							▶						
2 Total number of individuals (increportable compensation from			d to t	hose	liste	ed at	ove	) who received more than \$	3100,000 of				
reportable compensation nom	the organization							_				Yes	No
3 Did the organization list any fo								yee, or highest compensate	ed				
employee on line 1a? If "Yes," 4  For any individual listed on line								and other compensation fr	om the		3		
organization and related organ													
individual  5 Did any person listed on line 1a	a receive or acc	rue c	omn	enca	tion	from	anv	r unrelated organization or i	ndwdual		4		
for services rendered to the org											5		
Section B. Independent Contracto	_												
<ol> <li>Complete this table for your five compensation from the organization</li> </ol>										ır			
	(A) business address								(B) tion of services		Co	(C) mpensati	
					_							пропова	<u> </u>
	<u> </u>					-						-	
												_	
							<u> </u>				<u> </u>		
Total number of independent c	ontractors (inclu	ıdına	but	not li	mite	d to t	hose	e listed above) who		<del></del>	<del>                                     </del>		
received more than \$100,000 c								——————————————————————————————————————					
DAA											Forn	ո 990	(2015)

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

(C)

Position

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (C) (D) Revenue Unrelated business Total revenue exempt excluded from tax revenue under sections revenue 1a Federated campaigns 1a b Membership dues 1b 1c c Fundraising events d Related organizations 1d Contributions, and Other Simi 1,021,000 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 390,125 1f 125,625 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 1,411,125 Program Service Revenue Busn Code 52,186 52,186 2a UTAH CHAMPIONSHIP GOLF h f All other program service revenue 52,186 g Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, 2,485 2,485 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents **b** Less -rental exps c Rental inc or (loss) Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV. line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold ▶ c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b d All other revenue Total Add lines 11a-11d 52,186 Total revenue. See instructions 1,465,796 2,485 Form 990 (2015)

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All other		ete column (A)	
	Check if Schedule O contains a respons		-		
	not include amounts reported on lines 6b, 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				
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	43,010	27,956	8,602	6,452
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	31,377	28,408	4,177	-1,208
8	Pension plan accruals and contributions (include	,	==/==	-,	
	section 401(k) and 403(b) employer contributions)		-		
9	Other employee benefits				
10	Payroll taxes	4,435	3,357	762	316
11	Fees for services (non-employees)	1,130	3,337	, 02	
	Management				
a	<del></del>	1,079	·- ·-	1,079	<del>.</del>
b	<u> </u>	7,284	<del></del>	7,284	
C C	Accounting	1,204		7,204	
	Lobbying  Preferenced fundamental converses See Bort IV line 17				
_	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g		1 061	1 061		
40	(A) amount, list line 11g expenses on Schedule O )	4,861	4,861		<del></del>
12	<u> </u>	35,875	35,875	1 244	142
13	Office expenses	32,158	30,671	1,344	143
14	Information technology				
15	Royalties	6 770	F 101	1 1 6 5	400
16	Occupancy	6,778	5,131	1,165	482
17	Travel	10,097	10,097		
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	760	575	131	54
23	Insurance	10,057	5,709	3,811	537
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25 column	ļ			
	(A) amount, list line 24e expenses on Schedule O)				
а	SPORT SPONSORSHIP	1,063,500	1,063,500		
b	TOURNAMENT EXPENSES	715,051	715,051		
С	PROMOTIONAL EXPENSE	114,399	114,399		
d	STATE OF SPORT & OLYMPIC	5,020	4,052		968
е	All other expenses	1,907	675	1,205	27
_25	Total functional expenses. Add lines 1 through 24e	2,087,648	2,050,317	29,560	7,771
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 (B) (A) Beginning of year End of year Cash-non-interest bearing 3,567,472 5,452,511 2 Savings and temporary cash investments 2 478,400 4,154,258 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net 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 215,770 Notes and loans receivable, net 7 8 Inventories for sale or use 8 13,678 7,932 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 164,756 other basis Complete Part VI of Schedule D 10a 149,580 15,165 15,176 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 975 975 15 Other assets See Part IV, line 11 15 5,960,729 961,583 Total assets Add lines 1 through 15 (must equal line 34) 16 880,850 623,637 Accounts payable and accrued expenses 17 17 18 \_ Grants payable\_ 18 234,000 3,063,000 19 19 Deferred revenue 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 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 50,919 of Schedule D 1,114,850 3,737,556 Total liabilities. Add lines 17 through 25 26 X and Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 4,845,879 Unrestricted net assets 27 4,224,027 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 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 4,845,879 4,224,027 33 Total net assets or fund balances 33 5,960,729 7,961,583 Total liabilities and net assets/fund balances

	1990 (2015) UTAH SPORTS COMMISSION FOUNDATION 87-0651075				Pa	ge <b>12</b>
Pa	rt 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		1,4	65,	796
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,0		
3	Revenue less expenses Subtract line 2 from line 1	3		-6	21,	852
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,8	45,	879
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		4,2	24,	027
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					-
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		_		,	
	Schedule O					
3а	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		<u> </u>
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 stens taken to undergo such audits			3h		

Form **990** (2015)

SCHEDULE A (Form 990 or 990-EZ) **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

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

UTAH SPORTS COMMISSION FOUNDATION

Employer identification number 87-0651075

_ <u>P</u>	Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions												
The	orgar	nization is not	a private foundation becaus	e it is (For lines 1 through 11, ch	neck only	one box	1						
1		A church, co	nvention of churches, or asse	ociation of churches described in	section	170(b)(1	)(A)(ı).						
2		A school des	cribed in section 170(b)(1)(	A)(ii). (Attach Schedule E (Form	990 or 99	90-EZ))							
3				ce organization described in sec			iı).						
4		•	•	in conjunction with a hospital d	•	,, ,, ,,	•	soital's name					
	-	city, and state	<del>-</del>					opital o manio,					
5		-		of a college or university owned o	or operate	d by a go	wernmental unit described in						
,				•	n operate	u by a go	verninental unit described in						
_	—	section 170(b)(1)(A)(ıv). (Complete Part II )  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
6	37		-				• •						
7	X												
	$\Box$	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 33 1/3% of its support from contributions, membership fees, and gross											
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its											
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses												
		acquired by t	he organization after June 30	0, 1975 See section 509(a)(2).	(Complet	e Part III	)						
10		An organizati	on organized and operated	exclusively to test for public safe	y See <b>s</b> e	ction 50	9(a)(4).						
11		An organizati	on organized and operated e	exclusively for the benefit of, to p	erform the	e functior	ns of, or to carry out the purpose	es of					
		one or more	publicly supported organizati	ons described in section 509(a)	(1) or sec	tion 509	(a)(2) See section 509(a)(3).	Check					
		the box in line	es 11a through 11d that desc	cribes the type of supporting orga	anization	and comp	plete lines 11e, 11f, and 11g						
а	the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving												
	_			o regularly appoint or elect a ma		•							
			You must complete Part I'										
b	$\Box$	•		ised or controlled in connection	with its su	ipported (	organization(s) by having						
-	`			organization vested in the same									
			s) You must complete Par		pordona	mat conti	or or manage the supported						
_			•	orting organization operated in c	onnoction	with on	d functionally intograted with						
С	Ш												
				ions) You must complete Part									
d	لــا			supporting organization operated									
				anization generally must satisfy									
				complete Part IV, Sections A									
е				d a written determination from th			pe I, Type II, Type III						
_				ctionally integrated supporting o	rganizatio	n							
f			of supported organizations										
g	Pro	vide the follow	ving information about the su	pported organization(s)	ı		· -						
(		of supported	(ii) EIN	(iii) Type of organization	(IV) is the o		(v) Amount of monetary	(vi) Amount of					
	org	anization		(described on lines 1–9 above (see instructions))	listed in you docur		support (see instructions)	other support (see instructions)					
				above (see this additions))	docui		man denomaly	instructions)					
					Yes	No							
(A)													
(B)							-						
(C)													
(D)					_			<u> </u>					
/													
(E)													
. – ,													
Tota	ıt												

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 I f the organization fails to qualify under the tests listed below, please complete Part III)

tion A. Public Support						_
ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,066,115	3,228,688	3,999,025	4,612,591	1,411,125	16,317,544
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						,
The value of services or facilities furnished by a governmental unit to the organization without charge		ļ				
Total. Add lines 1 through 3	3,066,115	3,228,688	3,999,025	4,612,591	1,411,125	16,317,544
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)						72 170
, , , ,				· · · · · ·	<del></del>	72,170 16,245,374
	<u> </u>	1	1			16,245,374
	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
			<del> </del>			16,317,544
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,499	8,883	8,025	7,992	2,485	42,884
Net income from unrelated business activities, whether or not the business is regularly carried on				·		
Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	12,745	7,397	7,076	3,831		31,049
Total support. Add lines 7 through 10						16,391,477
Gross receipts from related activities, etc. (	(see instructions)				12	52,186
First five years If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c	)(3)	
-	- ·		•		, ,	<b>&gt;</b> [
tion C. Computation of Public Su	ipport Percent	age				
Public support percentage for 2015 (line 6,	column (f) divided	by line 11, column	(f))	-	14	99 11 %
Public support percentage from 2014 Sche	edule A, Part II, line	14			15	98.83%
33 1/3% support test—2015. If the organi	zation did not check	the box on line 1	3, and line 14 is 33	1/3% or more, che	eck this	
box and stop here The organization quali	fies as a publicly su	pported organizati	on			<b>▶ X</b>
33 1/3% support test—2014. If the organi	zation did not check	c a box on line 13 o	or 16a, and line 15	ıs 33 1/3% or more	e,	
check this box and stop here. The organiz	ation qualifies as a	publicly supported	organization			▶ _
10%-facts-and-circumstances test—201	5. If the organization	n did not check a t	oox on line 13, 16a	, or 16b, and line 1	4 is	
10% or more, and if the organization meets	s the "facts-and-circ	umstances" test, c	heck this box and	stop here. Explain	ıın	
Part VI how the organization meets the "factorganization"	cts-and-circumstanc	es" test. The orga	nization qualifies a	s a publicly suppor	ted	<b>•</b>
15 is 10% or more, and if the organization	meets the "facts-and	d-circumstances" t	est, check this box	and stop here.		
supported organization						<b>&gt;</b>
<b>Private foundation</b> If the organization did instructions	I not check a box or	ı lıne 13, 16a, 16b,	17a, or 17b, check	k this box and see		▶ [
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  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)  Public support. Subtract line 5 from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business—activities, whether or not the business—activities, whether or not the business—activities, whether or not the business—is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (First five years If the Form 990 is for the organization, check this box and stop here. The organization, check this box and stop here. The organization Quality support test—2015. If the organ box and stop here The organization quality support test—2014. If the organization was and stop here. The organization meets this box and stop here. The organization fullow-facts-and-circumstances test—2010% or more, and if the organization meets the "fair organization in Part VI how the organization meets the "fair organization in Part VI how the organization meets the "fair organization in Part VI how the organization meets the "fair organization Part VI how the organization meets the "fair organization  10%-facts-and-circumstances test—20115 is 10% or more, and if the organization meets the "fair organization in Part VI how the organization meets the "fair organization Part VI how the organization meets the "fair organization in Part VI how the organization meets the "fair organiz	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  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)  Public support. Subtract line 5 from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business—activities, whether or not the business—is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc (see instructions)  First five years If the Form 990 is for the organization's first, organization, check this box and stop here  tion C. Computation of Public Support Percent.  Public support percentage for 2015 (line 6, column (f) divided Public support percentage from 2014 Schedule A, Part II, line 33 1/3% support test—2015. If the organization did not check box and stop here The organization qualifies as a publicly support percentage from 2014 Schedule A, Part II, line 33 1/3% support test—2015. If the organization did not check check this box and stop here. The organization qualifies as a 10%-facts-and-circumstances test—2015. If the organization organization organization meets the "facts-and-circumstance test—2014. If the organization meets the "facts-and-circumstance test—2014. If the organization meets the "facts-and-circumstance test—2014. If the organization organization in Part VI how the organization meets the "facts-and-circumstance test—2014. If the organization meets the "facts-and-circumstance test—2014. If the organization meets the "	Indiar year (or fiscal year beginning in) ►  Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  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)  Public support. Subtract line 5 from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc (see instructions)  First five years If the Form 990 is for the organization's first, second, third, four organization, check this box and stop here  tion C. Computation of Public Support Percentage  Public support percentage from 2014 Schedule A, Part II, line 14  33 1/3% support test—2015. If the organization did not check the box on line 13 tox and stop here. The organization qualifies as a publicly supported organization was and stop here. The organization qualifies as a publicly supported organization or or orne, and if the organization meets the "facts-and-circumstances" test, c Part VI how the organization meets the "facts-and-circumstances" test, c Part VI how the organization meets the "facts-and-circumstances" test explain in Part VI how the organization meets the "facts-and-circumstances" test supported organization  10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, incompleted organization.	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  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)  Public support. Subtract line 5 from line 4  **tion B. Total Support**  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. Add lines 7 through 10  Gross receipts from reliated activities, etc (see instructions)  First five years if the Form 90 is for the organization's first, second, third, fourth, or fifth tax year organization, check this box and stop here  tion C. Computation of Public Support Percentage  Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))  Public support test—2015. If the organization did not check a box on line 13, and line 14 is 33 1/3% support test—2015. If the organization did not check a box on line 13, 16a 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization did not check a box on line 13, 16a 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization did not check a box on line 13, 16a 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test. Check this box ends or more, and if the org	Giffs, grants, contributions, and membership fees received (Do not include any "unusual grants")  Tax revenues leved for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines' through 3  3,066,115  3,228,688  3,999,025  4,612,591  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)  Public support. Subtract line 5 from line 4  **tion B.** Total Support**  Amounts from line 4  **Total Audine in Formal Included on securities loans, reints, royalities and income from similar sources  Net income from unrelated business are calvideneds. Supplement received on securities loans, reints, orgalities and income from similar sources  Net income from unrelated business are structured. Add lines 7 through 10  Gross receives from felated activities, whether or not the business is regularly carried on Other income from 2014 Schedule A, Part II, line 14  31/37% support test—2015. (life 6, column (f) divided by line 11, column (f))  Public support percentage from 2014 Schedule A, Part II, line 14  33/13% support test—2015. (life 6, column (f) divided by line 11, column (f))  Public support percentage from 2014 Schedule A, Part II, line 14  33/13% support test—2015. (life for ganization did not check a 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  10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 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 t	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  3,066,115 3,228,688 3,999,025 4,612,591 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1 1,411,125 1

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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	on fails to qualify unde	r the tests listed below, please complete Part II.)

Sec	tion A. Public Support	quality arroor a	To tooto notou	ociott, pioacc c	orripioto i arcii	/	
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u></u>	line 6)			<u> </u>			L
	tion B. Total Support  dar year (or fiscal year beginning in) ▶ ─	- (a) 2011 -	- (b) 2012	(a) 2012	(4) 2014	(a) 2015	(f) Total
9	Amounts from line 6	- (a) 2011 -	- <b>(b)</b> 2012 -	- (c) 2013 -	_ <b>(d)</b> 2014 -	(e) 2015_	(f) Total
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						
С	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		, second, third, for	irth, or fifth tax yea	r as a section 501(	c)(3)	
	organization, check this box and stop here						<u> </u>
	tion C. Computation of Public Su						
15	Public support percentage for 2015 (line 8,		•	n (f))		15	%
16	Public support percentage from 2014 Sche					16	<u>%</u>
	tion D. Computation of Investme		<del></del>	actions (f)		17	0/
17 18	Investment income percentage for 2015 (II Investment income percentage from 2014			, column (f))		17	<u>%</u> %
10 19a	33 1/3% support tests—2015. If the orga			14 and line 15 is	more than 33 1/3%		
	17 is not more than 33 1/3%, check this bo						▶ □
b	33 1/3% support tests—2014. If the orga						ـــا
	line 18 is not more than 33 1/3%, check thi						▶ []
20	Private foundation. If the organization did	not check a box c	on line 14, 19a, or	19b, check this box	and see instruction	ons	<b>▶</b> □

## Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on 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.)

	Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and com	plete Part V)		
Sect	ion 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_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		
С	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	Зс		
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		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
- <b> 5a</b> -	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		b	SSSS USUNDANCE
	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		
þ	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	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 or 990-EZ)	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 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI	9b		
С	Did a disqualified person (as defined in line 9a) 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 section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b 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		

	tille A (Form 990 or 990-EZ) 2015 UTAH SPORTS COMMISSION FOUNDATION 87-065107	2		Page
Pai	rt IV Supporting Organizations (continued)			_
		لـــــا	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
Seci	ion 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		İ	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	:		
	supervised, or controlled the supporting organization	2		
Sect	ion 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	1		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sect	ion 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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	***		- a-a-
	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		
Sect	ion 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)			
а	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			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ns)		
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	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.			
э a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
D		2		
<del></del>	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b_		L

Part V Type III Non-Functionally Integrated 509(a)(3) Support			.075 Page 6
Check here if the organization satisfied the Integral Part Test as a qualifying tru			
other Type III non-functionally integrated supporting organizations must comple			
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	<u> </u>	
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	<u> </u>	
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-i	integrated Type III s	upporting organization (	see
instructions)	- ••		

Schedule A (Form 990 or 990-EZ) 2015

Schedu <b>Par</b>	ule A (Form 990 or 990-EZ) 2015 UTAH SPORTS COMMI t V Type III Non-Functionally Integrated 509(a)(3)			075 Page 7
-	on D - Distributions	Supporting Organiza	tions (continued)	Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose		<u> </u>	Current rear
2	Amounts paid to supported organizations to accomplish exempt purposes		<del></del>	
-	organizations, in excess of income from activity	or supported		
3	Administrative expenses paid to accomplish exempt purposes of suppo	orded organizations		
4	Amounts paid to acquire exempt-use assets	oned organizations		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			<u> </u>
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organizations	tion is responsive		·
0	(provide details in Part VI) See instructions	mon is responsive		
9	Distributable amount for 2015 from Section C, line 6	<del>-</del> -	<del></del>	
				<u> </u>
10	Line 8 amount divided by Line 9 amount	(1)	(::)	()
	Section E - Distribution Allocations (see instructions)	(I) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015			
а				
b				
С				
d	From 2013			
е	From 2014			
_ f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
- h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			-=
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section			
	D, line 7 \$			
а	Applied to underdistributions of prior years	, , , ,		
	Applied to 2015 distributable amount		€	
С	Remainder Subtract lines 4a and 4b from 4			
	Remaining underdistributions for years prior to 2015, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2015 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2016. Add lines 3			
	and 4c			
8	Breakdown of line 7		- · · <del>-</del> ·	
a			· · · · · · · · · · · · · · · · · · ·	
b				
	Excess from 2013			
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2015

e Excess from 2015

Schedule A (Form 990 or 990-EZ) 2015 UTAH SPORTS COMMISSION FOUNDATION 87-06

87-0651075

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

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31,049

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

OMB No 1545-0047

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

Employer identification number UTAH SPORTS COMMISSION FOUNDATION 87-0651075 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 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 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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" on 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 on Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Land, Buildings, and Equipment. Part VI

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	, moduling	(cand)		
<ul><li>b Buildings</li><li>c Leasehold improvements</li></ul>		39,960	39,960	
d Equipment		124,796	109,620	15,176
e Other				
Total. Add lines 1a through 1e (Column (d) mu	st equal Form 990, Part X, colur	nn (B), line 10c)	•	15,176

Part VII Investments—Other Securities

	Complete if the organization answered "Y	es" on Form 990, Part IV, lii	ne 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 o			
-	eld equity interests		
(3) Other		<u> </u>	
(A)			
(B)			
(C)			
(D)			<u> </u>
(E)			
(F)			
(G)			
(H)	n (h) must aqual Form 000. Bort V. col. (P) line 12.)		
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related.		
i ait viii	Complete if the organization answered "Y	es" on Form 990 Part IV Ju	no 11c Soo Form 000 Part V June 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
(1)			
(2)			
(3)			<del>                                     </del>
(4)			<del> </del>
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13)▶		25 T C C C C C C C C C C C C C C C C C C
Part IX	Other Assets.		
	Complete if the organization answered "Y	es" on Form 990, Part IV, lir	ne 11d See Form 990, Part X, line 15
	(a) Descri		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	<u> </u>		
	n (b) must equal Form 990, Part X, col (B) line 15)		<b>D</b>
Part X	Other Liabilities.		
	Complete if the organization answered "Y	es" on Form 990, Part IV, Iır	ne 11e or 11f See Form 990, Part X,
·	line 25		· · · · · · · · · · · · · · · · · · ·
<u>1</u>	(a) Description of liability	(b) Book value	
· <del></del> -	income taxes		
• ,	ED_EXPENSES	50,919	9
(3)		-	4
(4)			4
(5)			-
(6)			_
(7)			4
(8)			
(8)	n (b) must equal Form 990, Part X, col (B) line 25 )	50,919	

Schedule D (Form 990) 2015 UTAH SPORTS COMMISSION FOUNDATION 87-0651075 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 1,964,293 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a 144,205 b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 354,292 2d d Other (Describe in Part XIII) 498,497 e Add lines 2a through 2d 2e 1,465,796 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIII ) 4b c Add lines 4a and 4b 4c 1,465,796 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements 2,694,262 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 144,205 a Donated services and use of facilities 2a 2b b Prior year adjustments c Other losses 2c 462,409 Other (Describe in Part XIII) 2d 606,614 Add lines 2a through 2d 2e 2,087,648 Subtract line 2e from line 1 3 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 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) 2,087,648 5 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 XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

REVENUE ATTRIBUTED TO USC

Ś 354,292

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

EXPENSES ATTRIBUTED TO USC

\$ 462,409 Schedule D (Form 990) 2015 UTAH SPORTS COMMISSION FOUNDATION

87-0651075

Page 5

Part XIII Supplemental Information (continued)

## SCHEDULE M (Form 990)

**Noncash Contributions** 

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

► Attach to Form 990

UTAH SPORTS COMMISSION FOUNDATION

OMB No 1545-0047

2015

**Open To Public** 

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

87-0651075

Pa	art I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining			
		applicable	items contributed	Form 990 Part VIII, line 1g	noncash contribution amou	ints		
1	Art — Works of art							_
2	Art — Historical treasures		= =					
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household	]						
	goods	<u></u> j						
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded							
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other_							
15	Real estate — Residential							
16	Real estate — Commercial			,				
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies		<del></del>					
21	Taxidermy	ļi						
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts			F0 00F				
25	Other (PROMOTION)	X	3	53,375				
26	Other ( PEPSI PRODUCTS )	X	1	19,500				
27	Other ► ( ALL OTHER )	X	6	52,750	<u></u>			
28	Other ► (	<u>.                                    </u>						
29	Number of Forms 8283 received by the							
	which the organization completed For	rm 8283, P	'aπ IV, Donee Acknowle	agement	29		V	· • ·
20-	During the year did the arrestices				Ale and on the		Yes	No
30a	During the year, did the organization							
	28, that it must hold for at least three			ntribution, and which is not	required	20-		v
	to be used for exempt purposes for th		olaing perioa /			30a	$\vdash$	X
	If "Yes," describe the arrangement in		alian that requires the re-					
31	Does the organization have a gift acc	epiance po	olicy that requires the rev	view of any non-standard		24	w	
22-	contributions?	rd nartica -	r rolotod organizations 4		h	31	X	<del> </del>
32a	Does the organization hire or use thir	u parties 0	i related organizations to	o solicit, process, or sell no	ncasn			
h	contributions?  If "Yes," describe in Part II					32a	$\vdash \vdash \vdash$	Х
ь 33		mount in a	olumn (a) for a type of a	conactu for which column /-	) is checked			
JJ	If the organization did not report an a describe in Part II	mount in C	olumin (c) for a type of pr	operty for which column (a	у із спескей,			
	uesume in partii					Щ		

Schedule M (Form 990) (2015)

UTAH SPORTS COMMISSION FOUNDATION

87-0651075

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**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE O' (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2015
Open to Public

Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

UTAH SPORTS COMMISSION FOUNDATION

Employer identification number

ADV. 000

87-0651075

FORM 990 - ORGANIZATION'S MISSION

THE UTAH SPORTS COMMISSION FOUNDATION IS A CHARITABLE ORGANIZATION GOVERNED BY AN ALL-VOLUNTEER BOARD OF TRUSTEES CONSISTING OF STATEWIDE SPORTS, BUSINESS, COMMUNITY, AND GOVERNMENT LEADERS. THE SPORTS COMMISSION WAS CREATED TO FOSTER NATIONAL AND INTERNATIONAL SPORTS COMPETITIONS TO BE HELD IN THE STATE OF UTAH.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

TO THE BEST OF OUR UNDERSTANDING AND IS SUBJECT TO CHANGE BASED ON BEST

ESTIMATES FROM EVENTS RIGHTS HOLDERS AND AVAILABLE DATA AND INFORMATION.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT BEING THE HUNTSMAN CANCER INSTITUTE IN RECENT YEARS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

SPORTS EVENTS, TV ADVERTISING, PROMOTION, MARKETING - THE ORGANIZATION

LEVERAGES EVENTS THAT ALREADY EXIST IN UTAH THAT PROVIDE SPORTS TOURISM AND

ECONOMIC OPPORTUNITIES, SPECIFICALLY THOSE THAT HAVE TELEVISION EXPOSURE.

THIS ALLOWS UTAH TO MORE EFFECTIVELY TARGET KEY TOURISM AUDIENCES THROUGH

IMPLEMENTING STRATEGIC ADVERTISEMENTS AND CALLS TO ACTION. THE ORGANIZATION

HAS IMPLEMENTED THIS STRATEGY IN A NUMBER OF DIFFERENT EVENTS, FROM THE

2006 PRIMAL QUEST UTAH, BY ADVERTISING ON ESPN2 DURING ITS AIRING, AND

EXPANDING THIS STRATEGY DURING COVERAGE OF SUBSEQUENT EVENTS LIKE MILLER

MOTORSPORTS PARK'S ANNUAL AMERICAN LE MANS INTERNATIONAL SERIES UTAH GRAND

PRIX, ALLI SPORTS DEW TOUR, AMA SUPERCROSS, STIHL TIMBERSPORTS SERIES

#### UTAH SPORTS COMMISSION FOUNDATION

87~0651075

EVENTS, UTAH CHAMPIONSHIP ON GOLF CHANNEL, RED BULL AIR RACE, RED BULL RAMPAGE, FIS FREESTYLE WORLD CUP ON NATIONAL AND INTERNATIONAL TELEVISION, AND THE XTERRA WINTER WORLD AND MOUNTAIN CHAMPIONSHIPS, AIRING ON NETWORKS SUCH AS NBC, CBS, ABC AND FOX AFFILIATES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY MANAGEMENT AND THE BOARD TREASURER PRIOR TO ISSUANCE.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
WE REQUIRE THAT ALL BOARD MEMBERS SIGN A CODE OF CONDUCT AGREEMENT,
PROVIDING ASSURANCE THAT THEY HAVE READ AND UNDERSTAND OUR CODE OF CONDUCT
POLICY AND AGREE TO ABIDE BY ITS TERMS. PART OF THIS AGREEMENT REQUIRES
DISCLOSURE OF CONFLICTS OF INTEREST. FURTHERMORE, WE REQUIRE THAT BOARD MEMBERS WITH A CONFLICT OF INTEREST RECUSE THEMSELVES FROM VOTING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE COMPENSATION COMMITTEE MEETS AS NEEDED TO REVIEW, ADJUST OR APPROVE THE

CEO'S COMPENSATION. THEY TYPICALLY LOOK AT SEVERAL METRICS TO DETERMINE THE

APPROPRIATENESS OF CEO COMPENSATION, WITH PERFORMANCE, TENURE, IRS

GUIDELINES AND INDUSTRY COMPENSATION COMPARATIVES BEING SOME OF THE METRICS

THEY TAKE INTO CONSIDERATION. THE CEO'S COMPENSATION MAY NOT BE CHANGED OR

ALTERED WITHOUT APPROVAL OF THE COMPENSATION COMMITTEE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE TO PUBLIC UPON REQUEST.

UTASPO 08/12/2016 3 00 PM

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

► Attachito Form 990.

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

OMB No 1545-0047 Open to Public Inspection 2015

(f) Direct controlling Employer Identification number entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had 87-0651075 (e) End-of-year assets Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity UTAH SPORTS COMMISSION FOUNDATION (a) Name address, and EIN (if applicable) of disregarded entity Name of the organization Part II Partl 3 <u>8</u> <u>@</u> <u>4</u> 3

one or more related tax-exempt organizations during the tax year	ig the tax year						
(a) Name address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public charity status	g E	(g) Section 512(b)(13) controlled entity?	2(b)(13) entity?
		or foreign country)		(if section 501(c)(3))	entity	Yes	N <sub>o</sub>
(1) UTAH SPORTS COMMISSION	-						
201 SOUTH MAIN STREET #2125 87-0650627	627						
SALT LAKE CITY UT 84111	SPORTS	UT	50106		A/N		×
(2)							
	-						
	_						
(3)	-						
	-						
(4)							-
	-						
	_						
(5)							
	_						

Schedule R (Form 990) 2015

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

UTASPO 08/12/2016 3 00 PM

Page 2 (k) Percentage (1) Section 512(b)(13) controlled ownership (i) General or managing partner? Yes Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Percentage ownership Ξ Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) end-of-year assets (h) Dispro-portionate Yes No alloc 2 (g) Share of end-ofyear assets Share of total Income (f) Share of total (C corp S corp, Type of entity Income or trust) (e)
Predominant
Income (related,
unrelated,
excluded from
tax under
sections 512-514) | Direct controlling entity ਉ 87-0651075 (d) Direct controlling Legal domicile foreign country) entity (state or Schedule R (Form 990) 2015 UTAH SPORTS COMMISSION FOUNDATION (c) Legal domicile (state or foreign country) Primary activity Primary activity <u>e</u> Name, address and EIN of related organization Name, address, and EIN of related organization Part III Part IV E (2) 3 (4)  $\Xi$ (2) <u>ල</u> ₹

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Schedule R (Form 990) 2015

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Schedule R (Form 990) 2015 UTAH SPORTS COMMISSION FOUNDATION

87-0651075

Page 3

Transactions With Related Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	arts II, III, or IV of this schedule				Yes	SS No
1 During the tax year, did the organization en	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	e related organizations listed	in Parts II–IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	alties, or (iv) rent from a controlled entity	_			1a	×
<ul><li>b Gift, grant, or capital contribution to related organization(s)</li></ul>	organization(s)	_			1b	×
c Gift, grant, or capital contribution from related organization(s)	ed organization(s)	_			15	×
d Loans or loan guarantees to or for related organization(s)	organization(s)	_			1d	×
e Loans or loan guarantees by related organization(s)	ızation(s)	_			1e	×
					F	<
g Sale of assets to related organization(s)					19	×
h Purchase of assets from related organization(s)	on(s)	_			<del>1</del>	×
i Exchange of assets with related organization(s)	on(s)	_			<u>-</u>	×
j Lease of facilities, equipment, or other assets to related organization(s)	ets to related organization(s)	_			=	×
k Lease of facilities, equipment, or other assets from related organization(s)	ets from related organization(s)				<del>*</del>	×
1 Performance of services or membership or	Performance of services or membership or fundraising solicitations for related organization(s)	_			7	×
m Performance of services or membership or	Performance of services or membership or fundraising solicitations by related organization(s)	_			1m	×
n Sharing of facilities, equipment, mailing lists	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n X	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>	anızatıon(s)				10 X	_
n Rembursement paid to related organization(s) for expenses	n(c) for expenses					<b>×</b>
	n(s) for expenses				2 5	×
					2	-
r Other transfer of cash or property to related organization(s)	d organization(s)				<del>1</del>	×
ام					1s	×
2 If the answer to any of the above is "Yes," see the instructions for information on		who must complete this line, including covered relationships and transaction thresholds	elationships and transaction	thresholds		
	(a)	(q)	(2)	(p)		
Name	Name of related organization	Transaction type (a~s)	Amount involved	Method of determining amount involved	unt involved	
(1) UTAH SPORTS CO	SPORTS COMMISSION	0	128,482	ALLOCATION		
(2)						
(3)						
(4)						
(5)						
(9)				300 (000 m=03) a clipodo 3	0 (50,00	2000

Schedule R (Form 990) 2015 UTAH SPORTS COMMISSION FOUNDATION

Unrelated Organizations Taxable as a Partnership Complete of the organization answered "Yes" on Form 990, Part IV, line 37 Part VI

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

(a) (b) (c) (d) (e) (e) Name address and FIN of entity Professional Are all partners	(b)	(c)	(d) (Degraphed	(e)	(f) Share of	(g)	(h)	(I) (I) (I) (I) (I)	(5)	(k) Porcentane
		domicile	income (related,	section	-	end-of-year	altocations?		managing	ownership
		(state or foreign		501(c)(3) organizations?	ls?	assets		of Schedule K-1 (Form 1065)	partner?	
		country)	sections 512-514)	Yes No	•		Yes No		Yes No	
(1)										
(2)										
(3)										
(4)										
(5)										
(9)										
(2)										
(8)										
(6)										
(10)										
(11)										
			_					Schedu	le R (Forn	Schedule R (Form 990) 2015

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Part VII

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