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OMB No 1545-0052

2015

Open to Public Inspection

# Form 990-PF

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>.

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

	e of foun			A Employer ide	A Employer identification number						
JUI	IN AND I	MARCIA PRICE F	FAMILY FOUNDATION			84-1402027					
Numl	ber and s	street (or P O b	ox number if mail is not o	delivered to street address)	Room/suite	BTelephone num	nber (see instructions	5)			
		SOUTH TEMPLE				(801) 478-8000					
City (	or town,	state or province	e, country, and ZIP or for	eun nostal code		<b>C</b> If exemption	application is pending	ı. check here 🕨 🗀			
		ΠΥ, UT 84111	o, seana,, and 22. oe.								
<b>G</b> Ch	eck all	l that apply	Initial return Final return	Initial return of a fo	rmer public charity	<b>D 1.</b> Foreign org	ganizations, check he	ere 🕨 🦵			
			Address change	Name change			ganizations meeting				
<b>H</b> C h	eck tyr	 pe of organiza	ation Section 50	1(c)(3) exempt private	foundation	E If private fou	test, check here and attach comput <b>E</b> If private foundation status was termin				
			nexempt charitable t	trust 「Other taxable	private foundation		507(b)(1)(A), chec	k here 🕨 🖡			
			assets at end	Accounting method <b>F</b> Other (specify)	✓ Cash   Accrual	F II the lounda	tion is in a 60-month i 507(b)(1)(B), chec				
		om Part II, col \$ 13,221,57	, (C)	Part I, column (d) must b	be on cash basis.)	under section	1 307(b)(1)(b), cliec	Kliele F )			
Pai			of Revenue and	Fxpenses				Disbursements			
		(The total of a	amounts in columns (b), qual the amounts in colum	(c), and (d) may not	Revenue and expenses per	Net investment ( <b>b</b> ) income	Adjusted net (c) income	for charitable purposes			
		necessariiy eq instructions) )		in (a) (see	(a) books	(b) income	(c) meonic	(d) (cash basis only)			
	1	Contribution	ns, gıfts, grants, etc ,	received (attach							
		schedule)			982,302						
	2	Check 🟲 🦵	ıf the foundation is <b>m</b>	ot required to attach							
		Sch B .									
	3	Interest on	savings and tempora	ry cash investments							
	4	Dividends a	nd interest from secu	ırıtıes	268,740	268,740	268,740				
	5a										
	b		ncome or (loss)		225.040						
₽	6a		(loss) from sale of as	_	235,848						
Revenue	b		price for all assets of 309,113	on line 6a							
~	7		•	rt IV, line 2)		235,848					
	8		erm capital gain				14,172				
	9		difications								
	10a	allowances	less returns and								
	b		of goods sold								
	С	·		nedule)							
	11		ne (attach schedule)								
	12				1,486,890	504,588	282,912				
	13	•	ion of officers, directo	_ ´ <b>- ⊢</b>							
	14			ges							
şe.	15	•		s							
ē.	16a	-	•		o <del>5</del> 3 4 530	4.520					
Expenses	b			·	4,528	4,528					
	C			schedule)							
and Administrative	17				<b>∞5</b> □ 10.00¢	2.906					
IST.	18	· ·			10,806	2,806					
H	19			and depletion							
ㅎ	20										
<u> </u>	21	•	·	gs    -	7 902			7 902			
	22				7,892 <b>%</b> 6,832	6,832		7,892			
Operating	23		nses (attach schedu) ting and administrati	· L	0,002	0,032					
era e	24	=	_	· · · · · · ·	30,058	14,166		7,892			
ð	25				1,348,394			1,348,394			
	26 26		ses and disbursemen	-	1,3 10,33 1			1,310,331			
		25		ESIA da IIII CS Z I dila	1,378,452	14,166		1,356,286			
	27		e 26 from line 12 evenue over expenses	and dishursements	108,438						
	a b		nent income (if negati		100,430	490,422					
	c			, enter -0-)		,	282,912				

Рa	rt II	<b>Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	·
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing		1 002 570	1 002 570
	2	Savings and temporary cash investments	3,168,135	1,883,570	1,883,570
	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 🟲			_
95	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			10,459,638
	С	Investments—corporate bonds (attach schedule)	897,593	878,368	878,368
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) 🟲			
	15	O ther assets (describe 🟲)			
	16	<b>Total assets</b> (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	14,086,992	13,221,576	13,221,576
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ęş	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
_	22		<b>%</b> 472,500 <b>%</b>	219,200	
	23	Total liabilities(add lines 17 through 22)	472,500	219,200	
		Foundations that follow SFAS 117, check here			
φŞ		and complete lines 24 through 26 and lines 30 and 31.			
NC.	24	Unrestricted			
100	25	Temporarily restricted			
	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ā		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	13,614,492	13,002,376	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances(see instructions)	13,614,492	13,002,376	
2	31	Total liabilities and net assets/fund balances(see instructions)	14,086,992	13,221,576	
Рa	rt III		, ,		
1		Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must sar	ee I I	
•		with end-of-year figure reported on prior year's return)	• • • • • • • • • • • • • • • • • • • •		13,614,492
2		Enter amount from Part I, line 27a			108,438
3		Other increases not included in line 2 (itemize)		3	100,750
4		Add lines 1, 2, and 3		-   3	13,722,930
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	720,554
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F			13,002,376
-			,	- 1 - 1	,

Part IV Capital Gains and Losses for Tax on Investment Income

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	•	How acquired P—Purchase (b) D—Donation	(0)	Date acquired mo , day, yr )	Date sold (d) (mo , day, yr )		
1a	See Additional Data	Table		(b) D—Dollacion	+				
b									
					+				
d					+				
	e) Gross sales price	Depreciation allowe <b>(f)</b> (or allowable)	Depreciation allowed Cost (f) (or allowable) (g) plus e			Gain or (loss) (h) (e) plus (f) minus (g)			
a	See Additional Data		(5)			(11) (11) [11]	(,, (5)		
ь									
С									
d									
<u>-</u>									
	mplete only for assets	showing gain in column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus		
		Adjusted basis	· 1	cess of col (ı)	$\dashv$	•	ot less than -0-) <b>or</b>		
(1)	FMV as of 12/31/69	<b>(j)</b> as of 12/31/69	(k) ove	rcol (j), ıfany	(I)	Losses	(from col (h))		
а	See Additional Data	Table							
b									
c									
d									
e									
3	Net short-term capit	me or (net capital loss)		in Part I, line 7	2		2 3 5 ,8 4 8		
	in Part I, line 8 .	Part I, line 8, column (c) (see instru	• • • • •	• • •	3		14,172		
Part	V Qualification (	Under Section 4940(e) for R	educed Tax or	Net Investme	ent Ir	ıcome			
	tional use by domestic   on 4940(d)(2) applies,	private foundations subject to the se leave this part blank	ection 4940(a) tax	on net investmen	incom	ie)			
		e section 4942 tax on the distribute ot qualify under section 4940(e)			erıod?		┌ Yes ┌ No		
		unt in each column for each year, s			tries				
	(a) e period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncha	rıtable-use assets		(d) Distributio (col (b) divided	n ratio		
	2014	1,223,587		14,261,783			0 08580		
	2013	1,349,991		11,677,688			0 11560		
	2012	590,638		8,503,858			0 06946		
	2011	605,152		8,349,005			0 07248		
	2010	478,644		8,363,651			0 05723		
2	<b>Total</b> of line 1, colum			2		0 400565			
3	the number of years	ratio for the 5-year base period—dithe foundation has been in existence	e ıf less than 5 yea	rs	3		0 080113		
4		f noncharitable-use assets for 201!	•	_	4		13,428,807		
5		e 3		<u> </u>	5		1,075,822		
6		stment income (1% of Part I, line 2		<u> </u>	6		4,904		
7	Add lines 5 and 6.				7		1,080,726		

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See

the Part VI instructions

1,356,286

	990-PF (2015)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	10(a)	or 4948—se	o page	18 of	the inst	ructio		age <b>4</b>
	Exempt operating foundations described in section 4940(d)(2), check here		- OI - J-10 - SC	د page. ۱	10 01	the mac	ructio	113)	
1a	and enter "N/A" on line 1	ı							
	Date of ruling or determination letter			ļ					
	(attach copy of letter if necessary—see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, c	check		ļ	1				4,904
	here Fand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizat Part I, line 12, col (b)	ions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found enter -0-)	lation	s only Othe	ers	2				
3	Add lines 1 and 2				3				4,904
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found	datıon	s only Oth	ers	4				
5	enter -0-) <b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, en	ter-∩	_		5				4,904
6	Credits/Payments	tei o		•	3				+,504
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	6,658					
b	Exempt foreign organizations—tax withheld at source	6b		0,000					
c	Tax paid with application for extension of time to file (Form 8868)	6c		7,000					
d	Backup withholding erroneously withheld	6d		, ,000					
7	Total credits and payments Add lines 6a through 6d				7			1.3	3,658
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 22				8				-,
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount			<b>&gt;</b>	10				8,754
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	,754	Refunded	<b>&gt;</b>	11				<del></del>
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state,	or loc	al legislatio	n or dı	d			Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for po	olitica	l purposes (	see In	structı	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities a	and co	pies of any r	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?					•	<b>1</b> c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impose		- '						
	(1) On the foundation \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for political terms of the second s	ical e	xpenditure t	ax ımp	osed				
2	on foundation managers  \$\blacktriangler* \\$  Has the foundation engaged in any activities that have not previously been repo						2		No
2		ortea	to the IKS?				2		No
2	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its		vnina inatvii	mant	5 mt 1 a l a a	_			
3	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a confoi</i>	-	_	•		>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more du						4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_					4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction duri						5		No
	If "Yes," attach the statement required by General Instruction T.		. , ca						
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	5)sa	tisfied eithe	r					
	By language in the governing instrument, or	-,							
	• By state legislation that effectively amends the governing instrument so tha	t no n	nandatory di	rectio	ns				
	that conflict with the state law remain in the governing instrument?						6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year?	If "Yes	s," complete	Part II,	. col. (c	),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see	ee ins	tructions)						
	<u>► UT</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990								
	General (or designate) of each state as required by General Instruction G? If "N						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the m		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (se	e inst	ructions for	rart X	TA),		^		Ne
10	If "Yes," complete Part XIV	· ·	a cchedula	licting	therr	· · ·	9	$\vdash \vdash \vdash$	No
10	and addresses.			_			10		No
		-		-	-				

Pai	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	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►TOM KLC Telephone no ►(801	) 478	-8000	
	Located at ►230 EAST SOUTH TEMPLE SALT LAKE CITY UT  ZIP+4 ►84111			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
				<del></del>
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ء ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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	t 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
<b>1</b> 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?  Yes Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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"			
	if 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 )			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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			
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? <b>Yes ▼ No</b>			
	If "Yes," list the years 🕨 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
_	▶ 20, 20, 20			
3 <b>a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
D	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 <b>(3)</b> 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
ъ b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-ru		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pai	Statements Rega	rding Activities for	· Wr	nich Form 4720	May	Be Required ( <i>Cont</i>	tinue	ed)		
5a	During the year did the foundatio	n pay or incurany amoun	t to							
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e	))?	√ No			
	(2) Influence the outcome of any	specific public election (	(see	section 4955), or to	carı	ry				
	on, directly or indirectly, any	voter registration drive?				T Yes 🖟	√ No			
	(3) Provide a grant to an individu	al for travel, study, or otl	ners	ımılar purposes?		┌ Yes रि	√ No			
	(4) Provide a grant to an organiza	ation other than a charita	ble,	etc , organization de	scrib	ped				
	in section 4945(d)(4)(A)? (s	ee instructions)				\ Yes \	√ No			
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or						
	educational purposes, or for t	he prevention of cruelty	to ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No			
b	If any answer is "Yes" to 5a(1)-(	exceptions described in								
	Regulations section 53 4945 or		5b		No					
	Organizations relying on a currer	_								
c										
	tax because it maintained expend	liture responsibility for th	he gr	ant?		T Yes [	√ No			
	If "Yes," attach the statement requ									
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	niums on				
	a personal benefit contract?						- No			
b	Did the foundation, during the yea	ar, pay premiums, directl	y orı	ndirectly, on a perso	onall	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter tı	ransaction? <b>\( Yes</b> \)	√ No			
b	If yes, did the foundation receive	•	-	•				7b		No
	Information Abou	t Officers, Director						l Emp	loyee	s,
	and Contractors	·		<u>,                                      </u>						
1	List all officers, directors, trustee	s, foundation managers a	nd t	heir compensation (	see i	nstructions).				
		Title, and average	(c)	Compensation( <b>If</b>		(d) Contributions to		Evnens		unt
	(a) Name and address	hours per week		not paid, enter	e	mployee benefit plans			e accou Illowanc	
		(b) devoted to position		-0-)		deferred compensation	L`´			
See	Additional Data Table									
		1								
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "	NONE.	,	
	(a)	Title, and aver	.2.00			Contributions to				
Nar	me and address of each employee		_	(c) Compensation	n	employee benefit			se acco	
	more than \$50,000	(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	otnera	allowand	es
NON	IE									
		<del></del>								
							1			
		<del> </del>								
							-			
<b>.</b>	I mumb an a fact	<u> </u>				<u> </u>	-			
LOTA	I number of other employees paid of	vers50000.	_		_		1			

Part VIII Information About Officers, Directors, Trusto and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (		E"
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the number	of Expenses
rganizations and other beneficiaries served, conferences convened, research papers prod	uced, etc	Lxpelises
1		
2		
3		
4 Part IX-B Summary of Program-Related Investments (	see instructions)	
Describe the two largest program-related investments made by the foundation during	•	A mount
1	the tax year on lines I and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>•</b>

#### Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	10,739,955
b	Average of monthly cash balances	1b	2,893,352
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	13,633,307
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	13,633,307
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	204,500
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	13,428,807
6	Minimum investment return. Enter 5% of line 5	6	671,440
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ceil check here ►  and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	671,440
2a	Tax on investment income for 2015 from Part VI, line 5 2a 4,904		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2c	4,904
3	Distributable amount before adjustments Subtract line 2c from line 1	3	666,536
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	666,536
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	666,536
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	4-	1 256 206
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,356,286
	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
Ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,356,286
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see instructions)	5	4,904
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,351,382
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	toundation qualifies for

Р	art XIII Undistributed Income (see	instructions)				
		(a Cor	n) pus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d</b> ) 2015
1	Distributable amount for 2015 from Part XI, line	e 7				666,536
2	Undistributed income, if any, as of the end of 20	15				
а	Enter amount for 2014 only					
b						
а		4,173				
b	From 2011 19	0,998				
c	From 2012 16	9,049				
d	From 2013	0,581				
е	From 2014 51	8,042				
f	Total of lines 3a through e		1,712,843			
4	Qualifying distributions for 2015 from Part					
	XII, line 4 🕨 \$ 1,356,286					
а	Applied to 2014, but not more than line 2a					
b	Applied to undistributed income of prior years					
	(Election required—see instructions)					
С	Treated as distributions out of corpus (Election required—see instructions)		0			
d	Applied to 2015 distributable amount					666,536
е	Remaining amount distributed out of corpus		689,750			
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	;	2,402,593			
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					
е	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					0
7	Amounts treated as distributions out of					
	corpus to satisfy requirements imposed by					
	section $170(b)(1)(F)$ or $4942(g)(3)$ (Election m	· I				
	be required - see instructions)	·				
8	Excess distributions carryover from 2010 not		64,173			
^	applied on line 5 or line 7 (see instructions). Excess distributions carryover to 2016.	· ·	•			
9	Subtract lines 7 and 8 from line 6a	[	2,338,420			
10	Analysis of line 9					
		0,998				
		9,049				
		0,581				
d	Excess from 2014 51	8,042				
е	Excess from 2015 68	9,750				

	Part XIV Private Operating Foundate	tions (see ınstru	ictions and Part	VII-A, question	19)	r age II
1a	If the foundation has received a ruling or determined foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	ıs a private opera	ting foundation de	scribed in section	√ 4942(j)(3) or	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) local
h	yearlisted					
	Qualifying distributions from Part XII,					
d	Ine 4 for each year listed A mounts included in line 2c not used directly for active conduct of exempt					
e	activities					
3	Subtract line 2d from line 2c Complete 3a, b, or c for the					
•	alternative test relied upon "Assets" alternative test—enter					
а	(1) Value of all assets					
	(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					
c	"Support" alternative test—enter					
	<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments</li> </ol>					
	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					
Pā	rt XV Supplementary Information (			e organizatio	n had \$5,000 o	r more in
	assets at any time during the Information Regarding Foundation Managers: List any managers of the foundation who have obefore the close of any tax year (but only if the	ontributed more thy have contributed	an 2% of the tota more than \$5,000	0) (See section 5	07(d)(2))	
U	List any managers of the foundation who own 10 ownership of a partnership or other entity) of whether the state of the sta				range portion of th	e
	Information Regarding Contribution, Grant, Gif	t Loan Scholarshi	n etc Programs:			
_	Check here  if the foundation only makes counsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and countries.	ontributions to pre n makes gifts, gran	selected charitabl	e organizations ar		
_a	The name, address, and telephone number or e JOHN AND MARCIA PRICE FAMILY FOUNDA 230 EAST SOUTH TEMPLE SALT LAKE CITY, UT 84111 (801) 478-8000		ne person to whom	n applications sho	uld be addressed	
b	The form in which applications should be subm	itted and informati	on and materials t	hey should includ	e	
c	Any submission deadlines NONE					
d	Any restrictions or limitations on awards, such factors	as by geographica	al areas, charitable	e fields, kinds of ii	nstitutions, or othe	r
	NONE					

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 1,348,394 **b** Approved for future payment

Form 990-PF (2015)  Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page <b>1</b> 2		
nter gross amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	n 512, 513, or 514	<b>(e)</b> Related or exemp		
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See instructions )		
a					,		
b							
d							
e f							
<b>g</b> Fees and contracts from government agencies							
Membership dues and assessments  Interest on savings and temporary cash investments							
Dividends and interest from securities			14	268,740			
Net rental income or (loss) from real estate  a Debt-financed property							
<b>b</b> Not debt-financed property							
Net rental income or (loss) from personal property							
Other investment income							
Gain or (loss) from sales of assets other than inventory			18	235,848			
Net income or (loss) from special events Gross profit or (loss) from sales of inventory •							
Other revenue a							
b							
d							
e ! Subtotal Add columns (b), (d), and (e)				504 500			
<b>Total.</b> Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify	calculations )			504,588 <b>13</b>	504,588		
art XVI-B Relationship of Activities to							
ine No. Explain below how each activity for wh the accomplishment of the foundation (instructions)							

Part	: XVI		Information Re Noncharitable					saction	ns and	Relationships	With			
		organi	zation directly or i	ndırectly (	engage	ın any of t	the following wi						Yes	No
	janiza	•					,		•					
<b>a</b> Tra	nsfer	s fron	n the reporting four	ndation to	a nonc	harıtable e	exempt organız	ation of						
(1)	Cas	h										1a(1)		No
(2)	Oth	eras	sets									1a(2)		No
<b>b</b> Ot	her tr	ansac	tions											
(1)	) Sale	es of a	assets to a noncha	rıtable ex	empt or	ganızatıoı	n					1b(1)		No
(2)	) Pur	chase	s of assets from a	noncharit	able ex	empt orga	inization					1b(2)		No
(3)	) Ren	tal of	facilities, equipme	nt, or othe	erasset	ts						1b(3)		No
(4)	) Reir	nburs	ement arrangemer	nts								1b(4)		No
(5)	) Loa	ns or	loan guarantees.									1b(5)		No
			ce of services or m									1b(6)		No
<b>c</b> Sh	arıng	of fac	ılıtıes, equipment, i	mailing lis	ts, oth	erassets,	or paid employ	ees				1c		No
of t	the go any tr	ods, o ansac	to any of the above other assets, or se tion or sharing arr	rvices giv angement	en by t , show :	he reportii in column	ng foundation I	If the fou of the goo	indation index	received less than rassets, or servio	n fair marko ces receive	et value ed	!	
(a) Line	e NO	(D	) Amount involved	(c) Name	or nonci	аптаріе ехе	empt organization	(a)	Description	of transfers, transact	ions, and sna	aring arra	ngemer	its
des	scribe	d in s	tion directly or indirectly or indirection 501(c) of the plete the following some of organization in the plete the following some of organization in the plete the plete for the plete f	ne Code (d schedule		an sectioi		ın sectı			otion of relati		es 🔽	No
Sign Here	the	best ormat ***	enalties of perjury, of my knowledge a ion of which prepar *** ature of officer or t	and belief, rer has an	ıt ıs tru	ıe, correct		Declar			May t May t return with t below	r) is bas he IRS di he prepa	sed on scuss th	all nis vn
		1			I			T <sub>F</sub> :		Tour so so		nstr )? ✓	resi f	10
			nt/Type preparer's CHARLES HUBER		Prepa	rer's Sıgn	ature	Date		Check if self- employed ▶	PTIN	009421	45	
Paid Prep Use														
Only		Firm's address   375 South 300 West Salt Lake City, UT 84101  Phone no									.)328-50(	00		

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
68 SHARES COVIDIEN PLC	Р	2014-06-01	2015-01-27
MEDTRONIC PLC	Р	2015-01-27	2015-01-28
87 SHARES PALL CORPORATION	Р	2014-06-04	2015-05-18
5 SHARES LIBERTY BROADBAND CORP	Р	2014-12-11	2015-01-08
430 SHARES CABLEVISION SYSTEMS CORP	Р	2015-06-14	2015-09-17
MORGAN STANLEY ACCT 93788 (SEE ATTACHED)	Р	2015-01-25	2015-04-20
MORGAN STANLEY ACCT 93788 (SEE ATTACHED)	Р	2014-06-04	2015-11-30
Capital Gain Dividends			

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
7,395		4,968	2,427
1		1	
10,773		7,414	3,359
43			4 3
14,083		7,451	6,632
36,577		34,866	1,711
20,306		18,565	1,741
			219,935

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (1) (k) over col (j), ıf any	col (k), but not less than -0-) <b>or</b> (l) Losses (from col (h))
			2,427
			3,359
			43
			6,632
			1,711
			1,741

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average	(c) Compensation(If	(d)	Expense account,
(a) Name and address	hours per week  (b) devoted to position	not paid, enter	Contributions to employee benefit plans and deferred compensation	(e) other allowances
JOHN PRICE	Trustee&MANAGER	0		
230 EAST SOUTH TEMPLE SALT LAKE CITY,UT 84111	0 00			
TOM KLC	Executive Direc	0		
230 EAST SOUTH TEMPLE SALT LAKE CITY,UT 84111	0 00			
MARCIA PRICE	MANAGER	0		
230 EAST SOUTH TEMPLE SALT LAKE CITY,UT 84111	0 00			
JOHN STEVEN PRICE	MANAGER	0		
230 EAST SOUTH TEMPLE SALT LAKE CITY,UT 84111	0 00			
DEIRDRA PRICE	MANAGER	0		
230 EAST SOUTH TEMPLE SALT LAKE CITY,UT 84111	0 00			
JENNIFER PRICE WALLIN	MANAGER	0		
230 EAST SOUTH TEMPLE SALT LAKE CITY, UT 84111	0 00			

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	into una continuationo	raia baring	the real of Approved for	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
KENNEDY CT FOR THE ARTS MALL CENTER WASHINGTON, DC 20566	NONE	N/A	PROGRAM SUPPORT	180,500
RIRIE WOODBURY DANCE COMP 50 WEST 200 SOUTH SALT LAKE CITY,UT 84101	NONE	N/A	PROGRAM SUPPORT	20,000
BALLET WEST 50 WEST 200 SOUTH SALT LAKE CITY,UT 84101	NONE	N/A	PROGRAM SUPPORT	686,667
ART ACCESS PO BOX 4163 SEATTLE,WA 98104	NONE]	N/A	PROGRAM SUPPORT	1,000
CARMEL BACH FESTIVAL POST OFFICE BOX 575 CARMELBYTHESEA,CA 93921	NONE	N/A	PROGRAM SUPPORT	5,000
LA JOLLA MUSIC SOCIETY PO BOX 12039 LA JOLLA,CA 92039	NONE	N/A	PROGRAM SUPPORT	10,000
PLANNED PARENTHOOD OF UTAH 654 SOUTH 900 EAST SALT LAKE CITY,UT 84102	NONE	N/A	PROGRAM SUPPORT	1,000
PIONEER THEATRE COMPANY 300 SOUTH 1340 EAST SALT LAKE CITY,UT 84112	NONE	N/A	PROGRAM SUPPORT	1,000
REPORTORY DANCE THREATRE 1402 LINDEN STREET ALLENTOWN,PA 18102	NONE	N/A	PROGRAM SUPPORT	1,000
SALT LAKE ACTING COMPANY 168 W 500 S SALT LAKE CITY,UT 84103	NONE	N/A	PROGRAM SUPPORT	10,000
SALT LAKE ARTS CENTER 20 SOUTH WEST TEMPLE SALT LAKE CITY,UT 84101	NONE	N/A	PROGRAM SUPPORT	1,000
SHAKESPEARE THEATER COMPANY 516 EIGHTH STREET SE WASHINGTON, DC 20003	NONE	N/A	PROGRAM SUPPORT	1,000
UTAH SYMPHONY OPERA 123 WEST SOUTH TEMPLE SALT LAKE CITY UT,UT 84101	NONE	N/A	PROGRAM SUPPORT	102,000
ROWLAND HALL ST MARKS SCHOOL 843 SOUTH LINCOLN SALT LAKE CITY,UT 84102	NONE	N/A	PROGRAM SUPPORT	56,272
UNIVERSITY OF UTAH 410 Campus Center Drive Salt Lake City, UT 84112	NONE	N/A	PROGRAM SUPPORT	10,000
Total			≯ 3a	1,348,394

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CHABAD LUBAVITCH OF UTAH 1433 SOUTH 1100 EAST SALT LAKE CITY,UT 84105	NONE	N/A	PROGRAM SUPPORT	25,000
KINGSBURY HALL 1395 E PRESIDENT CIRCLE SALT LAKE CITY,UT 84112	NONE	N/A	PROGRAM SUPPORT	10,000
UNITED STATES HOLOCAUST MUSEUM 9911 WPICO BLVD LOS ANGELES,CA 90035	NONE	N/A	PROGRAM SUPPORT	2,500
UTAH COUNCIL CITIZEN DIPLOMACY 370 E SOUTH TEMPLE SUITE 175 SALT LAKE CITY,UT 84111	NONE	N/A	PROGRAM SUPPORT	16,500
INTERNET KEEP SAFE COALITION 515 N STATE STREET CHICAGO,IL 60610	NONE	N/A	PROGRAM SUPPORT	2,500
SHRINERS HOSPITAL FOR CHILDREN 2900 RICKY POINT DRIVE TAMPA,FL 33607	NONE	N/A	PROGRAM SUPPORT	1,000
SUNDANCE INSTITUTE 1825 THREE KINGS DR PARK CITY,UT 84060	NONE	N/A	PROGRAM SUPPORT	54,000
UTAH SPORTS COMMISSION 201 SOUTH MAIN SUITE 2125 SALT LAKE CITY,UT 84111	NONE	N/A	PROGRAM SUPPORT	13,500
JEWISH COMMUNITY CENTER 2 NORTH MEDICAL DRIVE SALT LAKE CITY,UT 84113	NONE	N/A	PROGRAM SUPPORT	500
COUNCIL AMERICAN AMBASSADORS 888 17TH STREET NW SUITE 306 WASHINGTON, DC 20006	NONE	N/A	PROGRAM SUPPORT	1,000
UNITED JEWISH FEDERATION OF UTAH 2 NORTH MEDICAL DRIVE SALT LAKE CITY,UT 84113	NONE	N/A	PROGRAM SUPPORT	2,500
UTAH SHAKESPEARE FESTIVAL 351 WEST CENTER STREET CEDAR CITY, UT 84720	NONE	N/A	PROGRAM SUPPORT	20,000
METROPOLITAN OPERA LINCOLN CENTER NEW YORK,NY 10023	NONE	N/A	PROGRAM SUPPORT	5,000
PUBLIC THEATER 425 LAFAYETTE STREET NEW YORK,NY 10003	NONE	N/A	PROGRAM SUPPORT	1,000
MD ANDERSON CANCER CENTER PO BOX 4486 HOUSTON,TX 77210	NONE	N/A	PROGRAM SERVICES	1,000
Total				1,348,394

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
PLAN B THEATER 138 WEST BROADWAY SALT LAKE CITY,UT 84101	NONE	N/A	PROGRAM SUPPORT	500
UTAH MUSEMUM CONTEMPORY ARTS 20 SOUTH WEST TEMPLE SALT LAKE CITY,UT 84101	NONE	N/A	PROGRAM SUPPORT	2,000
UTAH FILM CENTER 122 SOUTH MAIN STREET SALT LAKE CITY,UT 84101	NONE	N/A	PROGRAM SUPPORT	5,000
UNIVERSITY OF UTAH MORAN EYE CENTER 65 MARIO CAPECCHI DRIVE SALT LAKE CITY,UT 84132	NONE	N/A	PROGRAM SERVICES	10,000
MUKUTO BUILDING FUND MAMA PAULINA SCHOOL OF HOPE MUKURO KE	NONE	N/A	PROGRAM SUPPORT	9,805
WHITWORTH UNIVERSITY 300 W HAWTHORNE RD SPOKANE,WA 99251	NONE	N/A	PROGRAM SUPPORT	1,000
UTAH TIBETAN ASSOCIATION 135 W 2950 S SALT LAKE CITY,UT 84115	NONE	N/A	BUDDHA STATUE & PROGRAM SERVICES	75,750
EXPERIENCE AFRICA GALA 1 SOUTH MAIN STREET SALT LAKE CITY,UT 84133	NONE	N/A	PROGRAM SERVICES	450
LEUKEMNIA SOCIETY 5296 COMMERCE DR W 101 MURRAY,UT 84107	NONE	N/A	PROGRAM SERVICES	1,000
NORTHERN ARIZONA UNIVERSITY 1015 S SAN FRANCISCO ST 6050 FLAGSTAFF, AZ 86011	NONE	N/A	PROGRAM SERVICES	200
YOUTH MAKING A DIFFERENCE 2597 WEST 2780 SOUTH WEST JORDAN,UT 84084	NONE	N/A	PROGRAM SERVICES	250
Total				1,348,394

# **TY 2015 Accounting Fees Schedule**

Name: JOHN AND MARCIA PRICE FAMILY FOUNDATION

**EIN:** 84-1402027

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HUBER, ERICKSON & BOWMAN	4,528	4,528	0	0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491238007016

# **TY 2015 Investments Corporate Bonds Schedule**

Name: JOHN AND MARCIA PRICE FAMILY FOUNDATION

**EIN:** 84-1402027

**Software ID:** 15000324

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE FIXED INCOME	878,368	878,368

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491238007016

## **TY 2015 Investments Corporate Stock Schedule**

Name: JOHN AND MARCIA PRICE FAMILY FOUNDATION

**EIN:** 84-1402027

**Software ID:** 15000324

Name of Stock	End of Year Book Value	End of Year Fair Market Value
INVESTMENTS IN STOCKS	7,257,822	7,257,822
UNIT INVESTMENT TRUSTS	954,670	954,670
MUTUAL FUNDS	2,247,146	2,247,146

### **TY 2015 Other Expenses Schedule**

Name: JOHN AND MARCIA PRICE FAMILY FOUNDATION

**EIN:** 84-1402027

**Software ID:** 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROKER FEES	6,832	6,832		

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#### **TY 2015 Other Liabilities Schedule**

Name: JOHN AND MARCIA PRICE FAMILY FOUNDATION

**EIN:** 84-1402027

**Software ID:** 15000324

Description	Beginning of Year - Book Value	End of Year - Book Value
FUNDS HELD FOR UNIVER OF UT FINE ART CTR	472,500	219,200

#### **TY 2015 Taxes Schedule**

Name: JOHN AND MARCIA PRICE FAMILY FOUNDATION

**EIN:** 84-1402027

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	2,806	2,806		
INCOME TAXES	8,000			

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491238007016

LN. 93491236007010

OMB No 1545-0047

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

**Employer identification number** 

JOHN	AND MARCIA PRICE	FAMILY FOUNDATION			
	84-1402027				
Organ	ization type (check or	ne)			
Filers	rs of: Section:				
Form 990 or 990-EZ		501(c)( ) (enter number) organization			
		☐ 527 political organization			
Form 990-PF		√ 501(c)(3) exempt private foundation			
		□ 501(c)(3) taxable private foundation			
	al Rule  For an organization t	(i), (8), or (10) organization can check boxes for both the General Rule and a Sp filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a	totaling \$5,000 or more (in money or		
Specia	al Rules	any one contributor complete Parts Fand if See instructions for determining a	Sommistion's total contributions		
Opcoid	ii raics				
Γ	under sections 509(a) received from any one	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% supp (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part e contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or e Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that		
Γ	during the year, total of	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions of more than \$1,000 exclusively for religious, charitable, scientific, cruelty to children or animals. Complete Parts I, II, and III	·		
Γ	during the year, contri this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received butions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the <b>General Rule</b> applies to this organization becatic, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively		

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
JOHN AND MARCIA PRICE FAMILY FOUNDATION

Employer identification number 84-1402027

Part I	Contributors (see instructions) Use duplicate copies of Part I i	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	JOHN PRICE 230 EAST SOUTH TEMPLE	\$ 160,650	Person Payroll Noncash	Г Г Г
	SALT LAKE CITY, UT 84111		(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
2	JOHN PRICE 230 EAST SOUTH TEMPLE	\$ 443,352	Person Payroll Noncash	L L
	SALT LAKE CITY, UT 84111		(Complete Part II f	•
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
3	JOHN PRICE		Person Payroll	Г Г
	230 EAST SOUTH TEMPLE	\$ 316,400	Noncash	
	SALT LAKE CITY, UT 84111		(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
4	JOHN PRICE 230 EAST SOUTH TEMPLE  SALT LAKE CITY, UT 84111	\$ 61,900	Person  Payroll  Noncash  (Complete Part II f	「 「 or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
		\$	Person Payroll	r r
			Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution —
		\$	Person Payroll Noncash	r r
			(Complete Part II f contributions)	or noncash

Name of organization JOHN AND MARCIA PRICE FAMILY FOUNDATION		Employer identification n	Employer identification number		
JOHN AND MAR	CIA PRICE FAMILY FOUNDATION	84-1402027			
Part II	Noncas h 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		
1	DR HORTON INC - 5,000 SHARES	\$ 160,650	2015-12-23		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
2	DISNEY WALT COMPANY - 4,200 SHARES	\$ 443,352	2015-12-23		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
3	EDWARDS LIFESCIENCE CORP - 4,000 SHARES	\$ 316,400	2015-12-23		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
4	GENERAL ELECTRIC COMPANY - 2,000 SHARES	\$ 61,900	2015-12-23		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<u> </u>			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)
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nedule B (Form 990, 9	990-EZ, or 990-PF) (2015)		Page <b>4</b>
<b>ne of organization</b> IN AND MARCIA P	RICE FAMILY FOUNDATION		imployer identification number
total more line entry. of \$1,000 or	than \$1,000 for the year from any or	tions to organizations describ ne contributor. Complete colu ll, enter the total of exclusively mation once. See instructions.	ed in section 501(c)(7), (8), or (10) that mns (a) through (e) and the following religious, charitable, etc., contributions    \blacktriangleright   \blac
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee		
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =	Transferacio name adduses and	(e) Transfer of gift	Deletionship of transferer to transferer
<u>-</u>	Transferee's name, address, and		Relationship of transferor to transferee
		<u> </u>	_