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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

<u>A</u>	For the	e 2015 ca	lendar year, or tax year beginning		, and e	nding			
В	Check if	applicable	C Name of organization Southern Uta	ah Wilderness Alliance			D Employer Ide	entification nun	ıber
	Address	change	Doing business as						
\equiv		-	Number and street (or PO box if mail is not	delivered to street address)	Room/suite		94-2936961		
Name change 425 East 100 South							E Telephone nu	ımber	
	Initial reti	ırn	City or town	State	ZIP code		1		
=	miliarion	u.,,	Salt Lake City	UT	84111		801-486-3161		
Ш	Final return	n/terminated		province/state/county	Foreign postal	codo	i i		
	Ad		Poleigii Codiitiy Italiie Poleigii	province/state/county	r oreign postar	code	G Gross receipt	n ¢	5,975,238
ייי	Amended	return					G Gloss receipt	15 \$	3,973,236
	Application	on pending	F Name and address of principal officer			H(a) Is t	his a group return for s	subordinates?	Yes X No
			Scott Groene 425 East 100 South, S	alt Lake City, UT 84111		H/b) Ar	e all subordinates i	ncluded?	Yes No
						1 ''			
<u> </u>	Tax-exem	pt status	X 501(c)(3) 501(c) () ◀	(insert no) 4947(a)(1) or 527] "	"No," attach a list (see matrochons)	
_J `	Website	e: ► www	w.suwa.org			H(c) Gr	oup exemption num	nber 🕨	
	Form of a	rganization	X Corporation Trust Associa	ation Other ►	I Vac	r of form	ation 4000	M State of loan	I dominio 11T
				tionOther >	£ 168	ar of form	ation 1983	M State of lega	l domicile UT
	art I		mmary						
	1	Briefly d	describe the organization's mission or	most significant activitie	s: The	preserv	ation of the ou	tstanding	
ဎ္ဌ		wilderne	ess at the heart of the Colorado Platea	au and Utah's West Des	ert, and the r	manage	ement		
절	1	of these	lands in their natural state for the ber	nefit of all Americans.					
Activities & Governance			·				- 4 050/ -4		
§ §	2		his box If the organization dis		or alsposea	oi mor	1		
, ט	3		r of voting members of the governing b	• •			<u> </u>	3	13
, g	4		r of independent voting members of th				· · · · <u> ·</u>	4	13
, 3	5	Total nu	imber of individuals employed in calen	الملا dar year 2015 (Part)	me 2a) 🚶			5	26
. ≟	6	Total nu	imber of volunteers (estimate if necess	sary)		١		6	50
¥	7a	Total un	related business revenue from Part V	III. column 18) (line 12-	\0)		7a	0
	b		elated business taxable income from F		26 /	છે.		7b	0
_	 		siates seemed taxable months from	A	10111		Prior Year		rrent Year
	8	Contribu	utions and grants (Part VIII, line 1h).	Form 99017 hae 34		1,7	2,990,2		2,991,354
Revenue				· · / 3/ · · · / 1/// .	الألكاليسسية		2,990,2		2,331,334
ē	9		n service revenue (Part VIII, line 2g) .				450.0	0	
é	10		ent income (Part VIII, column (A), line				459,3		413,485
_	11		evenue (Part VIII, column (A), lines 5,				7,6	97	7,073
	12	Total rev	enue—add lines 8 through 11 (must equ	al Part VIII) column'(A), lii	ne 12) .		3,457,3	51	3,411,912
	13	Grants a	and similar amounts paid (Part IX, coli	umn (A), lines 1-3)				0	8,150
	14	Benefits	s paid to or for members (Part IX, colu	mn (A), line 4)				0	0
s	15		, other compensation, employee benefits		s 5–10)		1,309,9	111	1,347,121
Š	16a		ional fundraising fees (Part IX, column				,,000,0	0	0
Expenses	b		ndraising expenses (Part IX, column (I			 -			
X						<u> </u>	, , , , , ,		1 000 750
_	17		xpenses (Part IX, column (A), lines 11				1,195,3		1,098,750
	18		penses. Add lines 13-17 (must equal				2,505,3	_	2,454,021
	19	Revenue	e less expenses. Subtract line 18 fron	<u> 1 line 12 </u>			952,0	147	957,891
sets or						Begini	ning of Current Ye	ar En	nd of Year
Set	20	Total as:	sets (Part X, line 16)				7,907,4	45	8,624,230
Š	21	Total lial	bilities (Part X, line 26)					15	87
Net Ass	22		ets or fund balances. Subtract line 21				7,907,4		8,624,143
	art II		nature Block			•	:,15,52,1,	1	0,02.,0
			y, I declare that I have examined this return, inclu	idina accompanyina schodulos	and statements	and to t	he heet of my know	uladaa	
and	heliet iti	is true corre	ect, and complete Declaration of preparer other	than officer)	ormation of which	, and to t	ne best of my know	neage	
	20	1 10,000	son and complete Books and Company of the	and in onice to based on all line	OTTIALION OF WING	propare	i nas any knowled		
Sig	gn			·					
He		'	Signature of officer				Date		1) -1/2
			T. SCOTT GROENE		EXE	CUTIV	E DIRECTOR	<u> </u>	0 10
			Type or print name and title					_	
		Prin	t/Type preparer's name	Preparer's signature		Da	te	PT	IN
Pa	id					J	Che		
	eparei	RIC	CK OSBORN	RICK OSBORN		6/	17/2016 self-	employed PC	00008049
	e Only		n's name RICK OSBORN CPA, PC				Firm's EIN ► 8	7-0575007	
			n's address ► 7070 SOUTH 2300 EAST	#210. SALT LAKE CIT	Y. UT 84121			301) 943-444	2
							i none no (c		
Ma	y the II	15 discus	ss this return with the preparer shown	above? (see instruction	s)			X	Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

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Form **990** (2015)

	90 (2015) Southern Utah Wilderness Alliance	94-2936961 Page 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	-
	The mission of the organization is the preservation of the outstanding wilderness at the	
	heart of the Colorado Plateau and Utah's West Desert, and the management of these lands in	
	their natural state for the benefit of all Americans.	
2	Did the organization undertake any significant program services during the year which were not listed of	
	the prior Form 990 or 990-EZ?	. Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program service	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants an	d allocations to others,
	the total expenses, and revenue, if any, for each program service reported.	
4-	(O. I	
4a	(Code) (Expenses \$ 1,289,327 including grants of \$ 8,150) (Re	venue \$)
	WILDERNESS Arranged public attendance at agency meetings and hearings, distributed prepared bulletins and researched wilderness topics. Examined laws and policies that control these	
	recourses and provided information gained to the public. Equilitated extraor engagement with	
	state and federal governmental agencies to educate decision-makers. Maintained and grew external	
	communications with public through social media campaigns. Engaged with news media to educate the	
	public and further build public support.	
4b	(Code) (Expenses \$ 504,218 including grants of \$) (Re	venue \$
	RS2477 (REVISED STATUE 2477) Researched the legal framework for the issue, determined public	
	opinions, and performed on the ground surveys regarding RS2477 claims. Educated public on the	
	potential problems raised by ORV use and the possible solutions.	
4c	(Code) (Expenses \$ 91,123 including grants of \$) (Re	**************************************
	RESOURCE MANAGEMENT PLANS (RMP) Submitted written comments, pursuant to Federal Registr	er notices
	for draft RMP, draft National Conservation Plan, draft Wilderness Plan, and draft Travel	
	Management Plans. Examined laws and policies that control public lands and resources, conducted	
	meetings with state and federal agency staff, consulted with scientists for better management of	
	natural and cultural resources, and provided information to the public.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 212,874 including grants of \$ 0) (Revenue \$	0)
4e	Total program service expenses ► 2,097,542	

r all	Checklist of Required Schedules			
4	In the ergonization deposition in position E01/o\/2\ or 4047/o\/4\ /athorathoration in provide foundation\0.15 "\/ "		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	 	_^_	
·	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	Ť		 ^-
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	ا ہ ا		v
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		X
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		<	
	VII, VIII, IX, or X as applicable.		ê	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		^	_
	Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X			J
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	, <u>a</u>		
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
46	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	ا ۱		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		<u> </u>
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	<u> </u>		
	If "Yes," complete Schedule G, Part III	19		x
			_	

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or] ,,		~
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		х
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		Х
	employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	245	i	Х
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
_	to defease any tax-exempt bonds?	24c 24d		
		24u		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
		25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		i	
		25b		Х
20	990-EZ? If "Yes," complete Schedule L, Part I	230		
26	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	120		_^_
27	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u> </u>		
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		χÎ
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32	i	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ļ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			1
	<i>VI</i>	37	<u> </u>	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	<u>.</u>

Statements Regarding Other IRS Filings and Tax Compliance The Check if Schedulor Contains a response or note to any line in this Part V. The statements of the statement of the state of the state of the statement of the statem	Form 9	90 (2015) Southern Utah Wilderness Alliance 94-29	86961	P	age 5
Section Section 1985 Section 1986 Section 198	Par				
tale the number reported in Box 3 of Form 1096. Enter 0- if not applicable		Check if Schedule O contains a response or note to any line in this Part V			<u></u>
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable of Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (garabling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2 Statements, filed for the calendar year ending with or within the year covered by this return. 2 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gloss is come of \$1,000 or more during the year? 3 A If "Yes" has if filed a Form 99C-1 for this year? If "No" to her 30, provide an explanation in Schedule 0. 3 Did with year over, a filamical account in a foreign country over, a filamical account in a foreign country year over, a filamical account in a foreign country over, a filamical accountry				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gaming gaming gaming some programments? 2a Einer the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements, filed for the calendar year end then the year covered by this return. 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3b Od the organization hiese a may a signature of the see instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5a X 5b If Yes' child the organization file Form 8866-17? 5c If Yes' did the organization in fer form 8866-17? 5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file Form 8866-17? 5c If Yes' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5d Dod the organization shall with the organization are not at year of the second of the second of the organization shall be seen that seed to the second of the organization shall be organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 5d Dod the organization shall express the second of	1a	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
gaming (gambing) winnings to prize winners? 2a Enter the number of employees reported on From W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines to and 2a is greater than 250, you may be required to e-file (see instructions) 3a D diff be organization have unrelated business gross income of \$1,000 or more during the year? 3a D at the organization have unrelated business gross income of \$1,000 or more during the year? 3a X if Yes,* has fifted a Form 990-Tr for this year? If If W to the 36, provide an explanation in Schedule 0. 3b D at any taxonical account in a foreign country (such as a bank account, servines account, or other financial accounts) 5b If Yes,* enter the name of the foreign country 5c se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c D at any taxoble party notify the organization that it was or as a party to a prohibited tax shelter transaction? 5c D at the organization received annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6c D off the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b D off the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 3282 file during the year? 7c D off the organization self, exchange, or otherwise disposes of tangible personal property for which it was required to file Form 3282? 7c X If Yes,* indicate the number of Forms 8282 file during the year 7d D off the organization self, exchange, or otherwise d	b	· · · · · · · · · · · · · · · · · · ·	·		
the first menumber of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendary year ending with or within the year covered by this return: 2a 25 2 X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Dd the organization have unrelated business gross income of \$1,000 or more during the year? 3a 1 X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explaination in Schedule 0. 3b 1 X At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; an account; securities account, securities account, or other financial account; See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If Yes," and the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file Form 8886-T? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Does the organization shall exchange, or otherwise dispose of tangible personal property for which it was required to file form 822? 6c If "Yes," indicate the number of Forms 8232 filed during the year 9 If "Yes," indicate the number of Forms 8232 filed during the year 9 If year did the organization on ective and protectly, to pay premiums on a personal benefit contract? 7 To Dd the organization received a contribution of qualified intellectual property, did the organization flee Form 1098-C? 8 Sponsoring organization have ex	С				
Statements, filed for the calendar year ending with or within the year covered by this return 2a			1c		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, If the sum of lines is and 2a is greater than 250, you may be required to e-file (see an structions) 2	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a			⊣		
3a	b		2b	<u> </u>	
b If "Yes," has it filed a Form 990-T for this year?" "No" to line 3b, provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5b If "Yes," enter the name of the foreign country					
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country ▶ b if "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . 5a			-	ļ	<u> </u>
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b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		1 1			
against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 11b 12a 12a 12b 13a 13a 13a 13b 13b 13b			4		
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand. Did the organization receive any payments for indoor tanning services during the tax year? 12a 12a 12b 13b 13a 13a 13b 13b 13b	D	, ,			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 12b 13b 13a 13a 13b 13b 13c 14a X	122	· · · · · · · · · · · · · · · · · · ·	- <u>ت</u> ها	*	
Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 13a 13a 13b 13b 13c 14a X			12a		-
a Is the organization licensed to issue qualified health plans in more than one state?			┨		
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			132		_
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	a		134	 	
the organization is licensed to issue qualified health plans	ь	- · · · · · · · · · · · · · · · · · · ·			
c Enter the amount of reserves on hand	~				
14a Did the organization receive any payments for indoor tanning services during the tax year?	С		1		
and the control of th			142	 	х
	_				Ť

Form 9	90 (2015) Southern Utah Wilderness Alliance 94-293		Р	age 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	a "No"	1	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se	e inst	ructi	ons.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 13			
	If there are material differences in voting rights among members of the governing body, or	1 1		ĺ
	If the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue (<u> Code</u>)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>
11a		11a	Х	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1		
	Did the organization have a written conflict of interest policy? If "No," go to line 13 .	12a	X	-
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-	v	
40	describe in Schedule O how this was done	12c	X	-
13	Did the organization have a written whistleblower policy?	_	_	-
14	Did the organization have a written document retention and destruction policy?	14	X	\vdash
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official.	15a	х	
a b	Other officers or key employees of the organization	15b	x	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1.55	 ^	1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		1	
.04	with a taxable entity during the year?	16a	-	x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100	 	 ^
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			ĺ
	the organization's exempt status with respect to such arrangements?	16b		1
Sect	tion C. Disclosure	1,00		1
17	List the states with which a copy of this Form 990 is required to be filed See Attached Statement			-
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3	s only	v)	
	available for public inspection. Indicate how you made these available. Check all that apply.		•	
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol	ıcy, ar	nd	
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records	•		

A. Williams
425 East 100 South, Salt Lake City, UT 84111

801-486-3161

26064	D	7

Form 990 (2015)
Part VII	

organization's tax year.

Southern Utah Wilderness Alliance

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

					2)					
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DARRELL KNUFFKE	7.50									
CHAIR - SEE SCHEDULE O	0.00	X			_		_	7,101		
(2) RICH INGEBRETSEN	5.00									
VICE CHAIR/SECRETARY	0.00	X			L					
(3) RUSTY SCHMIT	5.00					i				
TREASURER	0 00	X								
(4) TOM KENWORTHY	2 00									
TRUSTEE	0 00	Х								
(5) LIZ THOMAS	2.00									
TRUSTEE	0.00	Х								l
(6) HANSJOERG WYSS	2.00									
TRUSTEE	0.00	Х								
(7) TERRY TEMPEST WILLIAMS	2 00									
TRUSTEE	0 00	Х								
(8) CINDY SHOGAN	2 00									1
TRUSTEE	0 00	Х]				<u></u>		
(9) JIM BACA	2 00									
TRUSTEE	0.00	X	<u></u>	L						
(10) SHARON BUCCINO	2.00							1		1
TRUSTEE	0.00	X								
(11) BILL HEDDEN	2 00						Γ			
TRUSTEE	0 00	X]			<u>L</u>	<u></u>		
(12) ORIANA SANDOVAL	2 00									
TRUSTEE	0.00	X					L			1
(13) ANNE MILLIKEN	2.00									
TRUSTEE	0 00	X	L				L			
(14) SCOTT GROENE	40 00						Γ			
EXECUTIVE DIRECTOR	0.00			X				101,478		18,346

Pa	irt VII	Section A. Officers, Directors, To	ustees, Key Em	ploye	es,	and	l Hi	ghes	t Co	ompensated Em	ployees (contir	ued)		
(A) Name and title			(B) Average hours per	(C) Position (do not check more than o box, unless person is both officer and a director/truste					an Reportable		(E) Reportable compensation		(F) stimated	
			week (list any hours for related organizations below dotted line)	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	com fr org and	other pensati om the anizatio d relate anizatio	on on d
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c		al . om continuation sheets to Part VII, a dd lines 1b and 1c).					•	'	A A A	108,579 0 108,579				,346 0 ,346
2	Total nu	mber of individuals (including but not le compensation from the organization	limited to those li				vho	rece				' I	- 10	,040
3	·	organization list any former officer, di		kev e	-mn	•		or bia	hes	t compensated			Yes	No
	employe	e on line 1a? If "Yes," complete Sche	dule J for such in	dıvıdı	ual.							3		Х
4		individual listed on line 1a, is the sum nization and related organizations gre il									h	4		X
5		person listed on line 1a receive or access rendered to the organization? If "									vidual 	5		Х
Sec		dependent Contractors												
1		e this table for your five highest comp sation from the organization. Report o										tax		
		(A) Name and business ac	idress							(B) Description of ser	vices	(C Comper		
MAN	INING CU	RTIS BRADSHAW 136 E. SOUT	H TEMPLE STE	1300	SLC	, U	Г 84	1111	LE	GAL			225	,917 0
	-								T					0
														.0
	T-4.7		undia a transfer	4_ 1.	- 44				L,					0
2		mber of independent contractors (inc an \$100,000 of compensation from th		ited to	tho	se	ııste	d abo	ove) who received				

Form 9	90 (201	5) Southern Utah Wilderness	Alliance				94-29369	61 Page 9
Part	t VIII	Statement of Revenue						
_		Check if Schedule O contains	a response or n	ote to any line in	this Part VIII.			📙
	•			-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
40	1a	Federated campaigns	1a	0				
ants	b	Membership dues		0				
P. E	С	Fundraising events		0	8			,
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations	1d	0				
S, E	е	Government grants (contributions). 1e	0				
tion	f	All other contributions, gifts, grant	s, and					
혈美		similar amounts not included abor	ve . 1f	2,991,354				
ont nd (g	Noncash contributions included in lii	nes 1a-1f \$	85,564				
ပေ	h	Total. Add lines 1a-1f		•	2,991,354			
Je				Business Code	~ ~	- *	***	-
len l	2a				0			
8	b				0			
Vice	С				0			
Ser	d				0		-	
Ë	е				0			
Program Service Revenue	f	All other program service revenue			0	,		
	g	Total. Add lines 2a–2f		<u>.</u> ▶	0			
	3	Investment income (including divi			400.000			400.000
	_	other similar amounts)			198,293			198,293
	4	Income from investment of tax-ex	empt bond proc	eeds	0			
	5	Royalties	(ı) Real	► (II) Personal	0	7 7		
	c-	C	``	(II) T ETSONAL	` `	ĺ		,
	6a	Gross rents	8,400 1,327	_	*			, ~
	b	Rental income or (loss)	7.073	0				
	d	Net rental income or (loss)	7,075	•	7,073		-	8,400
	-	Gross amount from sales of	(ı) Secunties	(II) Other	7,073		/ · *	0,400
	10	assets other than inventory .	2,767,091	10,100				
	b	Less cost or other basis	2,707,001	10,100				
		and sales expenses	2,560,139	1,860			^ ('	
	С	Gain or (loss)	206,952	8,240			٠	
	d	Net gain or (loss)			215,192			215,192
		,						
e .	8a	Gross income from fundraising			,			
en		events (not including \$	0		,			
ě		of contributions reported on line 1	c).					
7		See Part IV, line 18	а	0	20 /	4		
Other Revenue		Less direct expenses		0	* "			, vin
0	•	Net income or (loss) from fundrai	•	<u> ▶</u>	0			
	9a	Gross income from gaming activi						
		See Part IV, line 19		0				
	b	Less direct expenses		0	· · ·			1 ′
	С	Net income or (loss) from gaming	activities	<u></u>	0			1
	10a	Gross sales of inventory, less						[
		returns and allowances		0				
	b		b	0			-]
	C	···	t inventory.	▶	0			
		Miscellaneous Revenue		Business Code	المنا كالمسائد	S	**	

Total revenue. See instructions . . .

히

0

3,411,912

421,885

	t IX Statement of Functional Expenses			54-2530	DSOI Page IO
	on 501(c)(3) and 501(c)(4) organizations must complete all c	columns All other or	manizations must co	omnlete column (A)	
Occur	Check if Schedule O contains a response or note				. 🗖
	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	domestic governments. See Part IV, line 21	8,150	8,150		
2	Grants and other assistance to domestic	0,100	0,100		
	individuals See Part IV, line 22	ol			
3	Grants and other assistance to foreign	1			
	organizations, foreign governments, and foreign	ĺ			
	individuals. See Part IV, lines 15 and 16	اه			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	117,551	105,477	5,404	6,670
6	Compensation not included above, to disqualified				· ·
	persons (as defined under section 4958(f)(1)) and	İ			
	persons described in section 4958(c)(3)(B)	o	1		
7	Other salaries and wages	1,000,311	901,251	48,946	50,114
8	Pension plan accruals and contributions (include	, ,			· ·
	section 401(k) and 403(b) employer contributions)	37,467	33,757	1,833	1,877
9	Other employee benefits	106,354	95,822	5,204	5,328
10	Payroll taxes	85,438	76,977	4,181	4,280
11	Fees for services (non-employees)				
	Management	ol			
b	Legal	302,420	302,420		
С	Accounting	32,554		32,554	· · · =
d	Lobbying	0		· · · · · · · · · · · · · · · · · · ·	
е	Professional fundraising services. See Part IV, line 17.	0		.,	
f	Investment management fees	39,136		39,136	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0			
12	Advertising and promotion	51,286	51,286		,
13	Office expenses	37,217	33,339	2,400	1,478
14	Information technology	62,524	51,647	3,726	7,151
15	Royalties	0			
16	Occupancy	50,660	45,645	2,477	2,538
17	Travel	74,564	70,388		4,176
18	Payments of travel or entertainment expenses				•
	for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	24,674	19,542	2,566	2,566
20	Interest	0			
21	Payments to affiliates	0		.,	
22	Depreciation, depletion, and amortization	48,119	43,355	2,353	2,411
23	Insurance	25,286	22,782	1,237	1,267
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	, ` `			
	line 24e amount exceeds 10% of line 25, column	* /		`	
	(A) amount, list line 24e expenses on Schedule O.)				
a	Bank charges	25,818		25,818	
b	Grassroots organizing	14,182	14,182		
C	Member services/events	253,393	170,240	5,950	77,203
d	Repairs and maintenance	33,790	30,445	1,652	1,693
	All other expenses Utilities	23,127	20,837	1,131	1,159
25	Total functional expenses. Add lines 1 through 24e	2,454,021	2,097,542	186,568	169,91
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ► if				
	following SOP 98-2 (ASC 958-720)				

Page **11**

Pa	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	2,437	1	2,428
	2	Savings and temporary cash investments	1,858,974	2	1,452,468
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
क्ष		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		_	
		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7_	0
₹	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or	*		
		other basis. Complete Part VI of Schedule D 1,470,373			
	b	Less accumulated depreciation 10b 516,507	950,765	10c	953,866
	11	Investments—publicly traded securities	5,095,269	11	6,215,468
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	7,907,445		8,624,230
	17	Accounts payable and accrued expenses	15		87
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	ļ
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,	à		
Ĭ	l	trustees, key employees, highest compensated employees, and			
퍨		disqualified persons Complete Part II of Schedule L		22	<u> </u>
_	23	Secured mortgages and notes payable to unrelated third parties	0	23 24	
	25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	, C
	25	parties, and other liabilities not included on lines 17-24) Complete			
		Part X of Schedule D	0	25	
	26	Total liabilities. Add lines 17 through 25	15	26	87
		Organizations that follow SFAS 117 (ASC 958), check here ► X and	, ,		
S		complete lines 27 through 29, and lines 33 and 34.	·		
2	27		7.540.750	^-	0.000.405
퍨	27 28	Unrestricted net assets	7,549,752	27	8,266,465
20	29	Temporarily restricted net assets	257 670	28	257 670
Š	29		357,678	29	357,678
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34.			
šet	30	Capital stock or trust principal, or current funds		30	<u> </u>
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et.	32	Retained earnings, endowment, accumulated income, or other funds		32	ļ
Z	33	Total net assets or fund balances	7,907,430		8,624,143
	34	Total liabilities and net assets/fund balances	7 907 445	34	8 624 230

Form 9	990 (2015) Southern Utah Wilderness Alliance	94-293	5961	Pag	e 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,411	,912
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,454	,021
3	Revenue less expenses. Subtract line 2 from line 1	3		957	⁷ ,891
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,907	7,430
5	Net unrealized gains (losses) on investments	5		-241	,178
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	İ			
	column (B))	10		8,624	,143
Part					_
	Check if Schedule O contains a response or note to any line in this Part XII				∐
	<u> </u>			Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
C	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	ŀ
	If the organization changed either its oversight process or selection process during the tax year, explain in	• •			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	- • •			<u> </u>
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		N/A
				990	(2015)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

South	err	Utah Wilderness Alliance					94-29	36961		
Part	1	Reason for Public Char	ity Status (All org	anizations must co	mplete th	is part.)	See instructions.			
The o	rga	nization is not a private foundat	-	-	-					
1		A church, convention of church	es, or association of	f churches described ii	n section	170(b)(1)((A)(i).			
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3 [A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4 [A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
5		An organization operated for th section 170(b)(1)(A)(iv). (Com	e benefit of a colleg plete Part II)	e or university owned	or operate	d by a go	vernmental unit desc	ribed in		
6		A federal, state, or local govern	ment or governmen	ital unit described in se	ection 170	(b)(1)(A)(v).			
7	X	An organization that normally redescribed in section 170(b)(1)(m a gove	nmental u	ınıt or from the gene	ral public		
8		A community trust described in	section 170(b)(1)(A	A)(vi). (Complete Part	II.)					
9 [An organization that normally re receipts from activities related t support from gross investment acquired by the organization af	eceives (1) more the oits exempt function income and unrelated	an 33 1/3% of its supp ns—subject to certain ed business taxable in	ort from c exception come (les	s, and (2) s section t	no more than 33 1/3 511 tax) from busine	% of its	5	
10		An organization organized and	operated exclusivel	y to test for public safe	ty. See s e	ection 509	(a)(4).			
11		An organization organized and of one or more publicly support Check the box in lines 11a thro	ed organizations de	scribed in section 509	(a)(1) or s	section 50	9(a)(2). See section	n 509(a)(3)		
а	[Type I. A supporting organization (sorganization. You must con	ation operated, sup s) the power to regu	ervised, or controlled tally appoint or elect a	by its supp	orted orga	anization(s), typically	by giving		
b		Type II. A supporting organic control or management of the organization(s) You must o	e supporting organi	zation vested in the sa						
С		Type III functionally integral its supported organization(s)	ated. A supporting of	organization operated i	n connect	ion with, a	ind functionally integ	rated with,		
d		Type III non-functionally in that is not functionally integr requirement (see instruction	ated The organizat	ion generally must sati	isfy a distr	ibution red	quirement and an at			
е	-	Check this box if the organiz functionally integrated, or Ty	ation received a wr	itten determination fror	m the IRS	that it is a		e III		
f		Enter the number of supported	•					. [0	
g	_	Provide the following informatio								
	(i)	Name of supported organization	(n) EİN	(ili) Type of organization (described on lines 1–9 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amo other supp instruc	port (see	
					Yes	No				
(A)										
(B)	-									
(C)				L						
(D)										
E)										
							_			

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	Part III. If the organization fail						1CI
500	tion A. Public Support	s to quality unc	ier the tests hs	ted below, pleas	se complete F	ait iii.)	 -
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
		(a) 2011	(5) 2012	(0) 2010	(d) 2014	(6) 20.0	(1) 10101
1	Gifts, grants, contributions, and membership fees received. (Do not	1	:				
	include any "unusual grants")	1,768,071	2,110,108	2,345,753	2,142,796	2,565,394	10,932,122
2	Tax revenues levied for the organization's	1,700,071	2,110,100	2,010,100	2,112,700	2,000,001	.0,00=,.==
_	benefit and either paid to or expended on						
	its behalf						0
3	The value of services or facilities						
J	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	1,768,071	2,110,108	2,345,753	2,142,796	2,565,394	10,932,122
5	The portion of total contributions by each	1,700,071	2,770,700	2,0 10,1 00	<i>i</i>	2,000,00	,
•	person (other than a governmental unit			1			
	or publicly supported organization)	,	· [
	included on line 1 that exceeds 2%	}					
	of the amount shown on line 11,			`			
	column (f)		, ^	İ			945,531
6	Public support. Subtract line 5 from line 4.						9,986,591
	tion B. Total Support						0,000,000
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	1,768,071	2,110,108	2,345,753	2,142,796	2,565,394	10,932,122
8	Gross income from interest, dividends,	1,700,071	2,110,100	2,545,166	2,142,700	2,000,001	10,002,122
U	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	119,109	112,283	176,865	202,365	206,693	817,315
9	Net income from unrelated business	110,100	112,200	170,000	202,000	200,000	017,010
3	activities, whether or not the business is						
	regularly carried on						0
10	Other income. Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI)						0
11	Total support. Add lines 7 through 10				, /		11,749,437
12	Gross receipts from related activities, etc. (se	e instructions)		<u> </u>		12	
13	First five years. If the Form 990 is for the org	•		or fifth tax vear as	a section 501(c)(
	organization, check this box and stop here	•					. ▶□
500	tion C. Computation of Public Sup						
14				<u> </u>	I	14	85 00%
	Public support percentage for 2014 Schedu					15	81.60%
						13	01.0070
тоа	33 1/3% support test—2015. If the organiza and stop here. The organization qualifies as						▶ [X
b	33 1/3% support test—2014. If the organization and stop here. The organization qualifier				33 1/3% or more		. □
47-	• • • •		_				· ··•
17a	10%-facts-and-circumstances test—2015. Is 10% or more, and if the organization meets Part VI how the organization meets the "facts	the "facts-and-circ	cumstances" test,	check this box and	stop here. Explai	n ın	_
	organization						· · · · · >
b	10%-facts-and-circumstances test—2014.	•					
	15 is 10% or more, and if the organization me			·	•	plain in	
	Part VI how the organization meets the "facts supported organization						
4Ω	Drivate foundation if the organization did n						

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Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only	if you checked the box	on line 9 of Part I or if the	organization failed to qua	ilify under Part II.
		the tests listed below, ple		

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🛽 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities]					į
	furnished in any activity that is related to the organization's tax-exempt purpose						l o
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						l o
4	Tax revenues levied for the organization's			 			
4	-						
	benefit and either paid to or expended on						0
_	its behalf						
5							
	furnished by a governmental unit to the						0
_	organization without charge	0	0	0	0	0	
6	Total. Add lines 1 through 5	U	U	0			
7a	Amounts included on lines 1, 2, and 3						0
	received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						1
	amount on line 13 for the year						0
C	Add lines 7a and 7b	0	0	0			0
8	Public support (Subtract line 7c from		* * * * * * * * * * * * * * * * * * * *				
	line 6)	× - ,			(a)	· * 1	0
	tion B. Total Support						1
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	0	0	0	0	C	0
					1 -		
10a	Gross income from interest, dividends,		.,				
10a	Gross income from interest, dividends, payments received on securities loans,						
10a							0
	payments received on secunties loans,						0
	payments received on secunties loans, rents, royalties and income from similar sources .						_0
	payments received on secunties loans, rents, royalties and income from similar sources . Unrelated business taxable income (less					_	0
b	payments received on securities loans, rents, royalties and income from similar sources . Unrelated business taxable income (less section 511 taxes) from businesses	0	0	0	0		0
b	payments received on securities loans, rents, royalties and income from similar sources . Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0		0
b	payments received on securities loans, rents, royalties and income from similar sources . Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . Add lines 10a and 10b .	0	0	0	0		0
b	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business	0	0	0	0	C	0
b	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether	0	0	0	0	C	0
b c 11	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.	0	0	0	0		0
b c 11	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or	0	0	0	0	_ C	0
b c 11	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b	0	0	0	0		0 0
b c 11	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	0	0			0 0
b c 11 12	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11,	0	0	O	0	C	0 0
b c 11 12	payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	0 ganization's first, s	0 second, third, fourt	O h, or fifth tax year	0 as a section 501(c)	C	0 0
b C 11 12 13 14	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here	0 ganization's first, s	0 second, third, fourt	O h, or fifth tax year	0 as a section 501(c)	C	0 0
b c 11 12 13 14 Sec	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here	0 ganization's first, s 	0 second, third, fourt	0 h, or fifth tax year	0 as a section 501(c)	C	0 0
b c 11 12 13 14 Sec 15	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here	0 ganization's first, s 	0 second, third, fourt	h, or fifth tax year	0 as a section 501(c)	(3)	0 0 0 0
b c 11 12 13 14 Sec 15 16	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the orgorganization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2015 (line 8, co	ganization's first, s port Percent olumn (f) divided b le A, Part III, line	0 second, third, fourt 	h, or fifth tax year	0 as a section 501(c)	(3)	0 0 0 0 0 0 ▶
b c c 111 12 13 14 Sec 15 16 Sec	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here Stion C. Computation of Public Sup Public support percentage for 2015 (line 8, co	oganization's first, so port Percentalium (f) divided bile A, Part III, line t Income Percentalium (f)	0 second, third, fourt 	h, or fifth tax year	0 as a section 501(c)	(3)	0 0 0 0 0 0 ▶
b c c 111 12 13 14 Sec 15 16 Sec 17	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here contained to the support percentage for 2015 (line 8, conception D. Computation of Investment Investment income percentage for 2015 (line 1).	ganization's first, s port Percents slumn (f) divided b le A, Part III, line t Income Perc	eccond, third, fourt	h, or fifth tax year	0 as a section 501(c)	(3) 	0 0 0 0 0 0 0.00%
b c c 11 12 13 14 Sec 15 16 Sec 17 18	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the orgonoganization, check this box and stop here Stion C. Computation of Public Sup Public support percentage for 2015 (line 8, con Public support percentage from 2014 Scheduction D. Computation of Investment Investment income percentage from 2015 (line Investment income percentage from 2014 Scheduction D. Computation of Investment	ganization's first, s port Percenta plumn (f) divided b le A, Part III, line t Income Percenta 10c, column (f) di	oecond, third, fourt	h, or fifth tax year	as a section 501(c)	(3) 15 16 17 18	0 0 0 0 0 0 0.00% 0.00%
b c c 11 12 13 14 Sec 15 16 Sec 17 18	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the orgonoganization, check this box and stop here ction C. Computation of Public Sup Public support percentage for 2015 (line 8, con Public support percentage from 2014 Scheduction D. Computation of Investment Investment income percentage from 2014 Scheduction D. Computation of Investment Investment income percentage from 2014 Scheduction D. Support tests—2015. If the organiz	ganization's first, s port Percents plumn (f) divided b le A, Part III, line t Income Perc 10c, column (f) di hedule A, Part III, ation did not chec	eccond, third, fourt	h, or fifth tax year (f)) olumn (f))	0 as a section 501(c)	(3) 	0 0 0 0 0 0 0.00% 0.00%
b c c 11 12 13 14 Sec 15 16 Sec 17 18 19a	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the orgonoganization, check this box and stop here Stion C. Computation of Public Sup Public support percentage for 2015 (line 8, con Public support percentage from 2014 Scheduction D. Computation of Investment Investment income percentage from 2015 (line Investment income percentage from 2014 Scheduction D. Computation of Investment	ganization's first, s port Percents plumn (f) divided b le A, Part III, line t Income Perc 10c, column (f) di hedule A, Part III, ation did not chec top here. The org	eccond, third, fourt	h, or fifth tax year f() column (f)) dumn 15 is n as a publicly supp	as a section 501(c)	(3) 	0 0 0 0 0 0 0.00% 0.00%
b c c 11 12 13 14 Sec 15 16 Sec 17 18 19a	payments received on secunties loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization, check this box and stop here ction C. Computation of Public Sup Public support percentage for 2015 (line 8, co Public support percentage from 2014 Scheduction D. Computation of Investment Investment income percentage from 2015 (line Investment income percentage from 2014 Science 133 1/3% support tests—2015. If the organization more than 33 1/3%, check this box and st	ganization's first, s port Percent plumn (f) divided b le A, Part III, line t Income Perc 10c, column (f) di hedule A, Part III, ation did not chec top here. The org	eccond, third, fourt age y line 13, column (15	olumn (f))	as a section 501(c)	(3) 15 16 17 18 and line 17 is 33 1/3%, and	0 0 0 0 0 0 0.00% 0.00% 0.00%

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

8004	ion A. All Supporting Organizations	ait v.,		
Sect	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		- 63	1.13
•	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation of historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
-	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
•	(b) and (c) below	3a	-	· '
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and		×	
-	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			'
	organization made the determination	3b		l `
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
_	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		[
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		1
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c	<u> </u>	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		l	
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,	1	l	
	(III) the authority under the organization's organizing document authorizing such action, and (IV) how the action		. %	. 1
	was accomplished (such as by amendment to the organizing document)	<u>5a</u>	<u> </u>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b	┡	<u> </u>
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	├	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			ļ
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	ŀ		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			ŀ
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		╁
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			ł
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	- -	-	1
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	1	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	-	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	°	 	<u> </u>
Ja	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	İ	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	74	 	+
	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	1.5	†	†
•	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	'	1
10a		<u> </u>	1	1
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to			1

determine whether the organization had excess business holdings)

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			İ
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
<u>C</u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations		I	
		_	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1		
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1_		├
2	Did the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		ŀ	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_	-	ł
Soot	supervised, or controlled the supporting organization	2	<u> </u>	
Secti	ion C. Type II Supporting Organizations		Yes	No
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	$\overline{}$	162	140
1	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1	-	
Sect	ion D. All Type III Supporting Organizations	<u> </u>	<u> </u>	
0000	on brain type in supporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1	
·	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	-	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	1	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's		İ	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3	ļ	l
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uction	s)	
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınetru	ctions	1
		#150 G		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1	Į	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	1_		
	that these activities constituted substantially all of its activities	2a	├—	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement	2b	 	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3-		
h	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	 	+
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	24		
	or no supported organizations in res, describe in Fart VI the role played by the organization in this regard	<u>3b</u>		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	···
1 Check here if the organization satisfied the Integral Part Test as a qualifyin			tructions. All
other Type III non-functionally integrated supporting organizations must con-	mplet	e Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other	1;		,
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	0	. 0
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4	o	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035	6	o	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount		` ,	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3	4	*	0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6	× ×	0
7 Check here if the current year is the organization's first as a non-functional	ly-inte	egrated Type III supporting	organization (see

Schedule	A (Form 990 or 990-EZ) 2015 Southern Utah Wilderness Allian	nce	94	-2936961 Page 7				
Part \	Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continued)					
Section	Section D - Distributions							
1	Amounts paid to supported organizations to accomplish exe	mpt purposes						
	Amounts paid to perform activity that directly furthers exempt							
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations					
	Amounts paid to acquire exempt-use assets							
	Qualified set-aside amounts (prior IRS approval required)							
6	Other distributions (describe in Part VI). See instructions							
7	Total annual distributions. Add lines 1 through 6			0				
8	Distributions to attentive supported organizations to which the	ne organization is respor	nsive					
	(provide details in Part VI). See instructions.							
9	Distributable amount for 2015 from Section C, line 6	·		0				
10	Line 8 amount divided by Line 9 amount			0.000				
s	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015				
1	Distributable amount for 2015 from Section C, line 6			0				
2	Underdistributions, if any, for years prior to 2015	` ,						
	(reasonable cause required-see instructions)	St. 3 1		<u> </u>				
3	Excess distributions carryover, if any, to 2015	`						
a	;	1/3/						
b_	1 4, 1	· ,						
c	*	/ * / :	, /					
d	From 2013			· · · · · · · · · · · · · · · · · · ·				
	From 2014							
f	Total of lines 3a through e	0						
g	Applied to underdistributions of prior years		0					
<u>h</u>	Applied to 2015 distributable amount			0				
<u>i</u>	Carryover from 2010 not applied (see instructions)							
L	Remainder Subtract lines 3g, 3h, and 3i from 3f.	0	/					
4	Distributions for 2015 from Section	·	、 ×	′ ∨				
	D, line 7 \$ 0							
	Applied to underdistributions of prior years	*	0	**/) (
	Applied to 2015 distributable amount			0				
c	Remainder. Subtract lines 4a and 4b from 4	0						
5	Remaining underdistributions for years prior to 2015, if			,				
	any. Subtract lines 3g and 4a from line 2 (if amount							
	greater than zero, see instructions).		0					
6	Remaining underdistributions for 2015 Subtract lines 3h							
	and 4b from line 1 (if amount greater than zero, see		· '					
	instructions)	* * * * * * * * * * * * * * * * * * * *	,	0				
7	Excess distributions carryover to 2016. Add lines 3j		* *	•				
	and 4c	0						
8	Breakdown of line 7							
a								
b								
c								
d								
е	Excess from 2015							

Schedule A (Fo	rm 990 or 990-EZ) 2015 Southern Utah Wilderness Alliance	94-2936961	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2b, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section A, lines 1, 2b, 4c, 4c, 5a, 6b, 9a, 9b, 9c, 11a, 11b, and 11c, 4c, 4c, 4c, 4c, 4c, 4c, 4c, 4c, 4c, 4	IV, Section	
	B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, li 3a and 3b; Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 2, and 3, Part IV, Section D, lines 2, and 3, Part IV, Section E, lines 1, Part V, Section D, lines 2, and 3, Part IV, Section E, lines 1, Part V, Section D, lines 2, and 3, Part IV, Section E, lines 1, Part V, Section D, lines 2, and 3, Part IV, Section D, lines 2, and 3, Part IV, Section D, lines 2, and 3, Part IV, Section D, lines 3, and Part V, Section D, lines 5, 6, and 8, and Part V, Section D, lines 1, Part V, Section D, li		
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)		
	······	·	
			
•			
	•••••••••••••••••••••••••••••••••••••••		
	······································		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

20**15**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• S	ection 501(c)(4), (5), or (6) or	ganizations Complete Part III			
	e of organization			Emp	loyer identification number
Sout	hern Utah Wilderness Allıa	ince			94-2936961
Par		he organization is exempt und			27 organization.
1		ne organization's direct and indirect p			
2	Political expenditures				\$
3	Volunteer hours				
Pai	rt I-B Complete if t	he organization is exempt und	er section 501(c)(3).	
1		excise tax incurred by the organization			\$
2	Enter the amount of any e	excise tax incurred by organization m	anagers under sed		\$
3		d a section 4955 tax, did it file Form			Yes No
4a	Was a correction made?				🔲 Yes 🗌 No
b	If "Yes," describe in Part I				
Pai	t I-C Complete if t	he organization is exempt und	er section 501	c), except section	501(c)(3)
1		expended by the filing organization for			
					· \$
2		ling organization's funds contributed			
	527 exempt function activ				· \$
3		penditures Add lines 1 and 2. Enter h			
	line 17b	file Form 1120-POL for this year? .		•	· \$0
4					
5		ses and employer identification numb ents. For each organization listed, en			
		ntributions received that were prompt			
	as a separate segregated	fund or a political action committee	(PAC). If additiona	I space is needed, prov	vide information in Part IV.
	4-3 33	(1) Address	(a) F(b)	(d) Amount pout from	(e) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter-0-
(1)					
·· <i>·</i>					
(2)				ļ.	
(3)					
(4)					
(5)					
					-
(6)			1		

Grassroots lobbying expenditures

Sche	edule C (Form 990 or 990-EZ) 2015					Page 2
Pa	rt II-A Complete if the organiza	tion is exempt u	nder section 50	1(c)(3) and filed	Form 5768 (elec	tion
	under section 501(h)).	-				
A	Check ▶ if the filing organization	n belongs to an aff	iliated group (ar	nd list in Part IV e	ach affiliated grou	p member's
	name, address, EIN, e					•
В	Check ▶ if the filing organization					
				1		(b) A(C)-1-1
	Limits on L (The term "expenditures)	obbying Expenditu	res aid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
4-	Total lobbying expenditures to influence				20,935	0
1a	Total lobbying expenditures to influence		32,726	0		
b	Total lobbying expenditures to influence Total lobbying expenditures (add lines 1	-			53,661	0
C	Other exempt purpose expenditures	•			2,401,687	0
d	Total exempt purpose expenditures (add				2,455,348	0
e f	Lobbying nontaxable amount. Enter the				2,400,040	
•	columns.	amount nom the lon	owing table in both	'	272,767	0
r	If the amount on line 1e, column (a) or (b)	is. The lobbying	nontaxable amou	nt is:		
ŀ	Not over \$500.000		nount on line 1e.			
ŀ	Over \$500,000 but not over \$1,000,000		15% of the excess	over \$500,000.		
ı	Over \$1,000,000 but not over \$1,500,000		10% of the excess			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
$_ _ $	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25	5% of line 1f)			68,192	0
h	Subtract line 1g from line 1a. If zero or le				0_	0
i	Subtract line 1f from line 1c. If zero or le				0	0
j	If there is an amount other than zero on				O reporting	– –
	section 4911 tax for this year?				<u> </u>	Yes No
	.	4-Year Averaging				
	(Some organizations that made				f the five columns l	below.
	Se	e the separate instr	uctions for lines	2a through 2f.)		
_						
	Lob	bying Expenditures	During 4-Year A	veraging Period	· · · · · · · · · · · · · · · · · · ·	
	Calendar year (or fiscal year	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
	beginning in)	(3, 23.3	(-,	(-,	, , ,	, ,
2a	Lobbying nontaxable amount					
	Lobbying normaxable amount	254,359	280,807	275,332	272,767	1,083,265
	Lobbying ceiling amount			3		4 00 4 00 0
<u>b</u>	(150% of line 2a, column(e))					1,624,898
С	Total lobbying expenditures	45 445	70.405	04.406	53,661	172,907
		15,415	79,425	24,406	53,001	172,907
d	Grassroots nontaxable amount	63,590	70,202	68.833	68,192	270,817
	Gressroots colling amount	05,590	10,202	00,000	00,132	210,011
е	Grassroots ceiling amount (150% of line 2d, column (e))					406,226

13,007

14,601

Schedule C (Form 990 or 990-EZ) 2015

20,935

406,226

Par	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 5768	
		(6	1)	(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local				
	legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-	
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912		-		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				>
Pari	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	c)(5),	or se	ection	
-				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes." Dues, assessments and similar amounts from members	OR (b) Par	t III-A, line	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	•	-		
~	political expenses for which the section 527(f) tax was paid).		,		
а	Current year		2a		
b	Carryover from last year		2b		
C	Total		2c		0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	•	3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	•			_
7	excess does the organization agree to carryover to the reasonable estimate of nondeductible				
	lobbying and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5		0
Part	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	l. = #\ F	2	A limas 4 and	
		115t), r	an II-/	M, illies i and	J
2 (SE	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
	·				
				•••	

South	nern Utah Wilderness Alliance		94-2936961					
Part IV	om 990 or 990-EZ) 2015 Supplemental Information (continue		Page 4					
raitiv	Supplemental information (communication)	50)						
			•••••					
			•••••					
	·							
· 								
• • • • • • • • • • • • • • • • • • • •								
·								

			· 					
			•••••					
·	· 							
								

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name	or the organization			cinployer identification number
South	ern Utah Wilderness Alliance			94-2936961
Par				ds or Accounts.
	Complete if the organization ans	<u>wered "Yes" on Form 990, F</u>	Part IV, line 6.	
		(a) Donor advised funds	s	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year) .		<u> </u>	
3	Aggregate value of grants from (during year) .			
4	Aggregate value at end of year			
5	Did the organization inform all donors and d			
	funds are the organization's property, subje-			
6	Did the organization inform all grantees, doi			
	used only for charitable purposes and not for	r the benefit of the donor or dor	nor advisor, or for	any other
	purpose conferring impermissible private be	nefit?		Yes No
Par	Conservation Easements.			
	Complete if the organization ans	wered "Yes" on Form 990. F	Part IV. line 7.	
1	Purpose(s) of conservation easements held			
	Preservation of land for public use (e.g., re-	· -	• .	a historically important land area
	Protection of natural habitat			a certified historic structure
		ليا	rieservation of	a certified filstofic structure
_	Preservation of open space			
2	Complete lines 2a through 2d if the organiza	ation neid a qualified conservation	on contribution in	
	easement on the last day of the tax year.			Held at the End of the Tax Year
a	Total number of conservation easements		• • •	. 2a
b	Total acreage restricted by conservation ea			
C	Number of conservation easements on a ce		` '	. 2c
d	Number of conservation easements include			
•	historic structure listed in the National Regis			
3	Number of conservation easements modifie	a, transterred, released, extingt	lisnea, or termina	ited by the organization during
4	the tax year			
4	Number of states where property subject to			
5	Does the organization have a written policy violations, and enforcement of the conserva			
6	Staff and volunteer hours devoted to monitoring			
0	Stan and volunteer nours devoted to monitoring	inspecting, nandling or violations,	and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, insp	octung bandling of violations, and	onforoung concent	ation accoments during the year
	► \$	ecurity, manding or violations, and	emorang conserva	ation easements during the year
8	Does each conservation easement reported	on line 2/d) above satisfy the r	oguromente of c	action 170(b)(4)(B)(i)
Ū	and section 170(h)(4)(B)(II)?			
9	In Part XIII, describe how the organization r			
3	balance sheet, and include, if applicable, the	•		•
	the organization's accounting for conservati	-	inization's imanci	ai statements that describes
Par			Treasures, or	Other Similar Assets
	Complete if the organization ans			
4-			•	
ıa	If the organization elected, as permitted und			
	works of art, historical treasures, or other sill of public service, provide, in Part XIII, the te			
_				
b	If the organization elected, as permitted und works of art, historical treasures, or other sit			
			billon, education,	or research in furtherance
	of public service, provide the following amou			▶ ◆
	(i) Revenue included on Form 990, Part VII(ii) Assets included in Form 990, Part X	i, iiise i	• • • • •	• \$
2	If the organization received or held works of	art historical transuras as other		or financial gain provide the
4	following amounts required to be reported u			
_				
a	Revenue included on Form 990, Part VIII, II			
<u>b</u>	Assets included in Form 990, Part X	<u> </u>	<u> </u>	<u>, , , , , </u> ₹ ⊅

Sched	ule D (Form 990) 2015 Southern Utah Wild						94-293			Page 2
Part	III Organizations Maintaining	Collections of	Art, H	istorical Tr	easures, or	Othe	r Similar Ass	ets (con	tınuec	<u>1)</u>
3	Using the organization's acquisition, ac									
	collection items (check all that apply)	•		-		•	_			
а	Public exhibition		d	Loan	or exchange p	rogran	ns			
b	Scholarly research		e	Other		_				
			•	Outer	•					
C	Preservation for future generation		بماميد	- have that for	odbas dba aa			in Da	4	
4	Provide a description of the organization XIII.	on's collections and	ехріаі	n now they to	irtiler tile orga	mzauc	ın s exempt purp	ose in Fa	Tt.	
5	During the year, did the organization so									1
	assets to be sold to raise funds rather		ed as _l	part of the org	ganization's co	llectio	n?	Ye	:s	No_
Part	Complete if the organization 990, Part X, line 21.	_	on Fo	orm 990, Pa	rt IV, line 9,	or rep	oorted an amou	unt on F	orm	
1a	Is the organization an agent, trustee, c	ustodian or other in	terme	diary for contr	nbutions or oth	ner ass	sets not			
								Ye	:s	No
b	If "Yes," explain the arrangement in Pa	rt XIII and complete	e the fo	ollowing table			T			
						<u> </u>		Amount		
С	3 3					10				0
d	Additions during the year					10	1			
е	Distributions during the year					16	<u> </u>			
f	Ending balance					11	f			0
2a	Did the organization include an amoun	t on Form 990 Par	t X Im	e 21 for escre	ow or custodia	al acco	unt liability?	□ Ye	s X	No
	If "Yes," explain the arrangement in Pa						•	<u></u>		1
b		IT AIII. Check here	ii tile e	xpranation na	as been provid	ieu on	Part Alli	• • •	بيـــــــــــــــــــــــــــــــــــــ	<u>i</u>
Part										
	Complete if the organization	answered "Yes"	on Fo	<u>orm 990, Pa</u>	rt IV, line 10					
		(a) Current year	(b) Pnor year	(c) Two years t	oack	(d) Three years bac	k (e)Fo	ur years	back
1a	Beginning of year balance	1,884,939		1,690,891	1,604	1,723	1,382,30)4	94	7,273
b	Contributions	55,148			73	3,532	49,44	10		7,730
С	Net investment earnings, gains,									
-	and losses	56,254		210,024	330	0.393	187,08	32	-3	30,196
d	Grants or scholarships	00,201		210,021		,,000	101,00			0,100
e	Other expenditures for facilities							+		
e	·				200					
	and programs	40.070		45.070		2,875				
f	Administrative expenses	12,273		15,976		1,882	14,10			2,503
g	End of year balance	1,984,068		1,884,939		0,891	1,604,72	23	<u>1,38</u>	32,304
2	Provide the estimated percentage of the	-		ce (line 1g, co	ilumn (a)) held	l as				
а	Board designated or quasi-endowment	•	82%							
b	Permanent endowment	18%								
С	Temporarily restricted endowment	▶ %								
	The percentages on lines 2a, 2b, and 2	c should equal 100)%.							
3a	Are there endowment funds not in the	possession of the o	rganız	ation that are	held and adm	nnistei	red for the			
	organization by		•						Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related or							3b		N/A
4	Describe in Part XIII the intended uses	•				• •		_ <u> </u>		19/7
		•	3 CHU	owinent juilds	.					
Part			_		. 15 . 1 . 4 . 4	٠.				
	Complete if the organization	answered "Yes"	on Fo	orm 990, Pa	irt IV, line 11	a. Se	<u>e Form 990, P</u>	<u>art X, lin</u>	<u>e 10.</u>	
	Description of property	(a) Cost or ot			st or other		Accumulated	(d) Bo	ook valu	е
	Name of the state	(investm	ient)		s (other)	•	depreciation			
1a	Land			0	416,000					16,000
b	Buildings			_0	811,973		352,171		48	32,672
C	Leasehold improvements	· ·		_0	0		0			0
d	Equipment			0	242,400		201,401		5	55,194
е_	Other			0	0		0			0
Tota	I. Add lines 1a through 1e. (Column (d) r	nust equal Form 99	0, Par	t X, column (E	B), line 10c).		🕨		95	3,866

Schedule D	(Form 990) 2015 Southern Utah Wildernes	s Alliance		94-2936961	Page 3
Part VII	Investments—Other Securiti	es.			
	Complete if the organization ar	nswered "Yes" on Form 99	0, Part IV, line 11b. See For	m 990, Part X	, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n		
(1) Financ	cial derivatives	0			
(2) Closel	ly-held equity interests	0			
(3) Other					
(A)					
(B)					
<u>(D)</u>				 	
(E)					
(F)					
<u>(G)</u>					
(H)	n (b) must equal Form 990, Part X, col (B) line 12)	0			
Part VII		<u> </u>			
Part VII	Complete if the organization as		0, Part IV, line 11c. See Fori	m 990, Part X	, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year n		
(1)			· · · · · · · · · · · · · · · · · · ·		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col (B) line 13)] 0			
Part IX	Other Assets. Complete if the organization as	nswered "Yes" on Form 99	0 Part IV line 11d See For	m 990 Part X	line 15
		(a) Description	5,1 arriv, mie 174. oce 1 51	(b) Book v	
(1)		,	•		
(2)	<u> </u>				
(3)					
(4)					
(5)					
(6)					
_(7)					
(8)					
(9)					
	olumn (b) must equal Form 990, Part X, co	ol (B) line 15)	. •		
Part X	Other Liabilities.		O Dest IV Pres 445 - 11 445 O	5 000	D4 V
	Complete if the organization at line 25.	nswered "Yes" on Form 99	υ, Paπ IV, line 11e or 11f S	ee Form 990,	Рап Х,
1.	(a) Description of liability	(b) Book value			
(1) Fede	eral income taxes	0		. *	
(2)				* * * * * * * * * * * * * * * * * * *	
(3)			*		
(4)			•		
(5)					
(6)			,	,	
<u>(7)</u> <u>(8)</u>					
(0)		1			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

0

Schedule D (Form	990) 2015	Souther	rn Utah Wildern	ess Alliance			94-293	6961	Page 5
Part XIII	Supple	emental	Information	(continued)	 				
_				•	 _				
			•••••		 				
				· · · · · · · · · · · · · · · · · · ·	 				
			·		 				
				• • • • • • • • • • • • • • • • • • • •	 				
					 				
					 				
					 				.
					 		· 		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection Employer identification number

94-2936961

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Southern Utah Wilderness Alliance Part I **Types of Property** (c) (d) (a) (b) Noncash contribution Number of contributions or Method of determining Check if amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art—Works of art Art—Historical treasures . Art—Fractional interests . . Books and publications. Clothing and household goods 6 Cars and other vehicles . . . Boats and planes 7 8 Intellectual property 85,564 FMV ON DATE OF GIFT Х Securities-Publicly traded . . Securities—Closely held stock 10 Securities—Partnership, LLC, 11 or trust interests Securities-Miscellaneous . . 12 Qualified conservation contribution—Historic structures Qualified conservation 14 contribution-Other Real estate—Residential . . . Real estate—Commercial 16 Real estate—Other . 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies . . . 21 Taxidermy Historical artifacts . . 22 Scientific specimens 23 Archeological artifacts . . . 24 25 Other ► (_____) 26 Other ▶ (_____) 27 Other ► (_____) 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement 0 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required 30a b If "Yes." describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Χ **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is

checked, describe in Part II.

Schedule M (F	orm 990) (2015) Southern Utah Wilderness Alliance	94-2936961 Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, an	d 33, and whether
r are ii	the annual state is non-retired in Double state of the st	ef items received
	the organization is reporting in Part I, column (b), the number of contributions, the number	or items received,
	or a combination of both. Also complete this part for any additional information.	
		
		
		1

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Southern Utah Wilderness Alliance	94-2936961
Form 990, Part III, Line 4d Program Service Expenses 103,991, Grants and allocations 0,	
Revenue 0 - ENERGY Researched issues related to federal approvals for oil and gas	
development, public health and environmental protection. There was an emphasis on issues	
related to air and water quality, wildlife habitat and special emphasis areas. Tracked	
leasing of public lands for oil, gas and coal and determined where sensitive values may be	
compromised by this leasing. Summarized and provided this information to the public through	
paper and electronic medium.	
Form 990, Part III, Line 4d Program Service Expenses 108,883, Grants and allocations 0,	
Revenue 0 - OFF ROAD VEHICLE (ORV) Researched the legal framework for the ORV issue,	·
performed on-the-ground surveys of ORV routes and use, and assessed agency compliance with	·
federal statutes. Educated the public, media and decision-makers on the potential impacts of	
ORV use on natural and cultural resources on public lands, and various feasible and reasonable	
solutions.	
Form 990, Part IV, Section B, Line 11b - A complete copy of form 990 is emailed to all	
members of the governing body before filing the form with the IRS.	
Form 990, Part VI, Section B, Line 12c - Annual questionaires are circulated to all	
applicable individuals addressing the noted policies	
Form 990, Part VI, Section B, Line 15b - the issue is discussed and voted upon during the	
governing board's executive session.	
Form 990, Part VI, Section C, Line 19 - Copies of all applicable documents are maintained at	
the organization's main office.	
Form 990, Part VII, Section A, Line 1a(A)(1) - In 2007, the Board of Directors for the	
Organization unanimously voted to have the applicable board member edit the Organization's	••••
three newsletters. This board member received \$7,101 for 109 hours of editing services for the	
year ended December 31, 2015	

Schedule O (Form 990 or 990-E2) (2015)	Page Z
Name of the organization	Employer identification number
Southern Utah Wilderness Alliance	94-2936961
•••••	-*