.Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

07/01 , 2015, and ending For calendar year 2015 or tax year beginning Name of foundation A Employer identification number KIRK HUMANITARIAN 20-3920671 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 201 SOUTH MAIN STREET, SUITE 1100 (801) 578~6966 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here. SALT LAKE CITY, UT 84111 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust under section 507(b)(1)(A), check here . J Accounting method | X Cash | Accrual Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), line under section 507(b)(1)(B), check here . > 16) ▶ \$ 269,505. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) (b) Net investment (c) Adjusted net . expenses per purposes income income books (cash basis only) 2,205,041 ATCH 1 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to 80 80 80. ATCH 2 Interest on savings and temporary cash investments. 32,856 32,856. 32,856. ATCH 3 Dividends and interest from securities b Net rental income or (loss) 1,758,230 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 2,040,176 1,758,230. Capital gain net income (from Part IV, line 2) . $\overline{11}$. Net short-term capital gain. , Income modifications Gross sales less returns and allowances . . . 10a b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 32,947. Total. Add lines 1 through 11 3,996,207. 1,791,166. 0 13 Compensation of officers, directors, trustees, etc . . . S 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . 188 94 188. 16a Legal fees (attach schedule) b Accounting fees (attach schedule) 94 2,525. 5,050. 5,050. 2,525. c Other professional fees (attach schedule) inistrati 17 528 264 264 528. 18 Depreciation (attach schedule) and depletion 19 Occupancy . OGDEN. 20 Travel, conferences, and meetings 21 22 Printing and publications 34,797. [23 13,282. 13,282 34,797. Other expenses (attach schedule) ATCH .4. . ati 24 Total operating and administrative expenses. Add lines 13 through 23. 40,563 16,165. 16,165 40,563. O 25 Contributions, gifts, grants paid 2,901,000. 2,901,000. 2,941,563. 2,941,563. 16,165 16,165 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: 1,054,644 a Excess of revenue over expenses and disbursements . . 1,775,001. b Net investment income (if negative, enter -0-) 16,782. c Adjusted net income (if negative, enter -0-). _. Form 990-PF (2015)

JSA For Paperwork Reduction Act Notice, see instructions.

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Part II	Ralanca Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
Parti	Datatice Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ngpnr	72,883.	41,386.	41,386.
1		cash investments			
2					
3		http://www.html			
- {				,	
4	Pledges receivable ▶_				
	Less allowance for dou	ıbtful accounts ▶			
5	Grants receivable				
6	Receivables due from	officers, directors, trustees, and other			
1	disqualified persons (at	ttach schedule) (see instructions)			
7	Other notes and loans	receivable (attach schedule)		· 5	
		ubtful accounts >			
တ္ကုိ ့		se			
Assets					
9	, ,	deferred charges			
1.00		ite government obligations (attach schedule).	1,411,680.		
		e stock (attach schedule)			
	Investments - corporations Investments - land, building	e bonds (attach schedule)			
11	and equipment basis	···			3/2/ 2/2/2/
Į	Less accumulated deprec (attach schedule)	nation >			
12	Investments - mortgage	e loans			
13	Investments - other (at	tach schedule) ATCH 5	223,880.		
14	Land, buildings, and equipment basis	•			
	Less accumulated deprec	nation >			
15	(attach schedule)	ATCH 6	3,180.	1,767	1,767.
16	Total assets (to be	completed by all filers - see the			
1,0		page 1, item I)		267,033	. 269,505.
				207,033	200,000.
17		accrued expenses			
18	Grants payable				
Liabilities 20 21 22 22	Deferred revenue				4.70 1 2 2 3 3
三 20	Loans from officers, direct	tors, trustees, and other disqualified persons			_1% * * .^*
은 21	Mortgages and other n	otes payable (attach schedule)			
تا ₂₂	Other liabilities (describ	pe ▶)	1,369,500.		
	,	,			7 ' 4
23	Total liabilities (add lin	es 17 through 22)	1,369,500.)	-)
		llow SFAS 117, check here . ▶			7 · 1
တ္ထ		24 through 26 and lines 30 and 31.		ļ	1
일	•	-			1
E 24					┪
25 26 26 26					1
교 26					
.5		o not follow SFAS 117, $\blacktriangleright X$			1 4
뛴	check here and cor	nplete lines 27 through 31.			1 1
27	Capital stock, trust pri	ncipal, or current funds			
ə 28	Paid-in or capital surplus,	or land, bldg, and equipment fund			
S 29	Retained earnings, accur	nulated income, endowment, or other funds	342,123.	267,033	.
∑ 30	Total net assets or fur	nd balances (see instructions)	342,123.	267,033	.]
Net Assets or Fund 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		d net assets/fund balances (see			7
_			1,711,623.	267,033	.
Part		anges in Net Assets or Fund Bala			
		balances at beginning of year - Part		must agree with	T
					342,123
		ted on prior year's return)			
		I, line 27a			1,054,644
			<u> </u>		
4 Ad	d lines 1, 2, and 3			4	1,396,767
	creases not included				1,129,734
6 To	tal net assets or fund	balances at end of year (line 4 minu	s line 5) - Part II, column	(b), line 30 6	267,033
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Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
	d describe the kind(s) of property sold (rick warehouse, or common stock, 200		(b) How acquired P - Purchase D - Don ation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
a SEE PART IV SCHE	DULE				
b			<u> </u>		
c					
<u>d</u>					
е		(2) 6-24-2-15-2-5-2-2			ــــــــــــــــــــــــــــــــــــــ
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
	·				
<u>b</u>					
<u>c </u>					
B			1		
	showing gain in column (h) and owne	d by the foundation on 12/31/69	//\	Gains (Col (h) g	isin minile
	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any	-	Losses (from co	
a h					
<u>ь</u> с					
d					
0 0			L		
Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	1	758,230.
Net short-term capital o	ain or (loss) as defined in sections	• •	+		. 50, 250.
, ,	art I, line 8, column (c) (see ins				
-		The state of the s	2		11.
		duced Tax on Net Investment I	ncome		
	the section 4942 tax on the distribution not qualify under section 4940(e).	outable amount of any year in the b	ase perio	d? [Yes X No
		ar; see the instructions before making	ig arry ent	ries.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution r (col (b) divided by	
2014	749,023.	1,601,598.		·· · ·	0.467672
2013	907,973.	318,527.			2.850537
2012	462,139.	137,893.			3.351432
2011	1,193,667.	19,066.			62.607102
2010	1,754,022.	17,680.		<u> · · · · · · · · · · · · · · · · · · ·</u>	99.209389
			2	16	68.486132
	-	de the total on line 2 by 5, or by the	_		
number of years the fou	indation has been in existence if le	ss than 5 years	3		33.697226
4 Enter the net value of n	oncharitable-use assets for 2015 fi	rom Part X, line 5	4		57,361.
5 Multiply line 4 by line 3			5	1,	,932,907.
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		17,750.
7 Add lines 5 and 6			7	1,	,950,657.
			8		,941,563.
If line 8 is equal to or given Part VI instructions.	greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	ix rate. See ti

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

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Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	İ		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address ▶ N/A			
14	The books are in care of ▶ RONALD MOFFIT Telephone no ▶ 801-578	-696	6	
	Located at ▶ 201 SOUTH MAIN STREET, SUITE 1100 SALT LAKE CITY, UT ZIP+4 ▶ 84111			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	·
	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	ļ
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of		'	1
	the foreign country >	<u> </u>	<u></u>	
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Vaa	Na
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	NO
1a	During the year did the foundation (either directly or indirectly)		j.	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	, ,		133
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	`	٠,	- 2 3
	disqualified person?	14.5	3	ş- · · ·
	(5) Furnish goods, services, or facilities to (or acceptation from) a disqualified person 1.1.1.1.1.	~		22.5
	(4) Fay compensation to, or pay or formbards the expenses of, a disquarried person.	1.		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	2 3 4 6	¥.3.5	13.4 15.4
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	3 7 7		18.7
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	34%	¥4,	
	of f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
•	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here		``.	100
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2015?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			13
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		′	
á	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	-		
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years	ŀ		
1	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		<u> </u>	1
	all years listed, answer "No" and attach statement - see instructions)	2b		ļ
•	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			`1
	<u> </u>			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			1
1	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			'
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		ł	1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015)	3b	†	Х
A .	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	t	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	†
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	T	Х
			n-PF	(2015

orm 9	90-PF(2015) KIRK HUMANITAR	IAN		20~	3920671	Page 6
Par	VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		
5a	During the year did the foundation pay or incur any amor	unt to	<u> </u>			
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	. Yes X N	0	
	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry or),		
	directly or indirectly, any voter registration drive?			. Yes X N	0	
	(3) Provide a grant to an individual for travel, study, or or				0	
	(4) Provide a grant to an organization other than a	• •			1	1 1 1
	section 4945(d)(4)(A)? (see instructions)				0	1 1 1
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children		•			
ь	If any answer is "Yes" to 5a(1)-(5), did any of the					
-	Regulations section 53 4945 or in a current notice regar		•	•	. 5b	X
	Organizations relying on a current notice regarding disas				.i¬	
_	If the answer is "Yes" to question 5a(4), does the					
·	because it maintained expenditure responsibility for the		•			
				169		
c-	If "Yes," attach the statement required by Regulations see	, ,				
6a	Did the foundation, during the year, receive any fur	-		Yes X N		
_	on a personal benefit contract?	ectly or indirectly on a	normanal banefit contro		6b	X,
Ь		city of indirectly, on a	personal benefit corrus	ict,	. 60	
7.	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a p.	arty to a prohibited to	, shelter transaction 2	Yes X N	۱ '	
7a	If "Yes," did the foundation receive any proceeds or have	•	•	. —		
Ba	t VIII Information About Officers, Directo					
	and Contractors					
1	List all officers, directors, trustees, foundation r	nanagers and thei	r compensation (See	instructions).		
				(d) Contributions to	(a) Europ	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)		l other of	se account, llowances
SPEI		(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	l other of	
SPEI	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	other a	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other a	llowances
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other a	llowances
KRI	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other a	llowances 0.
KRI	(a) Name and address NCER KIRK STEN KIRK	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other al	llowances 0.
KRI	(a) Name and address NCER KIRK STEN KIRK	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other al	0 . 0 .
KRI	(a) Name and address NCER KIRK STEN KIRK	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other al	0 . 0 .
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR	(c) Compensation (If not paid, enter -0-) C.	(d) Contributions to employee benefit plans and deferred compensation 0	other al	0 . 0 .
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than thos	(c) Compensation (If not paid, enter -0-) C.	(d) Contributions to employee benefit plans and deferred compensation 0 0 0	other al	0 . 0 .
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 0 (d) Contributions to employee benefit	other al	0. 0. one, enter
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than thos	(c) Compensation (If not paid, enter -0-) C.	(d) Contributions to employee benefit plans and deferred compensation 0 0 0 (d) Contributions to	other al	0. 0. 0.
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter
KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter
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KRI:	(a) Name and address NCER KIRK STEN KIRK ALD MOFFITT Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR SECRETARY/TREASURE DIRECTOR (other than those hours per week	(c) Compensation (If not paid, enter -0-) O. R O.	(d) Contributions to employee benefit plans and deferred compensation 0 0 1 - see instruct (d) Contributions to employee benefit plans and deferred	other al	0. 0. one, enter

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Part VIII Information About Officers, Directors, Trustees, Foundation	Managers Highly Paid Emplo	Page
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see		
(a) Name and address of each person paid more than \$50,000		
(a) Name and address or each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	-	
	·	
	-	
	-	
	_	
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati organizations and other beneficianes served, conferences convened, research papers produced, etc.	istical information such as the number of	Expenses
1 N/A		
2	-	
3		
	·	
4		
Part IX-B Summary of Program-Related Investments (see instructions)		·
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 NONE		
2		
All officers and the last of t		
All other program-related investments. See instructions		
3 NONE		
Total Add lines 1 through 3	·	

Page	1
-5-	-

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.	1 1	
а	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	58,235.
	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	58,235.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	58,235.
4	Subtract line 2 from line 1d		-
	instructions)	4	874.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	57,361.
6	Minimum investment return. Enter 5% of line 5	6	2,868.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ X and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
b	Income tax for 2015. (This does not include the tax from Part VI.). 2b	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	12 	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,941,563.
þ	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,941,563.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	17,750.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,923,813.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when can applying for the section 4940(a) reduction of tax in those years	alculating	whether the foundation

Page 9

	990-PF (2015)				Page 9
Pa	rt XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
	line 7				0.
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
b	Total for prior years 20 13 ,20 12 ,20 11				
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011 1,193,667.	İ			
C	From 2012				
d	From 2013				, if
	From 2014	5 000 005			1
	Total of lines 3a through e	5,066,825.			
4	Qualifying distributions for 2015 from Part XII, line 4 \(\bigstar\) \(\bigstar\) \(\bigstar\) \(\bigstar\) \(\bigstar\)			A > #A	
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
c	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2015 distributable amount		······		
е	Remaining amount distributed out of corpus	2,941,563.			
5	Excess distributions carryover applied to 2015.		· 	· · · · · · · · · · · · · · · · · · ·	
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as	,			
	indicated below:	8,008,388.	*	, ,	
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0,000,300.		 	
b	Prior years' undistributed income Subtract				
c	line 4b from line 2b				
c	Subtract line 6c from line 6b Taxable				
e	amount - see instructions				,
T	Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				
7	Amounts treated as distributions out of corpus				}
	to satisfy requirements imposed by section				[
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	1,754,022.			!
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	6,254,366.		 	
	Analysis of line 9]
	Excess from 2011				
	1 LXC655 110111 2012				,
	740 022	li			
	2 041 573				
	Excess from 2015 2,941,563.	L	 	<u> </u>	Form 990-PF (2015)

Pa	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questio	on 9)	
1 a	if the foundation has i	received a ruling or di	etermination letter that	it is a private operat	~ I	
	foundation, and the ruling					
b	Check box to indicate v		is a private operating f		section X 4942(j)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	#1.004 <i>t</i>	Prior 3 years	(1) 0010	(e) Total
	justed net income from Part f or the minimum investment	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	return from Part X for each	2,868.	26,184.	15,926.		44,978.
•	year listed	2,438.	22,256.	13,537.		38,231.
	85% of line 2a	27.551	22,2001	20,007		
С	Qualifying distributions from Part XII, tine 4 for each year listed	2,941,563.	749,023.	907,973.	462,139.	5,060,698.
ď	Amounts included in line 2c not				 	-
	used directly for active conduct					
е	of exempt activities					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c	2,941,563.	749,023.	907,973.	462,139.	5,060,698.
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets	267,033.	299,943.	957,281.	397,180.	1,921,437.
	(2) Value of assets qualifying under section	}				
	4942(j)(3)(B)(i)	<u> </u>				
Ь	"Endowment" alternative test- enter 2/3 of minimum invest-	1				
	ment return shown in Part X.	52.041	05 067	0.500	4 507	02 174
	line 6 for each year listed ,	53,941.	25,067.	9,569.	4,597.	93,174.
С	"Support" alternative test - enter (1) Total support other than			1		
	gross investment income		,			
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),	}				
	or royalties) (2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j(3)(B)(iii)	 				
	port from an exempt organization	}				
	(4) Gross investment income					
Pa				only if the foundat	tion had \$5,000 or	more in assets at
		uring the year - see				
1	Information Regardin	•		- 15 00/ -5 15 - 1-1	1 4-1 - 4 -	
а	List any managers of before the close of any			e than 2% of the tota nore than \$5,000) (Se		rea by the toundation
			io, nato continuatos.	(00	00 000 00 00 (4/(2/./	
-	SPENCER KIR List any managers of		own 10% or more o	f the stock of a corne	oration (or an equally	large portion of the
				has a 10% or greater		iargo portion of the
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ▶ ☐ If	the foundation only	makes contributions	to preselected chari	table organizations a	and does not accept
	unsolicited requests f		ation makes gifts, gra		ions) to individuals o	
	The name, address, a	<u></u>		he person to whom an	plications should be add	dressed:
	N/A			•		
t	The form in which app	olications should be su	bmitted and information	on and materials they	should include.	
	N/A					
(: Any submission dead	ines:				
	N/A					
-	Any restrictions or I factors:	imitations on awards	, such as by geogr	aphical areas, charita	ble fields, kinds of	institutions, or other
	N/A					
184	17/6					

Page **11**

Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid Duri	3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Show any relationship to Name and address (home or business) Recipient s an individual, show any relationship to name ger or substantial contributor Purpose of grant or contribution Purpose of grant								
Recipient	it recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	Continuation	<u> </u>					
a Paid during the year		[
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Total	 			2,901,000.					
b Approved for future payment		1							
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Total		ــــــــــــــــــــــــــــــــــــــ	▶ 3b	 					
lotal	<u> </u>			<u> </u>					

JSA 5E1491 1 000

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			· · · · · · · · · · · · · · · · · · ·
	amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
•	service revenue					(See instructions)
				 	· · · · · · · · · · · · · · · · · · ·	_ ~
				 		
						
f				T		
	and contracts from government agencies					
•	ship dues and assessments					
	on savings and temporary cash investments			14	80.	
	is and interest from securities			14	32,856.	
5 Net rent	al income or (loss) from real estate					
	-financed property		<u> </u>			
	debt-financed property			<u> </u>		
6 Net renta	I income or (loss) from personal property			 		
7 Other in	vestment income			 		
8 Gain or (loss) from sales of assets other than inventory			18	1,758,230.	
9 Net inco	me or (loss) from special events	ļ				
•	rofit or (loss) from sales of inventory	ļ		 	 	
11 Other re	venue a	<u></u>		 	<u> </u>	
			 	 	 	
			 	 	 	
			 	 	 	
e		ļ		 	1,791,166.	
	Add columns (b), (d), and (e)				·	1,791,166.
	dd line 12, columns (b), (d), and (e) , , heet in line 13 instructions to verify calc					1,791,100.
Part XVI- Line No.	Relationship of Activitie Explain below how each activities					uted importantly to the
	accomplishment of the foundation	on's exemp	ot purposes (otner than	by providing	g tunas for such purpose:	s). (See instructions.)
				<u>-</u>		
					· · · · · · · · · · · · · · · · · · ·	
					 	
ISA	-					Form 990-PF (2015)

JSA 5E1492 1 000

ruiii 990-FF (20	13)	HOLDHALLIAN			3320071	raye I J	_
Part XVII	Information Regarding	g Transfers To a	and Transactions and Relationships V	Vith	Noncharita	able	•
	Exempt Organizations	\$					

		Excitipt Cigai													
1 Did the organization directly or indirectly engage in any of the following with any other organization described										1	Yes	No			
	ın secti	on 501(c) of the Co	de (other than :	section	501(c)(3) or	ganization	s) or i	n sec	tion 527, r	elatin	g to p	olitical			
	organiz	ations?											1		
а	Transfe	ers from the reportin	g foundation to	a noncl	naritable exe	mpt organ	izatıor	n of:							
	(1) Cas	h											1a(1)		X
	(2) Oth	er assets										<i>.</i> .	1a(2)		X
b		ransactions:													
	(1) Sale	es of assets to a no	ncharitable exer	mpt orga	nization							<i>.</i> .	1b(1)		Х
		chases of assets fro											1b(2)		X
	(3) Rer	ntal of facilities, equi	pment, or other	assets								.	1b(3)		X
		mbursement arrange											16(4)		X
		ins or loan guarantee											1b(5)		X
	(6) Performance of services or membership or fundraising solicitations										1b(6)		X		
C	Sharing	of facilities, equipn	nent, mailing lis	ts, othe	r assets, or p	aid employ	ees						1c	L	X
d		answer to any of th			-	_						-			
		f the goods, other													
		n any transaction or	,				$\overline{}$								
(a) L	ine no	(b) Amount involved	(c) Name of r	noncharita	ble exempt orga	inization	<u> </u>		otion of transfe	ers, trai	nsaction	ns, and sha	aring ama	ingeme	nts
		N/A					N/	A							
			 												
															
			 				 								
			ļ — — — — — — — — — — — — — — — — — — —				 -								
			 												
			1												
2a	Is the	foundation directly	or indirectly af	filiated	with, or rela	ted to, on	e or	more	tax-exempt	orga	nızat	ions			_
	describ	oed in section 501(c)) of the Code (o	ther tha	n section 50	1(c)(3)) or	in se	ction 5	27?					es 🗵	No [
b	If "Yes	<u>," complete the follo</u>	wing schedule.					-,							
		(a) Name of organization	n		(b) Type of o	rganization				c) Des	cription	ofrelation	nship		
													 -		
			- 												
									- 						
		 													
	Under	penalties of penjury, I decl	are that I have exam	ined this ri	eturn, including a	ccompanying s	chedules	and sta	stements, and t	o the b	est of	my knowle	dge and	belief, if	is true,
٠.	- 1	a, and complete Declaration of	of preparer (other than t	taxpayer) is	based on all inforr	nation of which	preparer	rhas any	knowledge		_				
Sig	n	48 Mora	W.	1	5-11-	17		01	recto	L		. •	RS discu: preparer		retum below
Her	e Sigi	nature of officer of trustee	Y		Date		Title				[see instructio		ו ר	No
		U	,								Ľ				=
	l	Print/Type preparer's na	ime	Pre	parers signature	·			Date		Check	X	PTIN		
Paid		STAN VANDERT	OOLEN	~	Itan Wa	notes Tax	-Ku		05/11/20	17	1	mployed	P006	3308	3 4
Pre	parer	Firm's name PF	RICEWATERHO	USECO	OPERS LLE					Firm's	EIN	▶13-4	10083	24	
Use	Only	Firm's address ▶ 20	1 SOUTH MA	IN ST	REET, STE	900									
		SF	ALT LAKE CI	TY, U	UT.			8411	.1	Phone	e no	801-5			
												F	om 99	0-PF	(2015)

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasu

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Department of the Treasury Internal Revenue Service Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs.gov/form990.

Name of the organization Employ.

OMB No 1545-0047

2015

Name of the organization		Employer Identification number						
KIRK HUMANITARIAN	20-3920671							
Organization type (check one	а):							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a priv	rate foundation						
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private	foundation						
	501(c)(3) taxable private foundation							
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule. See						
General Rule								
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, or property) from any one contributor. Complete Parts I and II. See is contributions.							
Special Rules								
regulations under s 13, 16a, or 16b, ai	in described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form that received from any one contributor, during the year, total contributor of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	rm 990 or 990-EZ), Part II, line ibutions of the greater of (1)						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
Caution. An organization tha 990-EZ, or 990-PF), but it mu Form 990-PF, Part I, line 2,	It is not covered by the General Rule and/or the Special Rules does not ust answer "No" on Part IV, line 2, of its Form 990; or check the box of to certify that it does not meet the filing requirements of Schedule B (F	ot file Schedule B (Form 990, on line H of its Form 990-EZ or on its Form 990, 990-EZ, or 990-PF).						
For Paperwork Reduction Act Noti	ice, see the Instructions for Form 990, 990-EZ, or 990-PF.	chedule B (Form 990, 990-EZ, or 990-PF) (2015)						

JSA 5E1251 2.000 Name of organization KIRK HUMANITARIAN

Em ployer identification number 20~3920671

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SPENCER KIRK 2412 HAVEN LANE HOLLADAY, UT 84117	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KRISPEN CHARITABLE TRUST	\$835,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

20-3920671

a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions) (d) Date recei			
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<u> </u>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		 \$			

`.Name of organization KIRK HUMANITARIAN

Employer identification number 20-3920671

Part III		the year from any nons completing Par e year. (Enter this in	one contributor. On till, enter the total of formation once. So	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,						
(a) No. from	(b) Purpose of gift									
Part 1										
	(e) Transfer of gift									
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee						
(a) No from										
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
	(e) Transfer of gift									
	Transferee's name, address, a	nd ZIP + 4	Relation	nship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee						
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
	Transferee's name, address, a	(e) Trans	Relationship of transferor to transferee							

KIRK HUMANITARIAN

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME Virial of Presents Date Solid Date Solid										
Kind of F			Descr			on	D acquired			
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)			
		TOTAL SHORT-	-TERM CAPITA	L GAIN DIVI	DENDS		11.			
		TOTAL LONG-	TERM CAPITAL	GAIN DIVID	ENDS		165.			
		EXTRA SPACE			EIT	D	02/17/2010	03/02/2016		
1,232,500.		125,918.	FE. SECORITI	E5			1,106,582.			
		EXTRA SPACE			EIT	D	02/17/2011	03/02/2016		
807,500.		156,028.					651,472.			
TOTAL GAIN(L	oss)	 			• • • • •		1,758,230.			
·										
							,			
	ı									
						İ				

KIRK HUMANITARIAN

DIRECT	DITELIA

PUBLIC SUPPORT

1,370,041.

02/12/2016

DATE

01/08/2016

KRISPEN CHARITABLE TRUST

SPENCER KIRK 2412 HAVEN LANE HOLLADAY, UT 84117

NAME AND ADDRESS

TOTAL CONTRIBUTION AMOUNTS

835,000.

2,205,041.

INVESTMENTS
CASH I
TEMPORARY
ON
INTEREST
PART I
990PF,
FORM

ADJUSTED NET INCOME	80.	80.
NET INVESTMENT INCOME	.08	80.
REVENUE AND EXPENSES PER BOOKS	80.	80.
		TOTAL
DESCRIPTION	RAYMOND JAMES	

ATTACHMENT 2 PAGE 26

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

ADJUSTED NET INCOME	28,320.	32,856.
NET INVESTMENT INCOME	28,320. 4,536.	32,856.
REVENUE AND EXPENSES PER BOOKS	28,320. 4,536.	32,856.
		TOTAL
DESCRIPTION	ESS STOCK VANGUARD SCOTTSDALE FUND	

HER EXPENSES	
- OT	
PART I	
990PF,	
FORM	

	ADJUSTED	NET	INCOME	13,282.							13, 282.
	NET	INVESTMENT	INCOME	13,282.							13,282.
REVENUE	AND	EXPENSES	PER BOOKS	26,563.	1,350.	705.	1,413.	1,625.	13.	3,128.	34,797.
											TOTALS
			DESCRIPTION	SHIPPING	LAB ANALYSIS	WEB SITE MAINTENANCE	WEB SITE AMORTIZATION	LABEL DESIGN & TRANSLATION	NON-DEDUCTABLE PENALTIES	RESEARCH & FEASIBILITY STUDY	

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ATTACHMENT 5 PAGE 29

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226,352.

226,352.

223,880.

TOTALS

VANGUARD SCOTTSDALE FUNDS

223,880.

FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION

WEBSITE ACCUMULATED AMORTIZATION

ENDING BOOK VALUE 28,937. -27,170. 1,767.

TOTALS

ATTACHMENT 6 PAGE 30

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

OTHER DECREASE

1,129,734.

TOTAL

1,129,734.

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RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MAGNO HUMPHRIES	NONE PC	TO MEET THE BYLAWS OF THE FOUNDATION	861,000.
LDS PHILANTHROPIES	NONE PC	TO MEET THE BYLAMS OF THE FOUNDATION	1,000,000
Corporation of the president	NONE PC	TO MEET THE BYLAMS OF THE FOUNDATION	1,040,000

2, 901, 000

TOTAL CONTRIBUTIONS PAID

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FEDERAL CAPITAL GAIN DIVIDENDS

SHORT-TERM CAPITAL GAIN DIVIDENDS	ATTACHMENT 2	
VANGUARD SCOTTSDALE FUNDS	11.	
TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS		11.
LONG-TERM CAPITAL GAIN DIVIDENDS		
	ATTACHMENT 3	
15% RATE CAPITAL GAIN DIVIDENDS		
VANGUARD SCOTTSDALE FUNDS	165.	
TOTAL 15% RATE CAPITAL GAIN DIVIDENDS		165.
TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS		165.