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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

Inspection

For	caler	ndar year 2015, or tax year beginning 01-0	1-2015	, aı	nd ending 1	2-31-2015	
	e of four				A Employer ide	entification numb	er
50	renson n	mpact Foundation			45-3203840		
Num	ber and :	street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone num	ber (see instruction	s)
29	9 S Main	Street			(801) 490-1000		
		state or province, country, and ZIP or foreign postal code y, UT 84111			C If exemption a	application is pendin	g, check here
c C	ack all	that apply Finitial return Finitial return of a f	former public charity		D 1 5		
G C	ieck all	Final return Amended return	offiler public charity		D 1. Foreign org	janizations, check h	ere •
		Address change Name change				ganizations meeting	
						t here and attach co ndation status was i	
		pe of organization		,	under section	507(b)(1)(A), ched	ck here
•		· · · · · · · · · · · · · · · · · · ·	Cash ✓ Accru		F If the foundate	tion is in a 60-mont	h termination
		rom Part II, col (c),	be on cash basıs)		under section	507(b)(1)(B), chec	k here
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		Revenue and expenses per (a) books	(Ь)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	5,118				
KIE	2	Check ► ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	4,626		4,626		
	4	Dividends and interest from securities	1,779,576		1,805,458		
	5a	Gross rents					
	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10	2,469,062				
Reverkie	b	Gross sales price for all assets on line 6a 15,618,127					
_	7	Capital gain net income (from Part IV , line 2)			2,474,819		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances Less Cost of goods sold					
	b c	Gross profit or (loss) (attach schedule)					
	11	Other Income (attach schedule)	126,728		-263,416		
	12	Total.Add lines 1 through 11	4,385,110		4,021,487		
	13	Compensation of officers, directors, trustees, etc	.,000,110		.,022,107		
	14	Other employee salaries and wages					
مِي	15	Pension plans, employee benefits					
15e	16a	Legal fees (attach schedule)	4 4,985				44,985
Expenses	b	Accounting fees (attach schedule)	4 5,868				
ã	С	Other professional fees (attach schedule)	378,219		312,619		65,600
tiνε	17	Interest					
tra	18	Taxes (attach schedule) (see instructions)	66,471		17,186		
and Administrative	19	Depreciation (attach schedule) and depletion					
튭	20	Occupancy					
ΨÞ	21	Travel, conferences, and meetings	17,981				17,981
a	22	Printing and publications					
<u> 6</u>	23	Other expenses (attach schedule)	9,507				
Operating	24	Total operating and administrative expenses.					
<u>6</u>		Add lines 13 through 23	563,031		329,805		128,566
ں	25	Contributions, gifts, grants paid	1,007,138				1,007,138
	26	Total expenses and disbursements. Add lines 24 and 25	1,570,169		329,805		1,135,704
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	2,814,941				
	b	Net investment income (If negative, enter -0-)			3,691,682		
		Adjusted net income(if negative, enter -0 -)		ı			1

D-1	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End o	fyear	
•			(a) Book Value		ook Value	(c) Fa	aır Market Value
	1	Cash—non-interest-bearing	1,995,920		627,591		627,591
	2	Savings and temporary cash investments	8,120,742		9,680,723		9,680,723
	3	Accounts receivable ►					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable -					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶					
		Less allowance for doubtful accounts ▶					
5	8	Inventories for sale or use					
4ssets	9	Prepaid expenses and deferred charges $\dots \dots \dots \dots$					
As	10a	Investments—U S $% \left(1\right) =\left(1\right) +\left(1\right) =\left(1\right) +\left(1\right) +\left(1\right) =\left(1\right) +\left(1\right) +\left($	% 3	1,030,386		1,030,386	
	b	Investments—corporate stock (attach schedule)	47,200,651	% ∫	53,229,502		53,229,502
	c	Investments—corporate bonds (attach schedule)	6,232,999	% j	6,048,168		6,048,168
	11	Investments—land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	66,126,507	% J	56,835,517		56,835,517
	14	Land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe ▶)	2,082,439	% ∫	4,014,883	چ	4,014,883
	16	Total assets (to be completed by all filers—see the					
		instructions Also, see page 1, item I)	133,070,928		131,466,770		131,466,770
	17	Accounts payable and accrued expenses	10,515		4,870		
	18	Grants payable					
es	19	Deferred revenue					
abilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ab	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe \(\bigsim_{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex					
	23	Total liabilities(add lines 17 through 22)	10,515		4,870		
		Foundations that follow SFAS 117, check here ▶	·				
e s		and complete lines 24 through 26 and lines 30 and 31.					
ınc	24	Unrestricted					
Balance	25	Temporarily restricted					
	26	Permanently restricted					
Fund	20	Foundations that do not follow SFAS 117, check here					
		and complete lines 27 through 31.					
s or	27	Capital stock, trust principal, or current funds					
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund					
Ass	29	Retained earnings, accumulated income, endowment, or other funds	133,060,413		131,461,900		
Net		Total net assets or fund balances(see instructions)	133,060,413		131,461,900		
Ž	30	,	133,070,928		131,466,770		
	31	Total liabilities and net assets/fund balances(see instructions)	133,070,928		131,400,770		
	rt III		, , , , , , , , , , , , , , , , , , ,				
1		Total net assets or fund balances at beginning of year—Part II, column	ı (a), line 30 (must a	gree			
_		with end-of-year figure reported on prior year's return)			. 1		133,060,413
2		Enter amount from Part I, line 27a			. 2		2,814,941
3		· · · · —			3		
4		Add lines 1, 2, and 3			. 4		135,875,354
5		Decreases not included in line 2 (itemize)		%_	5		4,413,454
6		Total net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), l	ine 30	. 6		131,461,900

	90-PF (2015)								Page 3
Part	Capital Gains a	nd Los	ses for Tax on Inv	estme	nt Income				1
		•	s) of property sold (e g , i common stock, 200 sh		•	How acquire P—Purchas (b) D—Donation	e (c) (r	ate acquired no , day, yr)	Date sold (d) (mo , day, yr)
1 a	Publicly traded securit	ıes				Р	20	14-01-01	2015-12-31
b	Escrow loss					Р	20	12-03-30	2015-01-02
С с									
d									
е									
			Depreciation allow	red	Cost	or other basis		Gau	n or (loss)
	e) Gross sales price		(f) (or allowable)			expense of sale			(f) minus (g)
а	15,530	,092				13,053,5	45		2,476,547
b	88	3,035				89,7	63		-1,728
С									
d									
е									
C	omplete only for assets sh	owing ga	aın ın column (h) and owr	ned by t	he foundation	on 12/31/69		Gains (Col	(h) gain minus
) F M V as of 12/31/69		A djusted basis			ess of col (ı)	l l		ot less than -0-) or
	, 111 V us 0112/31/03		(j) as of 12/31/69		(k) over	col (j), if any	(1)	Losses	(from col (h))
a									2,476,547
b									-1,728
с									
d									
e								T	
2	Capital gain net income	e or (net	capital loss)			n Part I, line 7 in Part I, line 7	} 2		2,474,819
3	Net short-term capital	gaın or ((loss) as defined in secti	ons 12:	22(5) and (6)				
			8, column (c) (see instr) If (loss), er	nter -0-	}		
Part	<u> </u>	ıder S	ection 4940(e) for	Reduc	ed Tax on	Net Investn		come	
	tional use by domestic pri								
	ion 4940(d)(2) applies, lea							•	
	e foundation liable for the : ," the foundation does not						period?		┌ Yes ┌ No
	nter the appropriate amour		, ,				ntrios		
		it iii eac		1	LIUCCIONS DEIO	Te making any e	I		
	(a) e period years Calendar (or tax year beginning in)	Adjuste	(b) ed qualifying distributions	Net	(c) value of nonchar	ntable-use assets		(d) Distributio (col (b) divideo	on ratio
	2014								
	2013								
	2012								
	2011			-					
	Z010	.47					2		
2			ne 5-year base period—d						
3 4	the number of years the	e founda	tion has been in existen- table-use assets for 201	ce ıf les	s than 5 year	rs .	3 4		
4 5					•		5		
_									
6 Enter 1% of net investment income (1% of Part I, line 27b).				•			7		
7 Add lines 5 and 6									
8	· · · -						8		wate Ca-
	the Part VI instructions		han line 7, check the box	x in Pari	L v I, IINE 1 b, a	and complete th	it part us	sing a 1% ta	x rate See

General (or designate) of each state as required by General Instruction G? If "No," attach explanation.

If "Yes," complete Part XIV

and addresses

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)?

. Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names 8h

9

10

Yes

No

No

Form	990-PF (2015)		P	age S
Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶sorensonimpactfoundation org			
14	The books are in care of ▶Paul Ludlow Telephone no ▶(801)490-	1013	
	Located at ▶299 S Main Street Suite 2200 Salt Lake City UT ZIP+4 ▶84111			
45				_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		•	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	İ		ĺ
	a disqualified person?			
	(2) Franch and a company of column to (an accept them from) and a column and	i	İ	ļ
		<u> </u>	 	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	 	 	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
	Γ		ı	ı
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes ▼ No		ļ	
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	١.		
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?		ļ i	l i
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
_	If the foundation had excess business holdings in 2015)	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	۱.,		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	L	No

Form 990 Part VI)-PF (2015)	ements Rega	rdin	a Activities for	· Wh	ich Form 4720	May	y Be Required <i>(Con</i> t	tinue	d)	Page 6
				or incur any amoun		1011 1 01111 4720		y Be Required (com			
				attempt to influence		slation (section 49	45(6	e)) [?]	- No		
• •	, ,			ıfıc public election (_	•	•	. 1 165 [♦ 140	i i	i i
		·	•	registration drive?.		•		·	√ No		
				travel, study, or oth			-	⊤ Yes [•	i i	i
	-			other than a charita			oc c ri	•	✓ NO		l I
	_	-		structions)		· -			_ _{No}		
				religious, charitable				V 165	140	i i	i
				evention of cruelty t				· · · · F Yes	. No		
		•						exceptions described in	V 140	i i	i
Regulations section 53 4945 or i				-		• •		· ·		5b	No
_	-			-	-		•				1.12
3	,	.,						[_		I
c If th	he answer is	"Yes" to question	1 5a(4	1), does the foundat	ion c	laım exemption fron	n the	2			
tax	because it m	aıntaıned expend	liture	responsibility for th	ne gra	nnt?		· · · · · 🗸 Yes 「	_ No		
If "	'Yes," attach tl	he statement requ	ıred b	y Regulations section	n 53 -	4945-5(d)					
6a Did	I the foundation	on, during the yea	ar, red	ceive any funds, dire	ectly	or indirectly, to pay	pre	miums on			
аре	ersonal benef	it contract?						· · · Tes	✓ No		
b Did	I the foundation	on, during the yea	ar, pa	y premiums, directly	y or II	ndirectly, on a pers	onal	benefit contract?		6b	No
If "	'Yes" to 6b, file	e Form 8870									
7a Ata	any time duri	ng the tax year, v	vas th	ne foundation a party	y to a	prohibited tax she	lter t	transaction? Yes	✓ No		
b If y	es, did the fo	undation receive	any p	proceeds or have an	ıy net	income attributabl	e to	the transaction?		7b	No
Dowt M	Infor	mation Abou	t Off	icers, Directors	s, Tr	ustees, Founda	atio	n Managers, Highly	Paid	l Empl	oyees,
Part VI	anu	Contractors									
			_								
1 List	all officers, d	lirectors, trustee	s, fou	ındation managers a	and ti	neir compensation (see	•			
	·	·	s, fou	Title, and average	(c)	Compensation(If	see	instructions). (d) Contributions to		Expense	e account,
	all officers, d	·			(c)	<u> </u>	е	(d) Contributions to employee benefit plans			e account, lowances
((a) Name and	·	(b)	Title, and average hours per week devoted to position	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to			
James Lee	(a) Name and	address		Title, and average hours per week devoted to position	(c)	Compensation(If not paid, enter	e	(d) Contributions to employee benefit plans			
James Lee :	(a) Name and	address te 2200	(b)	Title, and average hours per week devoted to position	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans			
James Lee :	Sorenson ain Street Sui e City, UT 84	address te 2200	(b) Dire 100	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans			
James Lee S 299 S Ma Salt Lake Krista Sorer 299 S Ma	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui	address te 2200 111 te 2200	(b) Dire	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans			
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841	address te 2200 111 te 2200	(b) Dire 10 0	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans			
James Lee : 299 S Ma Salt Lake Knsta Sorer 299 S Ma Salt Lake Luke Sorens	Sorenson ain Street Sui e City, UT 84 nson ain Street Sui e Cit, UT 841 son	address te 2200 111 te 2200 11	(b) Dire 10 0 Dire 5 00	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans			
James Lee : 299 S Ma Salt Lake Knsta Sorer 299 S Ma Salt Lake Luke Sorens	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 ison A shton Boule	address te 2200 111 te 2200 11	(b) Dire 10 0	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-)	e	(d) Contributions to employee benefit plans			
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT	Sorenson ain Street Suite City, UT 84 nson ain Street Suite Cit, UT 841 son A shton Bouler 84043	address te 2200 111 te 2200 11	(b) Dire 10 0	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-) 0	e	(d) Contributions to employee benefit plans	(e)	other al	
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 son A shton Bouler 84043	address te 2200 111 te 2200 11 vard five highest-paid	(b) Dire 10 0	Title, and average hours per week devoted to position ctor	(c)	Compensation(If not paid, enter -0-) 0	e	(d) Contributions to employee benefit plans dideferred compensation instructions). If none, e Contributions to	(e)	other al	lowances
James Lee 2 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson A shton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0	e and	(d) Contributions to employee benefit plans dideferred compensation instructions). If none, e Contributions to employee benefit	nter"	NONE."	e account,
James Lee 2 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui e City, UT 84 nson ain Street Sui e Cit, UT 841 son A shton Boule 84043 pensation of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor ctor Title, and average	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans dideferred compensation instructions). If none, e Contributions to	nter"	NONE."	lowances
James Lee 2 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson A shton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,
James Lee : 299 S Ma Salt Lake Krista Sorer 299 S Ma Salt Lake Luke Sorens 3400 N A Lehi, UT 2 Comp	Sorenson ain Street Sui c City, UT 84 nson ain Street Sui c Cit, UT 841 nson Ashton Boule 84043 pensation of (a nd address of	address te 2200 111 te 2200 11 vard five highest-paic each employee p	Dire 1000	Title, and average hours per week devoted to position ctor ctor ctor loves (other than the bours per week hours per week hours per week devoted to position ctor loves to be a love to be a	those age	Compensation(If not paid, enter -0-) 0 0 included on line 1-	e and	(d) Contributions to employee benefit plans deferred compensation instructions). If none, e Contributions to employee benefit plans and deferred	nter"	NONE."	e account,

Total number of other employees paid over \$50,000.

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of

organizations and other beneficiaries served, conferences convened, research papers produced, etc 1

3

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 Copia Global Providing access to life necessities and job opportunities in Africa

2The Leonardo Funding for programs to create public awareness and education of historical, scientific, and cultural treasures

3 💝 🕽

Total. Add lines 1 through 3

All other program-related investments. See instructions

1,401,090 \triangleright

1,994,509 Form 990-PF (2015)

Expenses

Amount

343,419

250,000

purposes

1

2

3

5

3

4

5

6

7

1

2

5

Part XII

68,174,953

27,417,997

102,882,326

102,882,326

101,339,091

1,543,235

5,066,955

5,066,955

73,834

28,543

4,993,121

5.021.664

5,021,664

1,135,704

1,994,509

3.130.213

7,289,376

X Minimum Investment R	letu
------------------------	------

Part

ırn

(All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,

Fair market value of all other assets (see instructions).

Reduction claimed for blockage or other factors reported on lines 1a and

1e

1a

1b

1c

1d

Distributable Amount Part XI (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.) 1 **2**a

Tax on investment income for 2015 from Part VI, line 5.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Recoveries of amounts treated as qualifying distributions.

Deduction from distributable amount (see instructions).

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

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

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

2a Income tax for 2015 (This does not include the tax from Part VI). . . 2b

Distributable amount before adjustments Subtract line 2c from line 1.

1

6

7

1a

1h

2

За

3b

4

5

73,834

3,130,213 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only. 5 Enter amount for 2014 only. 1 Total for proyeers 20		ondistributed Income (see insulation	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
a Enter amount for 2014 only. b Total for prory years 20 20 20 30 5	1	Distributable amount for 2015 from Part XI, line 7				5,021,66
b Total for prior years 20 20	2	Undistributed income, if any, as of the end of 2015				
3 Excess distributions carryover, if any, to 2015 1,380,963 From 2010.	а	Enter amount for 2014 only				
3 Excess distributions carryover, if any, to 2015 1,380,963 From 2010.	b	Total for prior years 20 , 20 , 20				
b From 2011. S81,967 c From 2012. S81,967 d From 2013.	3					
c From 2012	а	From 2010 1,380,963				
d From 2013. From 2014. From 2014. From 2014. Qualifying distributions for 2015 from Part XII, line 4 b s 3,130,213 A papiled to 2014, but not more than line 2a A ppiled to 2014, but not more than line 2a A papiled to midstributed income of prior years (Election required—see instructions). C Treated as distributions out of corpus (Election required—see instructions). d Appiled to 2015 distributable amount. Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 I,893,451 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: Corpus Add lines 3f, 4c, and 4e Subtract line 5 D Prior years' undistributed income Subtract line 4b from line 2b. 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 6 T maxible amount—see instructions. f Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions. f Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount must be distributed income for 2016 Subtract lines 4a from line 2a Taxable amount must be distributed income for 170,14 Subtract line 4a from line 2a Taxable amount must be distributed income for 2016 Subtract lines 4a from line 1715. F Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(L)(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 from 2015. 71,479 10 Analysis of line 9 2 Excess from 2016. 10 Analysis of line 9 2 Excess from 2011. Excess from 2014. Excess from 2015.	b	From 2011				
From 2014	c	From 2012				
f Total of lines 3 at through e	d	From 2013				
4 Qualifying distributions for 2015 from Part XII, line 4						
XII, line 4 ▶ s 3,130,213 A Applied to 2014, but not more than line 2 a b Applied to undistributed income of prior years (Election required—see instructions). C Treated as distributions out of corpus (Election required—see instructions). d Applied to 2015 distributable amount. d Applied to 2015 distributable amount. E Remaining amount distributed out of corpus E Excess distributions carryover applied to 2015 (If an amount appeas in column (d)) E Fitter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. E Fitter 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. Subtract line 6c from line 6b Taxable amount —see instructions. Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount must be distributed income for 2016 Subtract line 4a from line 2 a Taxable amount must be distributed income for 2016 Subtract line 4a from line 2 To 4942(q)(3) (Election may be required –see instructions). 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(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 from 2016. Subtract lines 7 and 8 from line 6a	f	Total of lines 3a through e	1,962,930			
A Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required—see instructions). C Treated as distributions out of corpus (Election required—see instructions). d Applied to 2015 distributable amount. Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. c 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 - Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions - Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed and 5 from line 1. This amount must be distributed in 2015. 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 from 2011. Analysis of line 9 a Excess from 2011. C Excess from 2013. d Excess from 2014.	4					
b Applied to undistributed income of prior years (Election required—see instructions). C Treated as distributions out of corpus (Election required—see instructions). d Applied to 2015 distributable amount. E Remaining amount distributed out of corpus E Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) to Einter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. c 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. e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. 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 from 2011. C Excess from 2011. E Excess from 2013. d Excess from 2014.						
(Election required—see instructions)						
required—see instructions). d Applied to 2015 distributable amount. e Remaining amount distributed out of corpus 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: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. c 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. e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. 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 from 2010 not applied on line 5 or line 7 (see instructions). 9 Excess distributions carryover from 2016. Subtract lines 7 and 8 from line 6a. 71,479 b Excess from 2011. b Excess from 2012. 71,479 c Excess from 2013. d Excess from 2015.		(Election required—see instructions)				
Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 D Prior years' undistributed income Subtract line 4b from line 2b. 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. Subtract line 6b Taxable amount—see instructions. Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. I Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. 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). Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. 71,479 Excess from 2012. Taxable amount—see instructions arryover from 2010 not applied on line 5 or line 7 (see instructions). Excess from 2011. Excess from 2012. Taxable amount—see instructions arryover from 2010 not applied on line 5 or line 7 (see instructions). Excess from 2011. Excess from 2012. Taxable amount—see instructions arryover from 2010 not applied on line 5 or line 7 (see instructions).	C	• • •	0			
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(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: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Priory years' undistributed income Subtract line 4b from line 2b. c 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. d Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. 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. Subtract lines 7 and 8 from line 6a. 71,479 Excess from 2011. b Excess from 2012. 71,479 c Excess from 2013. d Excess from 2015.	е	Remaining amount distributed out of corpus				
same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Pror years' undistributed income Subtract line 4b from line 2b	5	Excess distributions carryover applied to 2015	1,891,451			1,891,45
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c 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. e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 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. Subtract lines 7 and 8 from line 6a 71,479 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 71,479 c Excess from 2014 e Excess from 2015						
b Prior years' undistributed income Subtract line 4b from line 2b. c 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	6					
Inne 4b from line 2b	а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	71,479			
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	b					
see instructions	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)				
4a from line 2a Taxable amount—see instructions	d					
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015	е	4a from line 2a Taxable amount—see				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	f	lines 4d and 5 from line 1 This amount must				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. 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 d Excess from 2014 e Excess from 2015	7	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may				
Subtract lines 7 and 8 from line 6a	8	Excess distributions carryover from 2010 not				
a Excess from 2011	9		71.479			
a Excess from 2011	10		,			+
b Excess from 2012		· · · · · · · · · · · · · · · · · · ·				
c Excess from 2013 d Excess from 2014 e Excess from 2015						
d Excess from 2014 e Excess from 2015						
e Excess from 2015						
FUIII 990-PF (_	-		L		Form 990-PF (2015

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

A wards will only be made for permitted charitable purposes consistent with the purpose and mission of the foundation

Any submission deadlines

Quarterly, January 31, April 30, July 31, October 31

Form 990-PF (2015)

Part XV Supplementary Information(continued) Page **11**

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
Name and address (home or business) a Paid during the year See Additional Data TableSee Additional Data Table	any foundation manager or substantial contributor		contribution	
Tatal			D 20	1.007.120
Total	<u> </u>	<u> </u>	▶ 3a	1,007,138
Total			. ▶ 3b	

Enter gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a						,
	and contracts from government agencies					
	rship dues and assessments					
	st on savings and temporary cash					
	nds and interest from securities			14	4,626 1,779,576	
	ital income or (loss) from real estate			14	1,775,570	
	financed property					
	ebt-financed property					
proper	ntal income or (loss) from personal ty					
	nvestment income					
	ory			18	2,469,062	
	ome or (loss) from special events					
10 Gross p	profit or (loss) from sales of inventory					
11 Otherr	revenue a K-1 Investment			14	126 720	
b	income			14	126,728	
	al Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				4,379,992	
	orksheet in line 13 instructions to verify				.3	7,373,332
Part XVI	-B Relationship of Activities to					
Line No. ▼	Explain below how each activity for wh the accomplishment of the foundation's instructions)					

		Information Re Noncharitable				actio	ns and Relatio	nships With		1 4	gc = .
		ganızatıon dırectly or ıı	ndirectly eng	age in any of t	the following wit					Yes	No
		01(c) of the Code (othe	er than sectio	n 501(c)(3) o	organizations) o	rınsed	ction 527, relating	to political		165	NO
	anızatı ne fore	from the reporting four	adation to a n	oncharitable 4	evemnt organiz	ation of	F				
									1a(1)		No
		rassets							1a(2)		No
٠.		nsactions							(-/		
		of assets to a noncha	rıtable exemp	ot organization	n				1b(1)		No
		nases of assets from a		-					1b(2)		No
(3)	Renta	al of facilities, equipme	nt, or other as	ssets					1b(3)		No
(4)	Reim	bursement arrangemen	nts						1b(4)		No
									1b(5)		No
(5) Loans or loan guarantees									1b(6)		No
c Sha	rıng o	f facılıtıes , equipment , i	mailing lists,	other assets,	or paid employ	ees.			1c		No
d If th	ne ans	wer to any of the above	e is "Yes," coi	mplete the fol	lowing schedule	e Colui	mn (b) should alwa	ys show the fair ma	rket va	lue	
ın a	ny tra	ds, other assets, or se nsaction or sharing arra	angement, sh	ow in column	(d) the value o	f the go	oods, other assets,	or services receive	ed		
(a) Line	No	(b) Amount involved	(c) Name of n	onchantable exe	empt organization	(d)) Description of transfe	rs, transactions, and sha	iring arra	ngemen	nts
3 - 7- 5	l							4			
des	cribed No	ndation directly or indii in section 501(c) of th complete the following s	ne Code (othe	•	· ·				. [Ye	es	
		(a) Name of organization	n	(b) Type of organiza	tion		(c) Description of relation	onship		
6	the	er penalties of perjury, best of my knowledge a mation of which prepar	and belief, it is	s true, correct							
Sign Here		*****			2016-11-15	_ }	*****	return	he prepai		
		Signature of officer or t	rustee		Date		Title	(see II	nstr)?	Yes N	No
		Print/Type preparer's	s name	Preparer's S	Signature		Date	Check if self- employed ▶	PTIN		
Paid Prepa	arer	Firm's name ▶						Fırm's EIN ▶			
Use (Firm's address ▶						Phone no			

orm 990PF Part XV Line 3 - Gr	ants and Contributions	Paid During	the Year or Approved for F	uture Payment
Recipient Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor	recipient		
a Paid during the year				
Brigham Young University 3328 TMCB Provo,UT 84602		PC	Scholarship	11,888
Junior Achievement 515 East 100 South Suite 200 Salt Lake City,UT 84102		PC	JA program school sponsorship	12,500
Salt Lake County 2001 South State Street Suite S480 Salt Lake City,UT 84190		GOV	Herriman recreation center	31,250
University of Utah 201 Presidents Circle Salt Lake City,UT 84112		PC	Global Impact Center, Arts & Education Complext	534,000
Utah Chamber Artists 11640 S Littler Road Sandy,UT 84092		PC	Musical composition & performance	100,000
Utah Food Bank 3150 South 900 West Salt Lake City,UT 84191		PC	Emergency food assistance	25,000
American Indian Services 1902 N Canyon Rd Suite 100 Provo,UT 84604		PC	Scholarships	100,000
Community Health Connect 591 S State Street Provo,UT 84606		PC	Volunteer provider network	10,000
Choice Humanitarian 7879 S 1530 W Suite 200 Salt Lake City, UT 84088		PC	Nepal earthquake relief	100,000
Family Support Center 1760 W 4805 S Taylorsville, UT 84129		PC	Family crisis services	12,500
Church State Nonprofit Inc 370 South 300 Est Salt Lake City,UT 84111		PC	Entrepreneur education series	25,000
Tides Foundation 302A West 12th Street 309 New York,NY 10014		PC	School uniforms	10,000
Habitat for Humanity 1276 South 500 West Salt Lake City,UT 84101		PC	Affordable housing	10,000
Massachusetts Institute of Technolo 77 Massachusetts Ave Bldg N51- 315 Cambridge, MA 02139		PC	D-Lab Scale-ups Fellows	25,000
Total			▶ 3a	1,007,138

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TY 2015 Account	TY 2015 Accounting Fees Schedule									
	Name:	Sorei	nson Impact	Foundatio	n					
	EIN:	45-3203840								
	Software ID:	15000324								
Soft	ware Version:	2015	v2.0							
Category	Amount		Net Investi Income		Adjusted Net Income	Disbursements for Charitable Purposes				

45,868

Accounting & Tax

TY 2015 All Other I	Program Related	Investments Schedule

Category

Quidnet Energy: Addressing environmental issues with traditional energy generation

DLN: 93491320038746

Amount

125,000

21,500

1,779

22,245

30,000

15,000

EIN: 45-3203840

Name: Sorenson Impact Foundation

Software ID: 15000324

Elevar Equity: Developing essential products and services for disconnected

healthcare, and improving livelihoods of underprivileged populations.

healthcare, and improving livelihoods of underprivileged populations.

outcomes and increasing educational opportunities.

outcomes and increasing educational opportunities.

VilCap Investments: Investing in companies that enable positive social and/or

VilCap Investments: Investing in companies that enable positive social and/or environmental impact such as: clean energy, increasing access to education and

Owl Ventures: Addressing problems associated with poor learning achievement

Owl Ventures: Addressing problems associated with poor learning achievement

environmental impact such as: clean energy, increasing access to education and

communities in Latin America and Asia

Software Version: 2015v2.0

methods and providing solutions to electricity grid limitations.

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Rimidi Diabetes: Improving health outcomes of at-risk populations which are overrepresented in chronic diseases, including diabetes.	250,000
Unitus Seed Fund: Provide opportunities for economic self-reliance, education, and procurement of basic necessities to underprivileged individuals.	100,000
Elevar Equity: Developing essential products and services for disconnected communities in Latin America and Asia	45,000
VilCap Investments: Investing in companies that enable positive social and/or environmental impact such as: clean energy, increasing access to education and healthcare, and improving livelihoods of underprivileged populations.	24,087
Owl Ventures: Addressing problems associated with poor learning achievement outcomes and increasing educational opportunities.	136,895
Visage Holdings: Fostering economic development and job growth in India through loans to underserved populations.	189,584
Graduation Alliance: Increasing high school graduation rates, expanding job opportunities and bettering lifetime earnings potential for at-risk populations.	250,000
Copia Global: Providing access to life necessities and job opportunities in Africa	190,000

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TY 2015 Investments Corpora	ate Bonds Schedule
Name:	Sorenson Impact Founda

lation **EIN:** 45-3203840

DLN: 93491320038746

212,346

272,969

503,690

383,414

212,346

272,969

503,690

383,414

Software ID: 15000324

Software Version: 2015v2.0

Waste Management Mar 2019

Williams Companies Jan 2023

Republic Services GLB May 2023

AT&T Inc May 2018

HCP Inc GLB Mar 2024

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Boeing CO GLB Mar 2019	569,793	569,793
Comcast Corp Jan 2017	541,291	541,291
DirectTV Holdings Apr 2024	415,286	415,286

274,994 274,994 551,960 551,960 284,131 284,131

General Electric May 2018 Goldman Sachs Group Jan 2018 Marathon Oil Corp Feb 2019 575,947 522,288

Metlife Inc Ser A Aug 2018 575,947 Newell Rubbermaid Aug 2020 522,288 210,597 Newmont Mining Corp Oct 2019 Northrop Grumman Corp Mar 2016 258,713

210,597 258,713 Textron Inc Mar 2021 407,363 407,363 Walgreen Co Jan 2019 63,386 63,386

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TY 2015 Investments Corporate Stock Schedule						
Name:	Sorenson Impact Founda	tion				
EIN:	45-3203840					
Software ID:	15000324					
Software Version:	2015v2.0					
Name of Stoc	k	End of Year Book Value	End of Year Fair Market Value			

Publicly traded securities (see stmt)

53,229,502

53,229,502

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491320038746
TY 2015 Investments Govern	ment Obligations Schedul	e
Name:	Sorenson Impact Foundation	
EIN:	45-3203840	
Software ID:	15000324	
Software Version:	2015v2.0	
US Government Securities - End of Year Book Value:		
US Government Securities - End of Year Fair Market Value:		
State & Local Government Securities - End of Year Book Value:	1,030,386	
State & Local Government Securities - End of Year Fair Market Value:	1,030,386	

TY 2015	Investments -	· Other Schedule	

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ESG Cross Border Equity

Blackstone Strategic Partners

Czech II Senior Loan Trust

SLP IV Technology Fund

Privately-held securities

Elements Rogers Tr

GSO Mezzanine Finance Fund

CSP III Distressted Opportunities

LS Real Estate Recoverty IV Trust

OZOFII Access LTD

Sirios Access LTD

Name: Sorenson Impact Foundation

As Filed Data -

EIN: 45-3203840 **Software ID:** 15000324

Software Version: 2015v2.0

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ML Winton Futures Access	FMV	669,412	669,412
Ascend Access LTD	FMV	1,005,495	1,005,495
Brevan Howard Mulit-Strategy	FMV	1,106,909	1,106,909

FMV

FMV

FMV

FMV

FMV

FMV

FMV

FMV

FMV

FMV

FMV

Ascend Access LTD	FMV
Brevan Howard Mulit-Strategy	FMV
Carlson Double Black Diamond	FMV

285,149	285,14
518,177	518,17
290,863	290,86
187,022	187,02
48,697,842	48,697,84

56,274

1,526,945

1,926,860

316,545

248,024

DLN: 93491320038746

1,526,945

1,926,860

316,545

248,024

56,274

Category Amou	nt Net Investment	Adjusted Net	Disbursements for			
Software Version: 2015v2.0						
Software ID:	15000324					
EIN:	45-3203840					
Name: Sorenson Impact Foundation						
TY 2015 Legal Fees Schedule						
efile GRAPHIC print - DO NOT PROCESS	AS FIIEd Data -	DL	N: 93491320038746			

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal	44,985	0	0	44,985

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TY 2015 Other Assets Schedu	le	
Name:	Sorenson Impact Foundation	
EIN:	45-3203840	
Software ID:	15000324	

DI N: 93491320038746

3,929,473

12,027

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Program related investments

State tax refund

Software Version: 2015v2.0			
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Accrued interest - PRI loans	29,169	73,383	73,383

1,963,507

3,929,473

12,027

TY 2015 Other Expenses Schedule					
Nam	ne: Sorenson In	npact Foundation			
E:	IN: 45-3203840	1			
Software :	ID: 15000324				
Software Version	on: 2015v2.0				
Description Re	evenue and Expenses	Net Investment	Adjusted Net Income	Disbursements for	

DLN: 93491320038746

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Software version: 2013V2.0					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Bank charges	424				
Insurance	2,868				
Licenses & Fees	50				
Postage	174				
Security	5,306				
Storage	671				
Telephone	14				

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491320038746						
TY 2015 Other Income Schedule						
Name:	Name: Sorenson Impact Foundation					
EIN:	: 45-3203840					
Software ID:	15000324					
Software Version:	2015v2.0					
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
K-1 Investment income		126,728	-263,416			

TY 2015 Other Professional Fe	TY 2015 Other Professional Fees Schedule			
Name:	Sorenson Impact Foundation			
EIN:	45-3203840			
Software ID:	15000324			

DLN: 93491320038746

65,600

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Program-related investment

services

Software	Software Version: 2015v2.0					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Investment management	312,619	312,619	0	0		

65,600

efile GRAPHIC print - DO NOT P	ROCESS	As File	ed Data -			DLN: 93491320038746
TY 2015 Taxes Schedule	e					
!	Name:	Sorenso	n Impact	Foundation	n	
	EIN:	45-3203	840			
Softwa	are ID:	1500032	24			
Software Ve	ersion:	2015v2.	0			
Category	Amo	unt		estment	Adjusted Ne	et Disbursements for

Software V	Software Version: 2015v2.0					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Federal Excise Tax	65,000					
Foreign Taxes	1,471	17,186				

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491320038746		
Schedule B		Schedu	le of Contributors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information abo	ut Schedule B (Fo	Form 990, 990-EZ, or 990-PF orm 990, 990-EZ, or 990-PF) and its owwwwww.irs.gov/form990	instructions is at	2015		
Name of the organizati				Employer ide	entification number		
Sorenson Impact Found				45-320384	0		
Organization type (ch	eck one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)(_)(e	enter number) org	anızatıon				
	- 4947(a)(1)	nonexempt charita	able trust not treated as a private fo	oundation			
527 political organization							
Form 990-PF	Form 990-PF						
	4947(a)(1)	nonexempt charita	able trust treated as a private found	ation			
☐ 501(c)(3) taxable private foundation							
	=		hat received, during the year, contri s I and II See instructions for deteri				
For an organization ander sections for a received from a Part VIII, line 1h,	509(a)(1) and 170(b)(1) ny one contributor, durii or (ii) Form 990-EZ, line	n(A)(vi), that chec ng the year, total of 1 Complete Parts		Z), Part II, line 13, 16a 5,000 or (2) 2% of the	, or 16b, and that amount on (ı) Form 990,		
during the year,		ore than \$1,000 <i>e</i>	r (10) filing Form 990 or 990-EZ that cclusively for religious, charitable, sete Parts I, II, and III				
during the year, this box is chec purpose Do not	contributions exclusive ked, enter here the total complete any of the pa	ely for religious, ch contributions that rts unless the Ge	r (10) filing Form 990 or 990-EZ that a laritable, etc., purposes, but no suct were received during the year for neral Rule applies to this organizate more during the year	h contributions totaled an <i>exclusively</i> religiou tion because it receive	more than \$1,000 lf us, charitable, etc , ed nonexclusively		
990-EZ, or 990-PF), but	it must answer "No" o	n Part IV, line 2, of	and/or the Special Rules does not its Form 990, or check the box on loes not meet the filing requirements	line H of its			

Name of organization

Sorenson Impact Foundation

Employer identification number 45-3203840

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Sorenson Molecular Genealogy Fdtn		Person 🗸
	299 S Main Street Suite 2200		Payroll
		\$ 5,118	│ │ Noncash ┌─
	Salt Lake City, UT 84111		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		<u>\$</u>	Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
No.	Name, address, and ZiF + 4	Total colli ibutions	Type of contribution Person
	-		
			Payroll
		<u>\$</u>	Noncash
			(Complete Part II for noncash contributions)

Employer identification number

orenson Impact Foundation		45-3203840		
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		5		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		Schedule B (Form 9	90, 990-EZ, or 990-PF)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)