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OMB No 1545-0052

Open to Public Inspection

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 four	ndation ICAL ASSOCIATION FOUNDATION		A Employer identification number						
01	AITTIEDI	CAL ASSOCIATION TO ONDATION			L	87-6122299				
		street (or P O box number if mail is	not delivered to street address)	Room/suite		<b>B</b> Telephone nun	nber (see instructions	5)		
310	0 E 4500	SOUTH				(801) 747-3500				
		state or province, country, and ZIP	or foreign postal code			<b>C</b> If exemption	application is pending	g, check here 🕨		
G Ch	neck all	that apply   Initial return	Initial return of a fo	rmer public charity				_		
		Final return Address chan	A mended return	,		<ul><li>D 1. Foreign organizations, check here</li><li>2. Foreign organizations meeting the 85%</li></ul>				
<b>H</b> Ch	eck ty	pe of organization	n 501(c)(3) exempt private	foundation		E If private fou	c here and attach cor ndation status was to	erminated		
∏Se	ction 4	947(a)(1) nonexempt charita	ible trust 「Other taxable	private foundation		under sectior	1 507(b)(1)(A), checl	k here 🕨 l		
		t value of all assets at end on Part II, col. (c),	JAccounting method  Other (specify)	Cash / Accrual			tion is in a 60-month i 507(b)(1)(B), checl			
	e 16) 🏲:		(Part I, column (d) must b	pe on cash basıs.)				,		
Pa	rt I	Analysis of Revenue (The total of amounts in columns necessarily equal the amounts in instructions))	(b), (c), and (d) may not	Revenue and expenses per	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)		
	1	Contributions, gifts, grants,	etc , received (attach							
		schedule)		14,182						
	2	Check 🟲 🔽 if the foundation	is <b>not</b> required to attach							
		Sch B								
	3	Interest on savings and tem	porary cash investments							
	4	Dividends and interest from	securities	210,812		210,812	210,812			
_	5a	Gross rents	_							
	b	Net rental income or (loss)		0.220						
Reveilue	6a b	Net gain or (loss) from sale of Gross sales price for all ass		9,228						
ğ	_	9,248	D TV   I 2 \			0.220				
	7	Capital gain net income (froi Net short-term capital gain				9,228				
	8   9	Income modifications								
	10a	Gross sales less returns and allowances	1							
	ь	Less Cost of goods sold.								
	c	Gross profit or (loss) (attach	n schedule)							
	11	Other income (attach sched	ule)	315,618		-628	315,618			
	12	Total.Add lines 1 through 11		549,840		219,412	526,430			
	13	Compensation of officers, di	rectors, trustees, etc							
	14	O ther employee salaries and	d wages							
ψ.	15	Pension plans, employee be	nefits							
Š	16a	Legal fees (attach schedule)	)							
\$	b	Accounting fees (attach sch	edule)	4,722			4,722			
تت ده	c	Other professional fees (atta	ach schedule)	44,968		22,968	27,968	17,000		
and Administrative Expenses	17	Interest	[							
stra	18	Taxes (attach schedule) (se	e instructions)	1,984						
Ē	19	Depreciation (attach schedu	ile) and depletion							
틀	20	Occupancy								
A A	21	Travel, conferences, and me	etings							
	22	Printing and publications .	<u> </u>							
Operating	23	Other expenses (attach sch	<u> </u>	322,047			320,017	2,030		
rat	24	Total operating and adminis	_							
2		Add lines 13 through 23.	<u> </u>	373,721		22,968	352,707	19,030		
J	25	Contributions, gifts, grants p		210,000				210,000		
	26	<b>Total expenses and disburse</b> 25		583,721		22,968	352,707	229,030		
	27	Subtract line 26 from line 12								
	a .	Excess of revenue over expe		-33,881		100 111				
	b	Net investment income (if ne	= '			196,444	170 700			
Eor 「	C	Adjusted net income(If nega			Cat	No. 11289V	173,723	<b>990-PE</b> (2015		

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	
	1	Cash—non-interest-bearing	(a) Book Value 347,345	<b>(b)</b> Book Value 27,939	(c) Fair Market Value
	2	Savings and temporary cash investments	106,787	119,996	
	3	Accounts receivable 2,184	100,707	115,550	
	3	Less allowance for doubtful accounts	3,268	2,184	
		Pledges receivable	5,200	2,104	
	4	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 -			
١٤	8	Inventories for sale or use	600	F 227	
Assets	9	Prepaid expenses and deferred charges	600	5,337	
Ă	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	4,700,249	4,006,023	
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans	3,933	3,428	
	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)	5,162,182	4,164,907	0
	17	Accounts payable and accrued expenses	350	6,206	
	18	Grants payable			
ě	19	Deferred revenue	334,554	116,269	
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lial	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)	1,329		
	23	Total liabilities(add lines 17 through 22)	336,233	122,475	
۰.۵		Foundations that follow SFAS 117, check here 🕨 🔽			
ě		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted	4,825,949	4,042,432	
89 89	25	Temporarily restricted			
됟	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🦵			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Š	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
ď	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	30	Total net assets or fund balances(see instructions)	4,825,949	4,042,432	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	5,162,182	4,164,907	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must agr	-ee	
		with end-of-year figure reported on prior year's return) $\dots$		1	4,825,949
2		Enter amount from Part I, line 27a		2	-33,881
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3		4	4,792,068
5		Decreases not included in line 2 (itemize) ▶		_ <b>%</b> 55	749,636
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F		e 30 <b>. 6</b>	4,042,432

Part IV Capital Gains	and Lo	sses for Tax on Inve	stment Income	;			
		d(s) of property sold (e g , re or common stock, 200 shs		How acquired P—Purchase (b) D—Donation	(6)	Date acquired (mo , day, yr )	Date sold (d) (mo , day, yr )
<b>1a</b> GNMA P183886 Ma	turity			P	+	008-01-01	2015-11-30
<b>b</b> P'ship distributions i	n exces	s of basis		Р	20	008-01-01	2015-01-01
d							
e							
		Depreciation allowe	d Cost	t or other basis	1	Gair	or (loss)
(e) Gross sales price		(f) (or allowable)		expense of sale			(f) minus (g)
a				2	0		-20
b	9,248						9,248
С							
d							
e							
Complete only for assets	showing	gaın ın column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus
(i) F M V as of 12/31/69		A djusted basis ( <b>j)</b> as of 12/31/69		cess of col (ı) r col (j), ıf any	(1)	col (k), but no	ot less than -0-) <b>or</b> (from col (h))
a							-20
b							9,248
С							
d							
e							
	_	r (loss) as defined in sectio ne 8, column (c) (see instru		) ,	2		9,228
	Inder	Section 4940(e) for R	educed Tay or	Net Investme	3	<u> </u>	
(For optional use by domestic If section 4940(d)(2) applies,	private f	oundations subject to the se					
Was the foundation liable for th If "Yes," the foundation does n					erıod?		┌ Yes ┌ No
$oldsymbol{1}$ Enter the appropriate amo	unt in ea	ach column for each year, se	ee instructions befo	ore making any ent	ries		
(a) Base period years Calendar year (or tax year beginning in)	Adju	<b>(b)</b> sted qualifying distributions	(c) Net value of noncha			(d) Distributio (col (b) divided	n ratio
2014		240,234		4,677,077			0 05136
2013		224,086		4,518,603			0 04959
2012		261,659		4,092,320			0 06394
2011		156,249		3,920,815			0 03985
2010	. (-1)	146,469		3,481,521			0 04207
- ,	` '			<u> </u>	2		0 246816
		the 5-year base period—div dation has been in existence			3		0 049363
4 Enter the net value o	fnoncha	ritable-use assets for 2015	from Part X, line 5	5	4		4,573,851
5 Multiply line 4 by line	e 3			[	5		225,779
6 Enter 1% of net inve	stment ı	ncome (1% of Part I, line 2	7b)	[	6		1,964
7 Add lines 5 and 6.				[	7		227,743

the Part VI instructions

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

Form **990-PF** (2015)

229,030

	990-PF (2015)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(a)	or 4948_s	ee nag	18 of	the inst	ructio		age <b>4</b>
	Exempt operating foundations described in section 4940(d)(2), check here		, 01 4540 3	t page	10 01	the mac	ructio	113)	
1a	and enter "N/A" on line 1	-,							
	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	V, check	<	)	1				1,964
	here Fand enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organi Part I, line 12, col (b)	zations	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable for enter $-0-$ )	undatıor	ns only Oth	ers	2				
3	Add lines 1 and 2			•	3				1,964
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fo enter -0-)	undatio	ns only Oth	ers	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less,	enter - (	0		5				 1,964
6	Credits/Payments								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	3,676					
ь	Exempt foreign organizations—tax withheld at source	6b		<u> </u>					
С	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d		·		7				3,676
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form	12220 1	s attached		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	unt over	paid	•	10			:	1,712
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	1,712	Refunded	•	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, sta	te, or lo	cal legislation	on or di	d			Yes	No
	ıt participate or intervene in any political campaign?						1a		No
b	$\mbox{Did}$ it spend more than \$100 during the year (either directly or indirectly) for	r politica	al 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	es and co	opies of any	materia	ls				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imp								
	(1) On the foundation \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for po	olitical e	expenditure	tax imp	osea				
2	on foundation managers * \$ Has the foundation engaged in any activities that have not previously been r	onortod	to the IDC2				2		No
2	If "Yes," attach a detailed description of the activities.	eported	to the 1K5				2		NO
3	Has the foundation made any changes, not previously reported to the IRS, in	ite dov	orning instri	ımant	articlos	_			
3	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a col</i>	_	_	•		5	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more						4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_					4b	$\vdash$	No
5	Was there a liquidation, termination, dissolution, or substantial contraction of						5		No
_	If "Yes," attach the statement required by General Instruction T.		,						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	945)sa	atisfied eithe	er					
	By language in the governing instrument, or	,							
	• By state legislation that effectively amends the governing instrument so	that no i	mandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument? . $$ .						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year	ar? <i>If "Ye</i>	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	l (see in:	structions)						
	<u> </u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form								
	General (or designate) of each state as required by General Instruction G? $I$						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015	(see ins	tructions for	rart X	TA )5		^		AI-
10	If "Yes," complete Part XIV	 c " attac	h a cohedulo	licting	ther r	· · ·	9	$\vdash \vdash \vdash$	No
10	and addresses.			_			10		No
								oxdot	

Par	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 ▶http://www.utahmed.org/WCM/Health_Promotion			
14	The books are in care of ▶Claudia Peterson Telephone no ▶(801	)747	-3500	
	Located at \$\infty\$ 310 E 4500 SOUTH SUITE 500 SALT LAKE CITY UT  ZIP+4 \$\infty\$ 8410742			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		<u> </u>	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		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
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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 ) Yes 🔽 No			
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			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1.		Na
_	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))  At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20			
ь	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 allyears listed, answer "No" and attach statement—see instructions )	2b		No
С	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			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
•	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2015.).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	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)-(	5), did <b>any</b> of the transac	tions	s fail to qualify under	r the	exceptions described in				
	Regulations section 53 4945 or	n a current notice regard	ling d	disaster assistance	(see	instructions)?		5b		No
	Organizations relying on a currer	t notice regarding disast	eras	ssistance check her	e		_			
С	If the answer is "Yes" to question									
	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	illowand	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			

3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		·
Total number of others receiving over \$50,000 for professional service	es	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1 PROVIDED GRANTS TO 21 ORGANIZATIONS TO PROVIDE DI TO INDIVIDUALS THESE INCLUDE OPERATIONAL GRANTS F SERVICES FOR YOUTHS IN ABUSIVE SITUATIONS, GRIEF SU EQUIPMENT FOR INDIVIDUALS IN REHABILITATION, AMONG	OR LOWINCOME CLINICS, SUPPORT PPORT AND COUNSELING, AND	184,50
2EDUCATION-RELATED PROVIDED A \$15,000 GRANT TO A LO RELATED COMMUNITY OUTREACH PROGRAMMING PROVIDE SURGICAL SOCIETY TO PRODUCE A PRESENTATION FOR RE LOCAL COMMUNITY COLLEGE TO FUND AN OUTREACH PROC	DCAL PBS STATION TO FUND HEALTH- ED A \$1,000 GRANT TO A LOCAL SIDENTS PROVIDED A \$2,500 GRANT TO	18,50
3SCHOLARSHIPS PROVIDED A GRANT TO A COLLEGE TO HEL HEALTHCARE FIELDS		7,00
4		
Part IX-B Summary of Program-Related Investment  Describe the two largest program-related investments made by the foundation dur	· · · · · · · · · · · · · · · · · · ·	A mount
1	ing the tax year on lines I and 2	Amount
2		
All other program-related investments See instructions		
3		

#### Part X Minimum Investment Return

PG	(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	4,400,084
b	Average of monthly cash balances	1b	290,036
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	4,690,120
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	A cquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,690,120
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions) 📆	4	116,269
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,573,851
6	Minimum investment return. Enter 5% of line 5	6	228,693
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	228,693
2a	Tax on investment income for 2015 from Part VI, line 5   2a   1,964		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
c	Add lines 2a and 2b	2c	1,964
3	Distributable amount before adjustments Subtract line 2c from line 1	3	226,729
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	226,729
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	226,729
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	229,030
b	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	229,030
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	1,964
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	227,066
	Note: 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	

P	art XIIII Undisti	ributed	Income (see instr	uctions)			
				(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d</b> ) 2015
1	Distributable amount	for 2015	from Part XI, line 7				226,729
2	Undistributed income	, if any, as	s of the end of 2015				
а	Enter amount for 201	4 only.					
b	Total for prior years	20	, 20, 20				
3	Excess distributions						
а	From 2010						
b	From 2011						
c	From 2012		10,093				
d	From 2013		2,850				
е	From 2014		13,732				
f	<b>Total</b> of lines 3a throu	ıgh e		26,675			
4	Qualifying distribution	s for 201	5 from Part				
	XII, line 4 🕨 \$						
а	Applied to 2014, but	not more	than line 2a				
b	Applied to undistribut (Election required—se						
c	Treated as distribution	ns out of	corpus (Election	0			
d	required—see instruct Applied to 2015 distr						226,729
	Remaining amount dis			2,301			220,723
	Excess distributions		•	2,501			
,	(If an amount appears	•	• •				
	same amount mus		• • • •				
6	Enter the net total of indicated below:	f each col	umn as				
а	Corpus Add lines 3f,	4c, and 4	e Subtract line 5	28,976			
b	Prior years' undistribu	ted incom	ne Subtract				
	line 4b from line 2b.						
C	Enter the amount of pr						
	income for which a not		•				
	been issued, or on whi tax has been previous						
d	Subtract line 6c from	•					
	—see instructions.						
е	Undistributed income	for 2014	Subtract line				
	4a from line 2a Taxab	ole amoun	it—see				
_	instructions						
Т	Undistributed income lines 4d and 5 from lir						
	be distributed in 2015						0
7	Amounts treated as d	ıstrıbutıor	ns out of				
	corpus to satisfy requ		•				
	section 170(b)(1)(F)						
_	be required - see insti	•					
8	Excess distributions of applied on line 5 or lin	,					
9	Excess distributions c						
_	Subtract lines 7 and 8	-		28,976			
10	Analysis of line 9						
	Excess from 2011.						
b	Excess from 2012.		10,093				
C	Excess from 2013.		2,850				
d	Excess from 2014.		13,732				
е	Excess from 2015.		2,301				

	art XIV Private Operating Foundat	ions (see instri	uctions and Part	VII-A question	9)	Page II
	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,	nination letter tha	t it is a private ope	erating	3)	
b	Check box to indicate whether the organization	ıs a prıvate opera	tıng foundatıon de	scribed in section		厂 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		( ) =
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
b	35% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts 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					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
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					
Pa	rt XV Supplementary Information (C assets at any time during the			e organizatior	n had \$5,000 o	r more in
	Information Regarding Foundation Managers: List any managers of the foundation who have considered the close of any tax year (but only if they	have contributed	I more than \$5,00	0) (See section 50	07(d)(2))	
b	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				large portion of th	e
	Information Regarding Contribution, Grant, Gift	. Loan. Scholarsh	ip, etc Programs:			
	Check here  if the foundation only makes co unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and d	ntributions to pre makes gifts, grar	selected charitabl	e organizations an		
а	The name, address, and telephone number or e-Michelle McOmber 310 E 4500 South Suite 500 Salt Lake City, UT 84107 (801) 747-3500 michelle@utahmed org	-mail address of t	he person to whom	n applications shou	uld be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should include	e	
	Application, IRS exemption letter, tax return, p	roject budget				
c	Any submission deadlines					
	April 15, October 15					
d	Any restrictions or limitations on awards, such	as by geographic	al areas, charıtabl	e fields, kinds of ir	stitutions, or othe	r

Must be to improve and support public health projects, facilities, education, etc

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 TableSee Additional Data Table 210,000 **b** Approved for future payment

Part XVI-A Analysis of Income-Prod	ucing Activitie	s			Page <b>12</b>
Enter gross amounts unless otherwise indicated		siness income	Excluded by section	n 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See
-	Busiliess code	Amount	Exclusion code	Amount	ınstructions )
a Cont Medical Ed Income     b Physician Leadership Gran					58,511 61,350
c REMS Education Grant					196,385
d					
e					
f					
g Fees and contracts from government agencie  2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	210,812	
5 Net rental income or (loss) from real estate					
<ul><li>a Debt-financed property</li><li>b Not debt-financed property</li></ul>	+				
6 Net rental income or (loss) from personal					
property	·		14	(20	
<ul><li>7 Other investment income.</li><li>8 Gain or (loss) from sales of assets other than</li></ul>			14	628	
inventory	.		18	9,228	
9 Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e  12 Subtotal Add columns (b) (d) and (e).				219 412	316 246
12 Subtotal Add columns (b), (d), and (e).				219,412 <b>13</b>	316,246 535,658
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to veri	y calculations )			13	· · · · · · · · · · · · · · · · · · ·
<ul> <li>Subtotal Add columns (b), (d), and (e).</li> <li>Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to veril Part XVI-B Relationship of Activities</li> </ul>	y calculations ) to the Accomp	olishment of I	Exempt Purpos	13	535,658
<ul><li>Subtotal Add columns (b), (d), and (e).</li><li>Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to veri</li></ul>	y calculations )  to the Accomp  which income is rep	olishment of l	Exempt Purpos (e) of Part XVI-A c	es ontributed importa	535,658 ntly to
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to veri  Part XVI-B Relationship of Activities  Line No.  Explain below how each activity for the accomplishment of the foundation	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
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12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
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12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify the accomplishment of the foundation instructions.)  1abc Providing for continuing medical educations.	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify the accomplishment of the foundation instructions.)  1abc Providing for continuing medical educations.	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify the accomplishment of the foundation instructions.)  1abc Providing for continuing medical educations.	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 535,658 ntly to See
12 Subtotal Add columns (b), (d), and (e).  13 Total.Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify and the second section of the second section of the second section of the foundation of the second section of the section of the second section of the section of the second section of the section of the second	y calculations ) to the Accomp which income is rep n's exempt purpos	olishment of I ported in column es (other than by	Exempt Purpos (e) of Part XVI-A c providing funds for	es ontributed importa r such purposes) (	535,658 ntly to See

Par	t XVII	Information Ro Noncharitable					actions	and R	elationships	With			
<b>1</b> Die	d the o	rganization directly or i					h any othe	er organ	ızatıon described	d ın			
		01(c) of the Code (othe	er than se	ction 5	01(c)(3) o	rganızatıons) o	r ın sectio	n 527, r	relating to politic	:al		Yes	No
-	janızat -												
		from the reporting four				• •					4 - (4)		NI-
										• •	1a(1)		No
•	•	rassets									1a(2)		No
		nsactions									15/1)		Na
		s of assets to a noncha									1b(1)		No
		hases of assets from a								•	1b(2)		No
		al of facilities, equipme									1b(3)		No
		bursement arrangemer									1b(4)		No
		s or loan guarantees.									1b(5)		No
		mance of services or m		-	_						1b(6)	Yes	
		f facilities, equipment,									1c	Yes	
of :	the god	wer to any of the above ds, other assets, or se nsaction or sharing arr	rvices giv	en by t	the reportin	ig foundation I	f the found	dation re	ceived less thai	n fair marke	et value		
<b>(a)</b> Lin	e No	(b) Amount involved	(c) Name	of nonc	harıtable exer	mpt organization	<b>(d)</b> De:	scription o	of transfers, transact	tions, and sha	rıng arra	ngemer	nts
1 c		22,000	Utah Med	lical As	ssociation		Admınıstr						
1 b(6)	-	30,400	Utah Med	lical As	ssociation		Salaries a	nd expe	enses of providin	g CME pro	grams		
	-												
	_												
	-												
		ndation directly or indi									ΓV	_	
		I in section 501(c) of th	-	other th	nan section	501(c)(3)) or	in section	52/7.			.   <b>~</b> Y 6	s I	Νo
<b>D</b> It	Yes,	complete the following (a) Name of organization			l (b)	<b>)</b> Type of organiza	tion	ı	(c) Descri	ption of relation	nshin		
Utah N	1edıcal	Association	··		501(c)(6)		cion	Spons	oring organizatio			A	
								someti	mes make contr ation shares faci	ibutions to	the Fo	undatio	
									nd pays an adm				ii tiie
					-								
	T								<del> </del>				
		er penalties of perjury, best of my knowledge a											
<b>~</b> :	Info	rmation of which prepar					Deciarati	ю от рт	eparer (other the	an tuxpuyo	, 15 Bu.	, cu o	<b>u</b>
Sign		*****				2016-05-11	. *	****			ne IRS di	scuss th	nis
Here	1 .						— b -				ne prepa	rer show	vn
		Signature of officer or t	rustee			Date	T T	ıtle		below (see ii	nstr )? 🔽	Yes N	<b>,</b>
	1			l			Date		Check if self-	PTIN	104. / 1		
		Print/Type preparer's JERRY SELBO	name	Prepa	arer's Signa	ature	Date		employed •		05147	776	
		JEKKI SELBU							,				
Paid		Firm's name ▶	Firm's EIN 🕨	1									
	arer	SMITH POWELL & CO	MPANYI	LLC CF	PAS								
Use													
Only	,	Firm's address F		Dh	\ 250 261								
		68 SO MAIN 3RD FLO 84101	JUKSAL	ı LAKE	CITY, UT				Phone no (801	1,359-205	Ö		

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

compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Stewart E Barlow MD	Director	0		
5275 S 500 E Ogden,UT 84405	0 00			
Scott A Leckman MD	Chairman	0		
1220 E 3900 S Salt Lake City,UT 84124	0 00			
David F Cole MD	Director	0		
3460 S 4155 West Salt Lake City, UT 84120	0 00			
Richard Horne	Director	0		
310 E 4500 West Suite 500 Salt Lake City, UT 84107	0 00			
Val B Johnson MD	Director	0		
5475 S 500 East Ogden,UT 84405	0 00			
Heather D Sojourner	Director	0		
1868 W 9800 South 100 So Jordan, UT 84095	0 00			
Catherine J Wheeler MD	Director	0		
555 Foothill Dr Salt Lake City, UT 84113	0 00			
F James Cowan	Director	0		
103 Centerville Commons Way Centerville, UT 84014	0 00			
George H Cannon MD	Director	0		
5121 Cottonwood St Salt Lake City, UT 84107	0 00			
John E Gates	Director	0		
10 Exchange Pl 11th Floor Salt Lake City, UT 84111	0 00			
Brian C Hales MD	Director	0		
1600 W Antelope Dr Layton, UT 84041	0 00			
Renee S Lauritzen MD	Director	0		
9844 S 1300 E 275 Sandy,UT 84094	0 00			
Steven K Miller MD	Director 0 00	0		
22 S 900 East Salt Lake City, UT 84102	0 00			
Stephanie M Singer DO	Director 0 00	0		
1441 W Ute Blvd 160 Park City,UT 84098	0 00			
Richard J Sperry MD	Director	0		
30 N 1900 E Salt Lake City,UT 84132	0 00			

## 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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
Alliance House Inc 1724 S Main St Salt Lake City, UT 84115			To supplement funding for mental health clients with no means to pay	5,000
Maliheh Free Clinic 415 E 3900 South Salt Lake City, UT 84107			To fund services, supplies, and immunizations and equipment for Healthy Family Support Program	10,000
South Valley Sanctuary PO Box 1028 West Jordan,UT 84084			To fund salary & training for children's programs	5,000
Utah Partners for Health 8446 S Harrison St Salt Lake City, UT 84047			To fund primary healthcare services for 540 low-income uninsured individuals	10,000
Junior League of Salt Lake City 526 E 300 South Salt Lake City,UT 84102			To fund a two-day free health clinic for uninsured and underinsured families	10,000
KUED TV 101 Wasatch Dr Room 215 Salt Lake City, UT 84112			To fund "Health Matters", an ongoing program on public TV, and to fund an upcoming documentary production	15,000
O gden-Weber Applied Tech College 200 N Washington Blvd O gden, UT 84404			To fund foundation for scholarships in healthcare fields	7,000
The Road Home 210 S Rio Grande St Salt Lake City, UT 84101			To fund medical beds program for ill homeless persons	5,000
Prevent Child Abuse Utah 2955 Harrison Blvd Suite 104 Ogden, UT 84403			To fund parent and teacher child abuse prevention	7,000
Health Access Project 140 W 2100 South 280 Salt Lake City,UT 84115			To fund care coordination	20,000
American Heart Association 465 S 400 East 110 Salt Lake City, UT 84111			To fund training, supplies and educational materials	5,000
The Sharing Place 1695 E 3300 South Salt Lake City,UT 84106			To fund grief support services for families	5,000
Moab Free Health Clinic 350 South 400 East Moab, UT 84532			To fund the care coordination program	10,000
Intermountain Therapy Animals 4050 S 2700 East Salt Lake City,UT 84124			To fund training for Pet Partner therapy teams	2,000
Ogden Surgical Medical Society 5093 Skyline Dr Ogden,UT 84403			To fund two-hour presentation for Residents	1,000
Total			▶ 3a	210,000

# 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	
<b>a</b> Paid during the year				
Peoples Health Clinic 650 Round Valley Dr Park City, UT 84068			To fund detection and treatment of chronic illness for uninsured members of Summit and Wasatch counties	15,000
Rape Recovery Center 2035 S 1300 East Salt Lake City, UT 84105			To fund operational cost for advocacy & therapy services	7,000
West Ridge Academy 5500 W Bagley Park Rd West Jordan, UT 84081			To fund the purchase of testing instrument for clinical assessment & treatment planning	8,500
Community Health Connect 591 S State St Provo,UT 84606			Grant for volunteer provider network	10,000
Fourth Street Clinic 409 W 400 South Salt Lake City, UT 84101			To fund primary care services to uninsured, homeless people in Utah	25,000
Rocky Mtn Univ of Health Profession 122 E 1700 South Provo,UT 84606			To fund operating expenses for Community Rehab Clinic	5,000
Salt Lake Community College 4600 S Redwood Rd AAB 101E Salt Lake City, UT 84123			To fund the "Know Greater Heroes" program,to combat childhood obesity	2,500
The Children's Center 350 S 400 East Salt Lake City, UT 84111			To help fund the Children's Center Trauma Program	10,000
The INN Between 5554 S Walden Glen Dr Murray,UT 84123			To help fund Utah's first hospice house for the homeless	5,000
The Utah AIDS Foundation 1408 S 100 East Salt Lake City, UT 84105			To fund free testing for sexually transmitted disease for women	5,000
Total			▶ 3a	210,000

# **TY 2015 Accounting Fees Schedule**

Name: UTAH MEDICAL ASSOCIATION FOUNDATION

**EIN:** 87-6122299

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	4,722	0	4,722	0

# **TY 2015 Cash Deemed Charitable Explanation Statement**

Name: UTAH MEDICAL ASSOCIATION FOUNDATION

**EIN:** 87-6122299

**Software ID:** 15000324

**Software Version:** 2015v2.0

**Explanation:** Grant funds were received during the year for an educational

project extending over several years. Deferred revenue is

recognized to the extent grant funds have been received but not yet expended. The amount of cash deemed held for charitable activities is equal to the deferred revenue at December 31.

# **TY 2015 Other Expenses Schedule**

Name: UTAH MEDICAL ASSOCIATION FOUNDATION

**EIN:** 87-6122299

**Software ID:** 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Charges & Credit Card Fees	2,155		2,155	
Board & misc business expenses	1,616		1,616	
Charitable Permit	195			195
CME Expenses	36,476		36,476	
Expenditures for grant	281,605		279,770	1,835

#### **TY 2015 Other Income Schedule**

Name: UTAH MEDICAL ASSOCIATION FOUNDATION

**EIN:** 87-6122299

**Software ID:** 15000324

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Cont Medical Ed Income	58,511		58,511
O ther Investment Income	-628	-628	-628
Physician Leadership Gran	61,350		61,350
REMS Education Grant	196,385		196,385

#### **TY 2015 Other Professional Fees Schedule**

Name: UTAH MEDICAL ASSOCIATION FOUNDATION

**EIN:** 87-6122299

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Admın Fee to Utah Medical Assn	22,000	0	5,000	17,000
Investment Management Fees	22,968	22,968	22,968	0

## **TY 2015 Taxes Schedule**

Name: UTAH MEDICAL ASSOCIATION FOUNDATION

**EIN:** 87-6122299

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Additional prior year taxes	20			
Tax on net investment income	1,964			