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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052 2015

Open to Public Inspection

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

For calendar year 2015 or tax year beginning , and ending A Employer identification number Name of foundation 20-0552434 W. Hughes Brockbank Foundation Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 3000 Connor Street RM/STE 18 385-242-7625 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Salt Lake City UT 84109 G Check all that apply Initial return of a former public charity Initial return 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization | X | Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Cash If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here end of year (from Part II, col (c), (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net for charitable (b) Net investment amounts in columns (b), (c), and (d) may not necessarily equal expenses per ıncome purposes books the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ► X If the foundation is **not** required to attach Sch B 96 96 96 Interest on savings and temporary cash investments 31,253 31,253 31,253 Dividends and interest from securities Gross rents Net rental income or (loss) Stmt 1 -18,726 6a Net gain or (loss) from sale of assets not on line 10 252,035 Gross sales price for all assets on line 6a 3,494 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain Income modifications Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) Stmt 2 14,614 14,614 14,614 11 Other income (attach schedule) 27,237 49,457 45,963 12 Total. Add lines 1 through 11 11,000 Compensation of officers, directors, trustees, etc 13 Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) See Stmt 3 .1, 307 Stmt 4 Accounting fees (attach schedule) 925 Other professional fees (attach schedule) C 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Stmt 5 898 23 Other expenses (att sch) Total operating and administrative expenses. 14,130 0 0 Add lines 13 through 23 31,500 31,500 Contributions, gifts, grants paid 45,630 0 0 Total expenses and disbursements. Add lines 24 and 25 26 27 Subtract line 26 from line 12 -18,393 Excess of revenue over expenses and disbursements 49,457 Net investment income (if negative, enter -0-) 45,963 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

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Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule)

Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Total liabilities (add lines 17 through 22)

and complete lines 27 through 31.

Capital stock, trust principal, or current funds

Other liabilities (describe

Unrestricted

Temporarily restricted

Permanently restricted

9	29 Retained earnings, accumulated income, endowment, or other funds			
2	30 Total net assets or fund balances (see instructions)	507,766	2,509,904	
ž	31 Total liabilities and net assets/fund balances (see			
	instructions)	507,766	2,509,904	
Ī	Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	(must agree with		
	end-of-year figure reported on prior year's return)		1	507,766
2	Enter amount from Part I, line 27a		2	-18,393
	Other increases not included in line 2 (itemize) ▶ See Statement 7		3	2,020,531
	Add lines 1, 2, and 3		4	2,509,904
	Decreases not included in line 2 (itemize)		5	
- 5	Decreases not included in line 2 (itemize)			

)

X

0

507,766

0

6

2,509,904

2,509,904 Form 990-PF (2015)

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22

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27

28

	Brockbank Founda		20-0552434	<u> </u>	Page_
(a) List and describe the	kind(s) of property sold (e.g., real estate, e, or common stock, 200 shs MLC Co)	ent income	(b) How acquired P – Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
· · · · · · · · · · · · · · · · · ·	o, or common stock, 200 shis tele coop		D – Donation	(IIIO , Gay, yi)	(iiio , day, yr)
b Financial					-
c					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis	1	n or (loss) f) minus (g)
a 3,494					3,494
b					
С					
d					
e					
Complete only for assets showing gair	in column (h) and owned by the fo	oundation on 12/31/6	59		(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (ı) (j), ıf any	1	less than -0-) or om col (h))
a			<u></u>		3,494
b					3,13.
С					
d					
е					
2 Capital gain net income or (net capital	loss) if gain, also enter in If (loss), enter -0- in	.		2	3,494
3 Net short-term capital gain or (loss) as	_	_			
If gain, also enter in Part I, line 8, colui		•			
Part I, line 8				3	
Part V Qualification Under	Section 4940(e) for Reduc	ed Tax on Net I	Investment Inco	me	
(For optional use by domestic private found	dations subject to the section 4940	(a) tax on net invest	ment income)		
If section 4940(d)(2) applies, leave this pai	t blank				N/A
Was the foundation liable for the section 4	942 tay on the distributable amoun	t of any year in the h	acc period?		
If "Yes," the foundation does not qualify un		• • • • • • • • • • • • • • • • • • • •	ase periou		∐ Yes ∐ No
1 Enter the appropriate amount in each of		<u>-</u>	ng any entries		
(a)	(b)	dolloris before makin	(c)		(d)
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of noncharitable-use asset		ribution ratio divided by col. (c))
2014					
2013					
2012					
2011					
2010	<u> </u>				
2 Total of line 1, column (d)				2	
3 Average distribution ratio for the 5-year					
number of years the foundation has be	en in existence it less than 5 years	•		3	
4 Enter the net value of noncharitable-us	e assets for 2015 from Part Y. line	5		4	
- Ener the fiet value of floridiantable-us	e assets for 2010 from Fatt A, fine	3		7	
5 Multiply line 4 by line 3				5	
, , ,					
6 Enter 1% of net investment income (19	6 of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from Part				8	
If line 8 is equal to or greater than line Part VI instructions	r, check the box in Part VI, line 1b,	, and complete that p	part using a 1% tax r	ate See the	
Part VI Instructions					

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check N/A				
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2			_	- 1
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			_	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				0
6	Credits/Payments				
а	2015 estimated tax payments and 2014 overpayment credited to 2015				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
ď	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities				
1a				Yes	No
	participate or intervene in any political campaign?		1a		_X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	İ			
	published or distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers \$				7
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
•	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				X
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	ŀ	3		X
4a b		N/A	4a 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	17.22	5		X
•	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
•	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	ĺ	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	1	7	X	
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)				
-	None				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8ь	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
_	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"	İ	Ì		
	complete Part XIV		9	x	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
-	names and addresses		10		X

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

foundation had excess business holdings in 2015)

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X

N/A

3b

4a

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Pi	art VII-B Statements Regarding Activities for Which Form	<u>4720 May Be F</u>	Required (con	tinued)			
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	[Yes X No			
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,					
	directly or indirectly, any voter registration drive?		<u> </u>	Yes X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		□ ,	Yes 🛚 🗓 No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in		_			
	section 4945(d)(4)(A)? (see instructions)			Yes X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, o	r educational					
	purposes, or for the prevention of cruelty to children or animals?			Yes X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify und	er the exceptions d	lescribed in				
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see instructions)?	>	N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check he	ere		▶ 🗌			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax					
	because it maintained expenditure responsibility for the grant?		N/A 🗍 '	Yes No			
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ay premiums					
	on a personal benefit contract?			Yes X No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	rsonal benefit conti	ract?	_	6b		<u> </u>
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		Yes 🗓 No			
b	If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transac	ction?	N/A	7b		
Pa	irt V拥 Information About Officers, Directors, Trustees, Fo	undation Man	agers, Highly	Paid Employ	ees,		
	and Contractors						
1 L	ist all officers, directors, trustees, foundation managers and their compens.	ation (see instruc	tions).				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense aco allowan	
Se	e Statement 8						
					<u> </u>		—
				·			
					<u> </u>		
					 		
					ļ		
2	Compensation of five highest-paid employees (other than those included o "NONE."	on line 1 – see ins	tructions). If non	e, enter			
		(b) Title, and average		(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		ense acc allowand	
NO	NE						
					1		
							_
						_	
ota	number of other employees paid over \$50,000				•	1	0

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Part VIII	Information About Officers, Directors, Trustees, Foun	dation Managers, Highly Paid B	Employ	
	and Contractors (continued)	(NONE)		
3 Five high	est-paid independent contractors for professional services (see instr			(2) (2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-
NONE	(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
1101112				
			\longrightarrow	
		·····		
Total number of	others receiving over \$50,000 for professional services			0
Part IX-A				
Pan ix-A	Summary of Direct Charitable Activities			
	s four largest direct chantable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of		Expenses
	rsity of Utah Hospital Foundation Do		+	<u> </u>
1 Unive	isity of otan hospital foundation be	Shacton		
				31,500
2				
				
3				
			1	
			+-	
*				
Part IX-B	Summary of Program-Related Investments (see instru	uctions)		
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2			Amount
1 N/A				
2			+	
2				
All other program-re	elated investments. See instructions		1	
3				
			 	
Total. Add lines	1 through 3		.1	

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Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

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4

5

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

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Pa	art XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
	Total for prior years 20 , 20 , 20	***************************************			
3	Excess distributions carryover, if any, to 2015	_			
	From 2010				
b	From 2011				
-	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part XII,			······································	
	line 4 ▶ \$ 31,500				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years	***************************************			
-	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2015 distributable amount				
	Remaining amount distributed out of corpus	31,500			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	31,500			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b	<u> </u>			
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be				
_	distributed in 2016				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
40	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
a	Excess from 2011				
b	Excess from 2012				
C	Excess from 2013 Excess from 2014				
d	Excess from 2014 Excess from 2015				
е	LAGGOS HUHI ZUTU	ı	l	1	.

Dage	. 11
Page	

P	art XIV Private Operating For	undations (see in	structions and Par	t VII-A, question 9)	<u> </u>	
1a						
	foundation, and the ruling is effective for			▶ [N/A
b	Check box to indicate whether the found			bed in section X 49	42(J)(3) or 4942(<u>)</u> (5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for					
	each year listed	0				0
b	85% of line 2a					
С	Qualifying distributions from Part XII,				<u> </u>	
	line 4 for each year listed	31,500	532,766	533,278	622,868	1,720,412
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c	31,500	532,766	533,278	622,868	1,720,412
3	Complete 3a, b, or c for the					
	alternative test relied upon		;			
а	"Assets" alternative test – enter					
	(1) Value of all assets					<u>-</u>
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					0
С	"Support" alternative test – enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	nation (Complete	. Ahin mart anlız if (the foundation he	d ¢E 000 or more	in accets at
Pē	art XV Supplementary Inform	•	•	the foundation ha	a \$5,000 or more	ın assets at
	any time during the y		uons.)			
1	Information Regarding Foundation Ma	=	a than 20/ of the total o	andributions recovered b	vy the foundation	
а	List any managers of the foundation who before the close of any tax year (but only				•	
	N/A	il tiley have contribute	ed more man \$5,000)	(See Section 507 (d)(2)	,	
b	List any managers of the foundation who	own 10% or more of t	he stock of a comorati	on (or an equally large	portion of the	
IJ	ownership of a partnership or other entity		·		portion of the	
	N/A) of which the loundar	on has a 1070 or great	er interest		
2	Information Regarding Contribution, C	Grant, Giff, Loan, Sch	olarship, etc., Progra	nms:		
_	Check here ► X if the foundation only				oes not accept	
	unsolicited requests for funds. If the foun		•	=	·= '	
	other conditions, complete items 2a, b, c		(000 111011001	,		
a	The name, address, and telephone number		of the person to whom	applications should be	addressed	
u	N/A		person to whom			
	,					
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include		
	N/A					
C	Any submission deadlines					
	N/A					
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fie	elds, kinds of institution	s, or other	
	factors					
	N/A					

3 Grants and Contributions Paid During the		Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year University of Utah Hospit 540 Arapeen Dr. Ste 130 Salt Lake City UT 84108		Charity Medica	l Charity	31,500
Total			▶ 3a	31,500
b Approved for future paymentN/A				
Total			▶ 3b	

	Analysis of Income-Producing A					rage 12
Part XVI-J	nounts unless otherwise indicated		ed business income	Excluded	d by section 512, 513, or 514	
enter gross an	iounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program s	ervice revenue			+		(occ mendens)
		_				
				 		
		_		+		
		-		+		· · ·
ř ——		-		1		
g Fees a	and contracts from government agencies					
_	ip dues and assessments			1 "1		
	savings and temporary cash investments					96
	and interest from securities					31,253
5 Net rental	income or (loss) from real estate					
a Debt-fi	inanced property					
b Not de	bt-financed property			1		
6 Net rental	income or (loss) from personal property					
	stment income					14,614
	ss) from sales of assets other than inventory					-18,726
	e or (loss) from special events			 		
-	it or (loss) from sales of inventory					
_	nue a	-				
			· · · · · · · · · · · · · · · · · · ·			
е		_				
12 Subtotal A	Add columns (b), (d), and (e))	0	27,237
13 Total. Add	line 12, columns (b), (d), and (e)				13	27,237
	et in line 13 instructions to verify calculations)					<u>.</u>
Part XVI-I						
Line No.	Explain below how each activity for which incor accomplishment of the foundation's exempt pu	me is reported in o	column (e) of Part XVI	-A contrib	outed importantly to the	one)
N/A	accomplishment of the foundation's exempt pu	iposes (other than	i by providing funds to	or such po	iposes/ (See instructi	0113)
	-					
				·····		
						·-
	·					
	-					·
						-
						
			-		·	

Pa		Information Reg Exempt Organiz		ansfers To and	d Transactio	ns and Relationships \	Vith Noncharitab	le		
1	Did the orga	anization directly or ind	rectly engag	ge in any of the foll	lowing with any o	ther organization described			Yes	No
	in section 50		er than section	on 501(c)(3) organ	ızatıons) or ın se	ction 527, relating to political				
а	•	om the reporting found	lation to a no	oncharitable exemp	ot organization of	F				
_	(1) Cash	om the reporting reams		,				1a(1)		х
	(2) Other a	ssets						1a(2)		X
b	Other transa									
		f assets to a noncharit	able exempt	organization				1b(1)	1	х
		ses of assets from a ne	-	-	on			1b(2)		х
	` '	of facilities, equipment			···			1b(3)		х
		rsement arrangements						1b(4)		х
		or loan guarantees						1b(5)		Х
		nance of services or me	embership o	r fundraising solicit	tations			1b(6)		х
С	. ,	acilities, equipment, m	-	-				1c		Х
						nn (b) should always show the	e fair market			
_						the foundation received less t				
						the goods, other assets, or se				
((a) Line no	(b) Amount involved		e of noncharitable exemp			s, transactions, and sharing ar	rangeme	ents	
1/2	A									
	•									
				-						
							· · · · · · · · · · · · · · · · · · ·			
	described in	lation directly or indirect to section 501(c) of the applete the following so	Code (other	than section 501(c	c)(3)) or in sectio			Y	es X	No
		a) Name of organization		(b) Type of o	rganization	(c) Des	cription of relationship			
1	N/A		_			<u> </u>				
										
	·						· · · · · · · · · · · · · · · · · · ·			
	<u> </u>							-		
	Under per	natties of penury. I declare th	at I have exami	ned this return, including	a accompanying sche	l edules and statements, and to the bes	of my knowledge and belief	it is true	e,	
						which preparer has any knowledge	May the IRS disc			
ig: ler		/ 1/		// /		/ /	with the preparer (see instructions	shown b		No
	[] X	Gary H	OROC	Lbank	_ 8/	//5/16 L Tri	ıstee			
	Sign	ature of officer or trustee			Dete	Title				
		ype preparer's name			Preparer's signatu	ill Seel	Date		1	f rployed
Paid	Davi	d O. Seal, CP			Joan	na ven	08/1			
•	Only Firm's r	name ► Robis		ill & Co					1965	
/5B	Only Firm's a			y Holladay					857	
		Salt	Lake (City, UT	84117-5	050	Phone no 801	<u>2</u> 7	2-8	045

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

De	Description		How Received				
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
1753 Diversified Real Asset	l Asset	1/01/15 \$	Purchase 30,049 \$	30,537 \$		ഗ	\$ -488
3963 St Str Omc 50 CE CA	E CA	±	Purchase				
12/2 4806 Guaa Corp H/Y CE CA	12/23/13 12/14/15 E CA	12/14/15	31,472 Purchase	39, 398			976'/-
	10/30/13	8/12/15	39,748	49,954			-10,206
9576 Gugg Cov Cal 31 CE CA	CE CA		Purchase				i
	12/06/13	6/10/15	99,795	92,015			7,780
5834 Gudg Dvrs Inc 43 CA	3 CA		Purchase				
1	10/30/13	9/09/15	47,477	58,857			-11,380
Total		., 	248,541 \$	270,761 \$	0	\$	\$ -22,220

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	Reve	Revenue per Books	Net I	Vet Investment Income	Adji	Adjusted Net Income
Linn Operating NEC	٧٠	611	ᡐ	611	જ	611
NON-Dividend Distributions RP Energy R&P Company. I.P.		8083 8083		0,770 0,080 0,083		2, 0 2, 0 2, 0 3, 0 3, 0
Linn Operating, Inc		1,146		1,146		1,146
EOG Resources, Inc		4,298		4,298		4,298
Costal Plains Energy		362		362		362
Quinex Energy Corp		1,005	i	1,005		1,005
Total	S	14,614	φ.	14,614	w	14,614

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Statement 7 - Form 990-PF, Part III, Line 3 - Other Increases

 Description
 Amount

 Contrib. from WHB Trust
 \$ 2,020,531

 Total
 \$ 2,020,531

Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount	
Changes in Fair Market Value	\$	
Total	\$	0

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Federal Statements

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Statement 8 - Form 990-PF, Pa	PF, Part VIII, Line	1 - List of Of	irt VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	rustees, Etc.	
Address	Title	Hours	Compensation	Benefits	Expenses
Lee Craig Brockbank 8515 Costa Verde Blvd #608 San Diego CA 92122	Trustee	0.25	1,000	0	0
Gary H. Brockbank 3000 Connor St. #18 Salt Lake City UT 84109	Trustee	3.00	4,000	0	0
Scott H. Holcover P.O. Box 207 Silver City NV 89428	Trustee	0.25	1,000	0	0
Julia Craig Kelety 2858 Evergreen Street San Diego CA 92106	Trustee	0.25	1,000	0	0
Dale R. Gunnell 1657 North Linden Lane Bountiful UT 84010	Trustee	1.00	2,000	0	0
Bonnie J. Huish 2 Clairwood Mall Oakland CA 94618	Trustee	0.25	1,000	0	0
Norman L. Brockbank 2 Bowling Dr. Oakland CA 94618	Trustee	0.25	1,000	0	0