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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 separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052 2015

Open to Public Inspection

For e	alend	lar year 2015 or tax year beginning	, 201	5, and endin	<u>g</u>		, 20
Na	me of fo	oundation			A Employer	identification number	
DI	ANA	S ELLIS FOUNDATION			87-0609	445	
		nd street (or PO box number if mail is not delivered to street address)		Room/suite		number (see instructions)	1
		ST AVE	,			·	
		vn, state or province, country, and ZIP or foreign postal code			C If exempti	on application is pending,	check here
		Lake City, UT 84103	- f - f - · · · · · · · · · · · · · · ·	 -			. —
i C	neck a		of a former public cl	narity	D 1. Foreign	n organizations, check he	re · · · · ▶∐
		Final return Amended ret			2. Foreign	n organizations meeting th	ne 85% test,
	hook t	ype of organization X Section 501(c)(3) exempt privi				here and attach computat	
Ä			ate foundation axable private found	dation		oundation status was terr	
F		rket value of all assets at J Accounting method		Accrual	7	07(b)(1)(A), check here	
		/ear (from Part II, col (c), Other (specify)		Zi vecinai		idation is in a 60-month te tion 507(b)(1)(B), check h	
	ne 16)	—	on cash hasis)		under sec	alon 507 (b)(1)(b), check f	leie · · · · · P
	rt I	Analysis of Revenue and Expenses (The total of	011 00011 00010.7	\neg	<u> </u>		(4) 0 - 5
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	books	ır	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)		-			"
	2	Check ► X if the foundation is not required to attach Sch B · · ·	7 :				
	3	Interest on savings and temporary cash investments · · · ·				<u> </u>	
	4	Dividends and interest from securities	21,1	62	21,162		-
	5a	Gross rents		<u> </u>	21,102		
	b	Net rental income or (loss)	. 4				
6	6a	Net gain or (loss) from sale of assets not on line 10 · STM139	(5	69)			
3	b	Gross sales price for all assets on line 6a 14,569					
Kevenue	7	Capital gain net income (from Part IV, line 2) · · · · · · ·		-			*
2	8	Net short-term capital gain	*				-
	9	Income modifications				·	
	10a	Gross sales less returns and allowances • • • •	72				
	b	Less Cost of goods sold · · · · · · ·	-		#		
-	С	Gross profit or (loss) (attach schedule)					- 1
	11	Other income (attach schedule)	, - -				
	12	Total. Add lines 1 through 11	20,5	93	21,162		
/ 0	13	Compensation of officers, directors, trustees, etc · · · · ·			'		
enses	14	Other employee salaries and wages					
ē	15	Pension plans, employee benefits					
š	16a	Legal fees (attach_schedule)					
e H	b	Accounting fees (attach schedule) srm108	7	50			
€	С	Other professional fees (attach schedule) stm109	3,4	17			
šťr	17	Interest AAY 1 2013 101					
≝	18	Taxes (attach schedule) (see instructions)	3	100			
Ē	19	Depreciation (attach schedule) and depletion					e tea fagur
Ĭ	20	Occupancy					
	21	Travel, conferences, and meetings					
<u>а</u>	22	Printing and publications					
5	23	Other expenses (attach schedule) STM103		10			
perating and Administrative Ex	24	Total operating and administrative expenses.					
ŏ	25	Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	4,4		0		0
J	25	Contributions, gifts, grants paid		000 2 2 2 2			17,000
	26	Total expenses and disbursements. Add lines 24 and 25	21,4	177 Ve 15.50 = 0	0		17,000
		Subtract line 26 from line 12		t i di di i i i i i i i i i i i i i i i			
	27	Evenes of revenue over evenence and distance and					
	a	Excess of revenue over expenses and disbursements .	(8 	884)			
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	(8 	884)	21,162		

P,	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	t year
, ,	y + 11	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	18,396	15,601	15,601
	2	Savings and temporary cash investments			
	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			
ţ	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
ĕ	l	Investments - U S and state government obligations (attach schedule)			
	l .	Investments - corporate stock (attach schedule) STM137	305,506	307,417	286,829
	i	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis		· · · · · · · · · · · · · · · · · · ·	*
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·			
	13	Investments - other (attach schedule)		·	
	i	Land, buildings, and equipment basis		- 1 - <u>,</u> 1 1	
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		Instructions Also, see page 1, Item I)	323,902	323,018	302,430
	17	Accounts payable and accrued expenses	323,302		302,430
	18	Grants payable			
es	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			- "
abi	21	Mortgages and other notes payable (attach schedule)			
Ë	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here · · · · · · ▶ X			
Ś	İ	and complete lines 24 through 26 and lines 30 and 31.			* _ 2*
ĕ	24	Unrestricted	323,902	323,018	
ja	25	Temporarily restricted	323,302	525,010	
ä	26	Permanently restricted			1.
pu]	Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds			
ĕ	30	Total net assets or fund balances (see instructions)	323,902	323,018	
É	31	Total liabilities and net assets/fund balances (see	323,902	323,016	
	•	instructions)	323,902	323,018	
P	art II	·		323,018	
		net assets or fund balances at beginning of year - Part II, column (a), line	· · · · · · · · · · · · · · · · · · ·	———	
•		of-year figure reported on prior year's return)			303 000
2		r amount from Part I, line 27a			323,902
					(884)
4	Add I	r increases not included in line 2 (itemize)		4	202 010
		eases not included in line 2 (itemize)		5	323,018
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (h) line 30	·	323 018
-	·	The course of range balanoes at one of year (line of finitus line of a fall line)	ORGANII (D), III G JU		1 323 D18

Form 990-RF (2015) DIANA S ELLIS FOUNDATION

87-0609445

Page 2

			1/61 1/4				
	be the kind(s) of property sold (e.g., real of the kind(s) or common stock, 200 shs. MLC		P-F	ow acquired Purchase Donation	(c) Date acqu (mo , day,		(d) Date sold (mo , day, yr)
1							
0							
<u>d</u>							
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other ba s expense of sa		((or (loss)) minus (g)
a	<u></u>	<u> </u>					
<u> </u>							
C .							
1		 					
<u> </u>		<u> </u>	4040440				·
Complete only for assets show	ving gain in column (h) and owned b	y the foundatio	n on 12/31/6	9	(I) G	ains (Co	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		Excess of coler coler coler (j), if any		col (k), Lo	, but not osses (fr	less than -0-) or om col (h))
	83 01 12/3 1/03		21 COI (j), 11 alii)	<u>' </u>			
a 		7					
<u> </u>			···-		<u> </u>		
c d			·				
9					<u> </u>		
9	a If gain s	Ilso enter in Pa	rt I. lino 7		T		
Capital gain net income or (ne	et capital loss)	enter -0- ın Pa	•	}	2		
Not short term capital gain or	(loss) as defined in sections 1222(5)		iti, sirie i				
	e 8, column (c) (see instructions) If		ın	_			
• ,		• •		}			
raiti, iiie o · · · · · ·				-	2		
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Form			60944			ige 4
Par		- see	instru	ction	<u>s)</u>	
√1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			: - 		~ - E
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	, , , , , , , , , , , , , , , , , , ,	··· ··································		212
	here X and enter 1% of Part I, line 27b			 - <u>-</u> -	ير	1
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			#		<u></u>
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0
3	Add lines 1 and 2	3_				212
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				212
6	Credits/Payments				-	
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a					- :
b	Exempt foreign organizations - tax withheld at source					. 1
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d 6d				-	. :
7	Total credits and payments Add lines 6a through 6d	7	Ĭ			
8	Enter any penalty for underpayment of estimated tax. Check here	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				212
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded	11				
Pai	t VII-A∃ Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			- 1	Yes	No
	participate or intervene in any political campaign?		[1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?			1b	}	Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					- 7
	published or distributed by the foundation in connection with the activities			T	-	
С	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			7. 4		
_	(1) On the foundation > \$ (2) On foundation managers > \$. "_	i
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				2 -	<i>#</i>
·	on foundation managers > \$			- 1	_ =	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
-	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				`	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
•	If "Yes," attach the statement required by General Instruction T			e'		 -
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				,	
Ū	By language in the governing instrument, or			-	-	-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			[; <u>*</u>		, .
	conflict with the state law remain in the governing instrument?			6	X	
-			• •	7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Particle the state to which the foundation send to switch which the source of the state of th	t XV	• •	2 7 2	<u>^</u>	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				#	
	UT					,~_
p						
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation		• •	8b	<u>X</u> *5.5 ***	- W-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			100	- Want	
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV		• •	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			.		
	names and addresses	<u>· · · · ·</u>	<u> </u>	10		X

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Par	t 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)	1	1	X
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)	1	2	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1:	3 X	
	Website address N/A			
14	The books are in care of ▶ GEOFF ELLIS Telephone no ▶ 8	01-395-	-4373	
	Located at ► 763 1ST AVE, Salt Lake City, UT ZIP+4 ► 8	4103		
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 · · · · · · · · ▶ 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	10	6	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. 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
1a	Dunng 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 X	No		j.,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	į	-	
		No -	=	-
		No [
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X	No :	-	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1.	· .	
	the benefit or use of a disqualified person)?	No :		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	"	<i>-</i>	
	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) · · · · · · · · ·	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)?	· · 1	b	
	Organizations relying on a current notice regarding disaster assistance check here · · · · · · · · · · · · · · · · · ·			
С	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?	10	C	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	×	- 4	
	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?	No .		
h	If "Yes," list the years	~	-	
b	, , ,	- 3		-
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
С	all years listed, answer "No" and attach statement - see instructions)	2	b	<u> </u>
Ü	in the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years here	- *	1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	2	- -	-
Ja		No I	-	-
b		110 E		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	É		1 2 -
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		E-6	-	
	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.)	= 2	li E.	
4a	foundation had excess business holdings in 2015)	3		+
4a b		• 4		X
J	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?			
	changes purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4	b	X

Form 990-PF (2015) DIANA S ELLIS FOUNDA		Which Form	4720	May Ball			7-0609		Pag	ge 6
Part VII-B Statements Regarding Activitie		vnich Forn	14/20	way be	tequir	ea (cor	ilinuea)			<u>-</u>
5a During the year did the foundation pay or incur any am			- 4045/-	 0	Г	7 v	X No	274	# - T-	
(1) Carry on propaganda, or otherwise attempt to influ	_	•	•	• •	Г	Yes	X No	¥		
(2) Influence the outcome of any specific public election					Г	7 v	TZ Na			
directly or indirectly, any voter registration drive?					-	Yes	X No	- 1	= -	
(3) Provide a grant to an individual for travel, study, or					٠٠٠ ل	_ Yes	X No	* -1	T. 2 - T.	W - 1
(4) Provide a grant to an organization other than a cha		. •			_	٦.,			- ₋ -	1
, , , , , , , , , , , , , , , , , , , ,					· · · L	Yes	X No	74 g 7		-
(5) Provide for any purpose other than religious, chari					r	¬	<u> </u>	-		_ ,
purposes, or for the prevention of cruelty to childre				• • • • • •			X No	- =	" - "	i
b If any answer is "Yes" to 5a(1)-(5), did any of the trans		· -		=		ın		-		
Regulations section 53 4945 or in a current notice rega	_		-					5b		
Organizations relying on a current notice regarding dis							▶ ∐	g -		3
c If the answer is "Yes" to question 5a(4), does the found			from the	tax	_	,			1-	ź
because it maintained expenditure responsibility for the	_				· · · L	Yes	No	ļ., * .		
If "Yes," attach the statement required by Regulations	section 5	i3 4945-5(d)								
6a Did the foundation, during the year, receive any funds,	directly	or indirectly, to	pay pren	niums	_	_		1	-	_ =
on a personal benefit contract?					[Yes	X No			
b Did the foundation, during the year, pay premiums, direction	ctly or in	ndirectly, on a p	ersonal	benefit contr	act?			6b		X
If "Yes" to 6b, file Form 8870					_	_		#. #		=
7a At any time during the tax year, was the foundation a p	arty to a	prohibited tax	shelter tr	ansaction?	• [Yes	X No	ā -		Ē
b If "Yes," did the foundation receive any proceeds or ha	ve any n	et income attri	outable to	the transac	tion?		-	7b		
Part VIII Information About Officers, Dire	ctors,	Trustees,	Found	ation Mai	nagers	, Highl	y Paid	Emplo	yees,	
and Contractors						_	_	_	-	
1 List all officers, directors, trustees, foundation mana	gers an	d their compe	nsation	(see instru	ctions).					
(a) Name and address		e, and average		mpensation		Contribution		(e) Exp	ense acco	ount,
(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benet erred com			allowance	
DIANA ELLIS SMITH	PRESI	DENT	STMA	01				· ·		
6315 N 44TH ST, AZ 85253		0.00		0			0			0
ANNE M ELLIS	SECRE		STMA			-	<u>_</u>			-
83 DIVISADERO ST, CA 94117		0.00		0			0			0
GEOFF E ELLIS	TREAS		STMA							-
763 FIRST AVE, UT 84103	110110	0.00	Jim	0			0			0
705 11101 AVE, 01 04105		0.00_								
2 Compensation of five highest-paid employees (othe	than th	oso included	on line (1 coo inct-	··otions)	lf none				—
"NONE."	tilairti	iosa iliciddad	OH IIII	1 - 200 111211	uctions	. Il none	, enter			
NONE.		1				400				
(a) Name and address of each employee paid more than \$50	000	(b) Title, and	average			employe	butions to e benefit	(e) Exp	ense acco	ount.
(a) Name and address of each employee paid more than \$50	000	hours per v	veek osition	(c) Compe	isation	plans and	deferred nsation		allowance	
		· · · · · · · · · · · · · · · · · · ·				Опре				
NONE										
]								
		ļ						<u> </u>		
										
- <u></u> -										
										_
								<u> </u>		
Total number of other employees paid over \$50,000 · · ·		· · · · · · · · ·		<u></u>		<u> </u>	. <u>. </u>			0
EEA								Form 9	90-PF (2	015)

orm 990-PF (2015) DIANA S ELLIS FOUNDATION		609445 Page
Part VIII Information About Officers, Directors, Trustees, Fou and Contractors (continued)	ndation Managers, Highly Pa	id Employees,
B Five highest-paid independent contractors for professional services (see ins	tructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE	· · · · · · · · · · · · · · · · · · ·	
otal number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	
Part IX-A Summary of Direct Charitable Activities		
Summary of Direct Chantable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta		Expenses
organizations and other beneficiaries served, conferences convened, research papers produced,	etc	
2		
3		
•		
4		
Part IX-B Summary of Program-Related Investments (see ins	tructions)	<u></u>
Describe the two largest program-related investments made by the foundation during the tax year	·	Amount
1		-
2		
-		
All other program-related investments See instructions		
3		
otal. Add lines 1 through 3		
EEA		Form 990-PF (201

Pai	Minimum Investment Return (All domestic foundations must complete this part. Foreign	founda	ations,
<u> </u>	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes.		
a	Average monthly fair market value of secunties	1a	314,799
b	Average of monthly cash balances	1b	18,180
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	332,979
е	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	0
3	Subtract line 2 from line 1d	3	332,979
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
_	instructions)	4	4,995
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	327,984
6	Minimum investment return. Enter 5% of line 5	6	16,399
- 4		undati	ons
_	and certain foreign organizations check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	16,399
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b 300		
C	Add lines 2a and 2b	2c	512
3	Distributable amount before adjustments Subtract line 2c from line 1	3	15,887
4	Recoveries of amounts treated as qualifying distributions	4	_
5	Add lines 3 and 4	5	<u> 15,887</u>
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	15,887
Pa	rt XII Qualifying Distributions (see instructions)		
_			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	17,000
ь	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		
a	Suitability test (prior IRS approval required)	3a	
b	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	17,000
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	212
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,788
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	founda	ition
	qualifies for the section 4940(e) reduction of tax in those years		
FFA			Form 990 PE (2015)

		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
•	line 7				15,887
2 a	Undistributed income, if any, as of the end of 2015.				
a b	Enter amount for 2014 only · · · · · · · · · · · · · · · · · · ·				
3	Total for pnor years,, Excess distributions carryover, if any, to 2015	A	And the second s		
а	From 2010 · · · · · · · ·				
b	From 2011		, 7 ⁷ -	_ " " " -	
	From 2012	" " " " " " " " " " " " " " " " " " " "	·	=	
d	From 2013			- " "	
	From 2014	- #			
f	Total of lines 3a through e	934	-		
4	Qualifying distributions for 2015 from Part XII,	934			
-	line 4. ▶ \$ 17,000				- · · · · · · · · · · · · · · · · · · ·
а	Applied to 2014, but not more than line 2a	# .	"		
	Applied to undistributed income of prior years				<u> </u>
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election	<u> </u>			
	required - see instructions)		7 d - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
d	Applied to 2015 distributable amount	"-:			15 007
е	Remaining amount distributed out of corpus · · ·	1,113	<u> </u>	<u> </u>	15,887
5	Excess distributions carryover applied to 2015		т н	_	<u></u>
	(If an amount appears in column (d), the same		1 1 1 1		
	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 .	2,047		7	* * - '
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				
θ	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount - see				
	instructions				a
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2016				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required - see instructions)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
40	Subtract lines 7 and 8 from line 6a	2,047			
10	Analysis of line 9				
a L	Excess from 2011				
b	Excess from 2012				
C	Excess from 2013 · · · · ·				
d	Excess from 2014 934	Filiper (
е_	Excess from 2015 1,113				rene en

		LLIS FOUNDATION				87-060	944	15 Page 10
	XIV Private Operating Four							
	If the foundation has received a ruling or		•	ing				
	foundation, and the ruling is effective for 2		•		<u> </u>			
	Check box to indicate whether the foundate	ation is a private operati	ng foundation describ	oed in section		4942(ј)(3) ог	Ц	4942(j)(5)
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	(a) 2015	(b) 2014	(c) 2013	L	(d) 2012		(e) local
	each year listed				L			<u> </u>
b	85% of line 2a							
c	Qualifying distributions from Part XII, line 4 for each year listed							
d	Amounts included in line 2c not used directly for active conduct of exempt activities •							
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the alternative test relied upon							
а	"Assets" alternative test - enter (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 (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)							
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)							
	(3) Largest amount of support from an exempt organization							
	(4) Gross investment income							
Part	XV Supplementary Informa			he foundation had	3 \$	5,000 or m	ore	in assets at
	any time during the year	r - see instructio	ns.)					
1	Information Regarding Foundation M	fanagers:						
а	List any managers of the foundation wh before the close of any tax year (but on					e foundation		
	NONE							
b	List any managers of the foundation who ownership of a partnership or other entities.		·		port	ion of the		
	NONE				_		_ =	
2	Information Regarding Contribution,	Grant, Gift, Loan, Scl	nolarship, etc., Prog	ırams:				
	Check here ► X if the foundation on unsolicited requests for funds. If the foundations, complete items 2a, b,	indation makes gifts, gr	o preselected charita ants, etc (see instruc	ble organizations and doctions) to individuals or or	es r rgar	not accept sizations under	•	
а	The name, address, and telephone num	nber or e-mail address	of the person to whor	m applications should be	add	ressed.		
b	The form in which applications should t	oe submitted and inform	ation and materials the	ney should include.				
С	Any submission deadlines							
d	Any restrictions or limitations on awards factors	s, such as by geograph	cal areas, chantable	fields, kinds of institution	IS, O	r other		

Form 990-PF (2015)

DIANA S ELLIS FOUNDATION

Part XV | Supplementary Information (continued)

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	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CANINE COMPANIONS FOR INDEPENDENCE				
124 RANCHO DEL ORO DRIVE				
Oceanside, CA 92057	NONE	POF	DONATION	5,000
OGDEN SCHOOL FOUNDATION				
1950 MONROE BLVD				
Ogden, UT 84401	NONE	POF	DONATION	5,000
PEOPLE HELPING PEOPLE				
205 N 400 W				
Salt Lake City, UT 84103	NONE	PF	DONATION	2,000
WEBER PATHWAYS				
P.O. BOX 972				
Ogden, UT 84402	NONE	POF	DONATION	5,000
ogacii, 01 04402	NONE	101	DONATION	3,000
Total				17.000
b Approved for future payment			Ja	17,000
		ļ		

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er gross amounts unless otherwise indicated	Unrelated	business income	Excluded by se	ection 512, 513, or 514	(e)
D	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
Program service revenue	code				<u> </u>
b			+		
c			1		 -
A					
е		**	 		
f					
g Fees and contracts from government agencies · · ·	,		<u> </u>		
Membership dues and assessments			-		
Interest on savings and temporary cash investments	•			_	
Dividends and interest from securities	-		14	21,162	
Net rental income or (loss) from real estate:			-		
a Debt-financed property	·				
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		ļ <u>.</u>			
Net income or (loss) from special events	•				
Gross profit or (loss) from sales of inventory	•				
Other revenue a					
b					
c					
d					
е					
Total. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the	e Accomp	lishment of Ex	empt Purpo	13	21,1
Total. Add line 12, columns (b), (d), and (e) · · · · e worksheet in line 13 instructions to verify calculations)	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,:
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Explain below how each activity for which ince	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,:
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,:
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Explain below how each activity for which income.	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Explain below how each activity for which inc	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) TXVI-B Relationship of Activities to the Explain below how each activity for which income.	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) int XVI-B Relationship of Activities to the Explain below how each activity for which inc	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) TXVI-B Relationship of Activities to the Explain below how each activity for which income.	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) int XVI-B Relationship of Activities to the Explain below how each activity for which inc	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,:
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the	e Accomp	lishment of Exceed in column (e) of I	empt Purpos	ses buted importantly to the	21,:

87-0609445

ran	XVII	······	i Regarding Tra ganizations	insters to and transac	cions and	Relation	snips	witn	Nonc	naritai	DIE	
1	Old the			e in any of the following with a	ny other orga	nization desc	ribed				Yes	No
		-		on 501(c)(3) organizations) or	-					4-		
		` '	ode (other than section	on 30 1(c)(3) organizations, or	i section ozi	, relating to p	Ontica					
	_	rations?	na foundation to a na	anchastable exempt ergenizete	on of							
				nchantable exempt organizati						40(4)		v
										1a(1)		X
	• •									1a(2)	100-110-110-1-0-1	<u> </u>
		ransactions									:	
	` '		oncharitable exempt	ū						1b(1)		X
				exempt organization						1b(2)		_X_
	,			ets						1b(3)		X
										1b(4)		X
	(5) Lo	ans or Ioan guaran	itees · · · · · ·		• • • • • •	• • • • • •				1b(5)		X
	(6) Pe	rformance of servi	ces or membership o	r fundraising solicitations •	• • • • • •	• • • • • •				1b(6)		_X_
С	Sharin	g of facilities, equip	oment, mailing lists, o	ther assets, or paid employees						1c		_X
d	If the a	inswer to any of the	e above is "Yes," com	plete the following schedule (Column (b) sh	ould always s	show the	fair m	arket			
	value o	of the goods, other	assets, or services g	iven by the reporting foundation	n If the found	dation receive	d less th	ıan faır	market			
	value i	n any transaction o	or sharing arrangemei	nt, show in column (d) the valu	e of the good	ls, other asse	ts, or se	rvices	received	t		
a) Line	e no (l	b) Amount involved	(c) Name of none	charitable exempt organization	(d) Des	cription of trans	fers, tran	sactions	s, and sh	anng arra	ngeme	ents
		·						-				
						_						
										·		
				·····								
												
												
2a		-	•	with, or related to, one or more	-	organizations	}			_	_	,
	descri	bed in section 501	(c) of the Code (other	than section 501(c)(3)) or in s	ection 527?			• • • •		Yes	s X	No
b	If "Yes	," complete the foll	owing schedule									
		(a) Name of organ	nization	(b) Type of organizat	on		(c) De:	scription	of relati	onship		
		<u>-</u>										
							-					
	Unc	der penalties of perjury, I	declare that I have examin	l ed this return, including accompanying ian taxpayer) is based on all information	schedules and s	tatements, and to	the best o	f my kno	wledge an	nd belief, it i	s true.	
Sig	n corr			ian taxpayer) is based on all information	of which prepar	er has any knowl	edge					
_			. Ellis	15/2/10	TDE A CIT	DED				IRS discuss preparer sh		
Her	۲ ' -	Signature of officer or tr	ustee	Date	Title	<u>rer</u>		—	(see inst		Yes	No
		Print/Type prepa		Preparer's agnature		Date			1,	PTIN		
Pai	d			Tudy elli	el-	1		Check	_	ŀ		
		KENNETH F		KENNETH R CUTLER		<u> 05-02-20</u>		self-em	ployed	P0122	<u> 3245</u>	<u> </u>
	pare		KENNETH R				Firm's Ell	N -	·		 -	
Use	On	y Firm's address	► 284 S 1375				Phone no)				
			Bountiful	UT 84010			İ					

Federal Supporting Statements

Name(s) as shown on return

DIANA S ELLIS FOUNDATION

87-0609445

Form 990PF - Part VIII Compensation Explanation

Statement #A01

Name

DIANA ELLIS SMITH

Explanation

NONE

Form 990PF - Part VIII Compensation Explanation PG01 Statement #A02

Name

ANNE M ELLIS

Explanation

NONE

Form 990PF - Part VIII Compensation Explanation PG01 Statement #A03

Name

GEOFF E ELLIS

Explanation

NONE

Federal Supporting Statements Name(s) as shown on return DIANA S ELLIS FOUNDATION 87-0609445

Form 990PF - Part II - Line 10(b)
Investments: Corporate Stock Schedule

Statement #137

Category	BOY	Book Value	EOY FMV
MUTUAL FUNDS	305,506	307,417	286,829
Totals	305,506	307,417	286,829

PG01 Statement #139

Form 990PF - Part I - Line 6(a) Gain(Loss) from Sale of Other Assets Schedule

Name	guggenheim bullit shares
Term	Long-Term
Date Acquired	2013-09
How Acquired	purchased
Date Sold	2015-12
Purchaser	
Gross Sales	\$ 14,415
Basis	\$ 14,984
Accumulated Depreciation	\$
Sales Expense	\$
Total Net	\$ (569)
Name	GUGGENHE IM
Term	Short-Term
Date Acquired	2015-06
How Acquired	PURCHASED
Date Sold	2015-12
Purchaser	
Gross Sales	\$ 154
Basis	\$ 154
Accumulated Depreciation	\$
Sales Expense	\$
Total Net	\$

		Federal Su	Federal Supporting Statements	nents	. 2015 PG01	
Name(s) as shown on return					1.8	<u>:</u>
DIANA S ELLIS FOUNDATION					87-0609445	_
	Form 990P	Form 990PF - Part I - Line 23	3 - Other Expenses Schedule	chedule	Statement #103~	
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose		
OTHER EXPENSES	10	0	0	0		
Totals	10	0	0	0		
	Form 990PF - Part I	- Part I - Line 16(}	- Line 16(b) - Accounting Fees Schedule	Schedule	PG01 Statement #108∼	
Description TAX PREPERATION	Revenue and expenses	Net investment	Adjusted net income	Charıtable purpose		
Totals	750	0	0	0		

Name() a Ealis POUSDATION Form 990PF - Part I - Line 16 (c) - Other Professional Pass Schedule Reservance Res Adjusted Charitable Rocklylon and expenses Livessidant not income purpose Rocklylon Bawenine Ret Adjusted Charitable Rocklylon Part I - Line 18 - Taxes Schedule Rocklylon Ret Adjusted Charitable Rocklylon Savenine Ret Part I - Line 18 - Taxes Schedule Rocklylon Adjusted Charitable Rocklylon Adjusted Charitable Rocklylon Adjusted Charitable Rocklylon Adjusted Charitable Rocklylon Savenine Ret I - Line 18 - Taxes Schedule Rocklylon Saven			Federal Su	Federal Supporting Statements	nents	2015 PG01
Form 990PF - Part I - Line 16(c) - Other Professional Fees Schedule and expanses investment net income purpose 3,417	Name(s) as shown on return DIANA S ELLIS FOUNDATION					1.00 00 1
Revenue Net Adjusted Charitable 3,417 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Form 990PF - Pa		Other Professional	Fees Schedule	Statement #109~
3,417	Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
Form 990PF - Part I - Line 18 - Taxes Schedule Revenue Net Adjusted Charitable and expenses investment net income purpose 300 0 0 300 0 0	BROKERAGE FEES	3,417	0	0	0	
Form 990PF - Part I - Line 18 - Taxes Schedule Revenue Net Adjusted Charitable and expenses investment net income purpose 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Totals			0		
Revenue Net Adjusted Charitable and expenses investment net income purpose 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
Ravenue Net Adjusted Charitable and expenses investment net income purpose 300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						PG01
Revenue Net Adjusted Charitable and expenses investment net income purpose 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Form	990PF - Part I - Li	ne 18 - Taxes Schedu	Je	Statement #110~
	Description PEDERAL TAXES	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
	Totals	300	0	0		