### Extended to November 15, 2 Return of Private Foundation 2018

or Section 4947(a)(1) Trust Treated as Private Poundation

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

		t of the Treasury venue Service	•		social security numbers on rs.gov/Form990PF for inst			Open to Public Inspection
_			or tax year beginnin	ıg		, and ending		
Na	me of	foundation					A Employer identification	number
			Foundati				26-2071653	
		,	oox number if mail is not Brook Way		address)	Room/suit	B Telephone number 801-978-13	37
			ovince, country, and City,_UT	ZIP or foreign p 84093	ostal code		C If exemption application is pe	ending, check here
		all that apply:	Initial ret	urn	Initial return of a fo	ormer public charity	D 1 Foreign organizations	, check here
			Final retu	change	Name change		2 Foreign organizations me check here and attach coi	eting the 85% test, imputation
H (	_	type of organizetion 4947(a)(1	ation: X Section Section ( ) nonexempt charita	· '	cempt private foundation Other taxable private founda	ation D	E If private foundation stat under section 507(b)(1)	
		arket value of all Part II, col. (c), I	assets at end of yea	1	ng method: X Cash ther (specify)	Accrual	F If the foundation is in a 6	0-month termination
_	\$	,	2,659,132	(Part I, colun	nn (d) must be on cash basi	s.)	under section 507(b)(1)	
Pa	art I	The total of ame	evenue and Expens ounts in columns (b), (c), al the amounts in column	and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 2		gifts, grants, etc., re		1,800,808.		N/A	
	3		as and temporary	or to main own b				
	4 5a	Dividends and Gross rents	interest from securit	ies	13,150.	13,15	0.	Statement 1
	1 -	Net rental income	or (loss)	<del></del>				
Jue	6a	Net gain or (loss) Gross sales price assets on line 6a	from sale of assets not of for all	4,510.	4,510.			
Revenue	7	7 Capital gain net income (from Part IV, line 2)				4,51	0.	
•	8	Net short-term					<del> </del>	
	9 10a	Income modifi Gross sales less and allowances						
	1 .	Less Cost of goo	ods sold					
	C	Gross profit or	(loss)			· · · · · · · · · · · · · · · · · · ·		
	11	Other income			1 010 160	15 66		
	12		es 1 through 11		1,818,468.	17,66		
	13	•	officers, directors, trust		0.		0.	0.
	14		e salaries and wages	3		<del></del>	<del> </del>	
ຜູ	15		, employee benefits					
nse	16a	Legal fees	_		600	<u> </u>		
Expenses	. D	Accounting fee		tmt 2	600.		PECEIVED	0.
		Other professi	onai tees					70)
ţ.	18	Interest Taxes	c	tmt 3	208.		MAY 2 8 2018	
} Admınıstrative	19	Depreciation a		cinc 3	200.		20 00 00 00	<u> </u>
<u> </u>	20	Occupancy	nd depietion				OGDEN IT	<u> </u>
퉏	21		ences, and meetings					<del></del>
ZUI© and /	22	Printing and p						<del></del>
₹ 5 5	23	Other expense		tmt 4	6,264.	6,26	4.	_0.
∍ Ę	24		g and administrativ			<u></u>		
الا الا الا ميالة المراقة Operating and الم	-'	-	d lines 13 through 20		7,072.	6,26	4.	0.
5 ō	25	-	gifts, grants paid		801,050.			801,050.
	26		s and disbursement	ts				
) 		Add lines 24 a			808,122.	6,26	4.	801,050.
1942/77700 	27	Subtract line 2	6 from line 12:					
2	a	Excess of revenu	e over expenses and dis	sbursements	1,010,346.			
3	b	Net investmer	t income (if negative,	enter -0-)		11,39		
(Ú)_	C	Adjusted net i	ncome (if negative, ent	er -0-)		L	N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

rui	111 95	o-Pr (2017), RLC Family Foundation			20/1655 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	(0)	(-/	(0)
	١	· · · · · · · · · · · · · · · · · · ·		<del></del>	
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
		Less: allowance for doubtful accounts			
	4	Pledges receivable -			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons	ţ	1	
	7	Other notes and loans receivable			
	•	Less; allowance for doubtful accounts			
'n	8	Inventories for sale or use			
Assets	٥	Prepaid expenses and deferred charges	<del></del>		
Ass	40-	· · · · · · · · · · · · · · · · · · ·			
•		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment, basis		1	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 5	1,562,696.	2,573,042.	2,659,132.
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe			
	ı	Total assets (to be completed by all filers - see the			
	16		1 562 606	2 572 042	2 (50 122
	4=	instructions. Also, see page 1, item I)	1,562,696.	2,573,042.	2,659,132.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	_ 0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.		İ	
es	24	Unrestricted			
Net Assets or Fund Balances	25	Temporarily restricted			
ale	ı	<del> </del>			
P E	26	Permanently restricted			
Ξ		Foundations that do not follow SFAS 117, check here	j		
ř		and complete lines 27 through 31	_		
ş	27	Capital stock, trust principal, or current funds	0.	0.	
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	1,562,696.	2,573,042.	
let	30	Total net assets or fund balances	1,562,696.	2,573,042.	
_					
	31	Total liabilities and net assets/fund balances	1,562,696.	2,573,042.	
_				2,3,3,0,22.	
Ρ	art	III Alialysis of Changes in Net Assets of Fund Ba			
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	1,562,696.
2	Ente	amount from Part I, line 27a		2	1,010,346.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,573,042.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (h) line 30	6	2,573,042.
<u>.                                    </u>	· via	not account of range calanoes at one of year time 4 minus line of 1 at 11, coll	anna to b mile on		Eorm <b>QQN-PF</b> (2017)

	n 990-PF (2017) RLC Family Foundation 26 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	5-20 <b>8-</b> s	071653 ee instru	ıctio	Page 4 ns)
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.  Date of ruling or determination letter:  (attach copy of letter if necessary-see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check here  and enter 1%	1		2	28.
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	2			0.
3	, , , , , , , , , , , , , , , , , , , ,	3			28.
4		4			0.
5		5		2	28.
	Credits/Payments:				<u></u> -
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6.				
b	Exempt foreign organizations - tax withheld at source 6b 0.				
C	Tax paid with application for extension of time to file (Form 8868)  6c 228.				
d	Backup withholding erroneously withheld 6d 0.				
		7		2	<u> 28.</u>
		8			0.
9	· · · · · · · · · · · · · · · · · · ·	9			0.
10		10			
	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 1 art VII-A Statements Regarding Activities	11 _			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		<del></del>	Yes	No
14	any political campaign?		1a	.00	X
h	only political campaight.  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	n	1b		X
_	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or				_ <del></del>
	distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?		1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers. $\blacktriangleright$ \$ 0 .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
9	managers. ► \$0.  Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
2	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			}	
Ů	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	N/Z			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		Ì		İ
	By language in the governing instrument, or		ĺ	}	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	N			
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.   UT		_		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1	
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calenda	ar		1	
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9	<u> </u>	X 4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10 5 000	) DE	<u>X</u>
			Form <b>99</b>	ノーアト	(2017)

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4a

Х

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

orm 990-PF (2017) RLC Family Foundation	4700 14 5		26-20716	53	Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4/20 May Be	Required (contin	ued)	- 154	
5a During the year, did the foundation pay or incur any amount to:		<del></del>		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	• • • •	_	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir		<b>₩</b>	1	
any voter registration drive?	_		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y6	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		₹		1
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or		es X No		
the prevention of cruelty to children or animals?		<del></del> '	es LALINO	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit		in Regulations	27 / 2	.	
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	<del> </del> -
Organizations relying on a current notice regarding disaster assistance, check		umad		Ì	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for					
expenditure responsibility for the grant?	r	1/A	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				İ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on		es X No		
·	araanal hanafit aantroot?	16		6b	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b, file Form 8870	reisonal benefit contract?		<u> </u> -	עס	
•	halter transaction?	□ v.	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribute.		16	· · · ·	7b	_
Part VIII Information About Officers, Directors, Trust		nagers Highly		70	
Paid Employees, and Contractors	000, 1 00.10011011		,		
List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Exp	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account allowa	nces
Robert B. Campbell	President/Dir	rector			
3047 Farm Brook Way					
Sandy, UT 84093	0.00	0.	0.		0.
	Secretary/Tre	easurer/Di	rect		
3047 Farm Brook Way		_	_		_
Sandy, UT 84093	0.00	0.	0.		0.
<del></del>	Director		]		
L671 E Stratford Ave					_
Salt Lake City, UT 84106-3668	0.00	0.	0.		<u>     0                               </u>
			}		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	<u> </u>		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Ext	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account allowa	t, other
NONE		<del> </del>			
•		1			
	Į				
		ļ <u> </u>			
		1			
Total number of other employees paid over \$50,000				000 55	(2047)
			Form	990-PF	(2017)

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Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ındation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		l l
		ł
	<del></del>	
	<del></del>	
		1
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		_ <u></u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant	statistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research paper	s produced, etc.	
1 N/A		
2	<del></del>	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	<del></del>	<del>,</del>
Describe the two largest program-related investments made by the foundation during the tax years.	ear on lines 1 and 2.	Amount
1 N/A		
		·
2		
All of the second of the secon	<del></del>	
All other program-related investments. See instructions.		
3		
		<del></del>
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		Form <b>990-PF</b> (2017)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
, a	Average monthly fair market value of securities	1a	1,609,519.
	Average of monthly cash balances	1b	2/005/025.
c	Fair market value of all other assets	1c	<del></del>
d		1d	1,609,519.
_	Reduction claimed for blockage or other factors reported on lines 1a and	-10	<u> </u>
٠	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,609,519.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	24,143.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,585,376.
6	Minimum investment return. Enter 5% of line 5	6	79,269.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
_	foreign organizations, check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	79,269.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	228.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	79,041.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	79,041.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	79,041.
[ <u>P</u>	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1 <u>a</u>	801,050.
b	Program-related investments - total from Part IX-B	_1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	_ 4	801,050.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<u> </u>
	income. Enter 1% of Part I, line 27b	_ 5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	801,050.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section

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4940(e) reduction of tax in those years

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI.	Corpus	rears prior to 2010	2010	2017
line 7				79,041.
2 Undistributed income, if any, as of the end of 2017				7370111
a Enter amount for 2016 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 496,977.				
b From 2013 1,517,410.				
c From 2014 2,055,621.				
d From 2015 1,119,571.				
e From 2016 867, 423.				
f Total of lines 3a through e	6,057,002.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$801,050.		ļ		
a Applied to 2016, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount			· · · · · · · · · · · · · · · · · · ·	79,041.
e Remaining amount distributed out of corpus	722,009.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:		j	l i	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,779,011.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				<del></del>
4a from line 2a. Taxable amount - see instr.		ľ	0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		1		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	496,977.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	6,282,034.			
10 Analysis of line 9				
a Excess from 2013 1,517,410.				
<b>b</b> Excess from 2014 2,055,621.				
c Excess from 2015 1,119,571.		ļ		
d Excess from 2016 867, 423.				
e Excess from 2017 722,009.				Form <b>990-PF</b> (2017)
				LACON WWW I_   / 1/1/17\

	ily Foundat			26-20	71653 Page-10
Part XIV Private Operating F	<del></del>		A, question 9)	N/A	
1 a If the foundation has received a ruling o	<b>X</b>		j		,,
foundation, and the ruling is effective for			▶ └	<del></del>	
<b>b</b> Check box to indicate whether the found	lation is a private operatir	ig foundation described in		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for	`\				
each year listed	`				
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,		-			
line 4 for each year listed				,	ı
d Amounts included in line 2c not			<del></del>		
used directly for active conduct of					
exempt activities			/		
e Qualifying distributions made directly					
for active conduct of exempt activities.		`	4		
Subtract line 2d from line 2c			4		
3 Complete 3a, b, or c for the					
alternative test relied upon:		j	1 \	j	
<ul> <li>a "Assets" alternative test - enter:</li> <li>(1) Value of all assets</li> </ul>	'	/	`,		
` , ,		/		<del></del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return				14	
shown in Part X, line 6 for each year listed				`	
c "Support" alternative test - enter				<del></del>	<del></del>
* *	1			**	
<ol> <li>Total support other than gross investment income (interest,</li> </ol>				``,	
dividends, rents, payments on				, ,	
securities loans (section				``	
512(a)(5)), or royalties)			<del></del>	<del></del>	
(2) Support from general public and 5 or more exempt					,,
organizations as provided in					
section 4942(j)(3)(B)(III)			· · · · · · · · · · · · · · · · · · ·		
(3) Largest amount of support from					
an exempt organization			<del></del> _		
(4) Gross investment income	<u> </u>			1 105 000	<del></del>
Part XV Supplementary Info			f the foundatio	n had \$5,000 or mo	re in assets
at any time during t	ne year-see instr	uctions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh			ibutions received by th	ie foundation before the clos	e of any tax
year (but only if they have contributed m	nore than \$5,000). (See s	ection 507(d)(2).)			
None			<u> </u>		
<b>b</b> List any managers of the foundation wh			or an equally large por	tion of the ownership of a pa	ırtnership or
other entity) of which the foundation has	s a 10% or greater interes	st.			
None					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here 🕨 🗓 ıf the foundation o					ests for funds. If
the foundation makes gifts, grants, etc,	to individuals or organiza	itions under other condition	ons, complete items 2	a, b, c, and d.	
a The name, address, and telephone num	ber or email address of th	e person to whom applica	ations should be addre	essed:	
b The form in which applications should b	e submitted and informa	ion and materials they sh	ould include:		
c Any submission deadlines:					
					·
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields, l	kınds of ınstitutions, o	r other factors:	
700001 01 00 10				<u> </u>	Form 900 PE (0017)

Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year Catholic Sommunity Services General Cash Donation 745 E 300 S Salt Lake City UT 84102 100,000. General Cash Donation Danielle Bryon Henry Migraine Foundation 2257 South 1100 East Suite 205 Salt Lake City, UT 84106 1,050. University of Utah General Cash Donation 201 Presidents Cir Salt Lake City, UT 84112 200,000. BYU Hawaii General Cash Donation 55-220 Kulanui St Laie HI 96762 500,000. ▶ 3a Total 801 050 b Approved for future payment None

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**▶** 3b

Total

inter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		COGE	741100111	
a	-				
b					
C					
				<del></del>	
1	-			<del></del>	_ <del></del> ,
g Fees and contracts from government agencies	-			<del></del>	
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	13,150.	
5 Net rental income or (loss) from real estate  a Debt-financed property  b Not debt-financed property					
6 Net rental income or (loss) from personal property					
Other investment income					
B Gain or (loss) from sales of assets other					
than inventory			14	4,510.	
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue:			1		
a					<del></del>
b					
c					
d	_				
e	_				
2 Subtotal. Add columns (b), (d), and (e)			0.	17,660.	
3 Total Add line 12, columns (b), (d), and (e)				13	17,660
See worksheet in line 13 instructions to verify calculations.	)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Pt	urposes
--	---------

Line No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).						

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If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

column (d	<ol> <li>the value of the goods, o</li> </ol>	ther assets, or serv	rices received.					
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable	exempt organizatio	n	(d) Description	n of transfers, transaction	ons, and sharing arrangements
			N/A					
							<del></del>	
								<del></del>
						<del></del>		
	_							
ın section	ndation directly or indirectly 501(c) (other than section omplete the following sche (a) Name of orga	501(c)(3)) or in se dule	· ·	(b) Type of organi	·=		(c) Description of re	Yes X No
	N/A	THEATION		(b) Typo or organi	-		(v) Boomption or re	
	N/A						<del> </del>	· · · · · · · · · · · · · · · · · · ·
		·						<del></del>
							<del></del>	· · · · · · · · · · · · · · · · · · ·
	<del></del>							<del></del>
Under	penalties perjury, I declare the	at I have examined the	ıs return, ıncludin	g accompanying sched	les and sta	itements, and to the	best of my knowledge	
Sign Here	elies it is true correct, and compared to the control of the contr	olete Declaration of pr	eparer (other than	taxpayer) is based on   5/22,	all informati	on of which prepare President tor	thas any knowledge lent/Dire	May the IRS discuss this return with the preparer shown below? See instr
	Print/Type preparer's har	ne	Preparer's si		D	ate	Check If	PTIN
Paid	Scott M. Bu				PA:	5/23/18	self- employed	P00359866
Preparer Use Only	Firm's name ► Burk	oank & Wi	lde, P	rrc.			Firm's EIN ► 2	6-0656313
-	Firm's address ► 541	West 50	0 Sout	h				

Form **990-PF** (2017)

Phone no. 801-305-1040

Bountiful, UT 84010

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

2017

RI	C Family Foundation	26-2071653
Organization type (check of	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private 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	
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
General Rule		
•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	•
Special Rules		
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, line 1 Complete Parts I and II	or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductricity to children or animals. Complete Parts I, II, and III	•
year, contributions is checked, enter l purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious implete any of the parts unless the <b>General Rule</b> applies to this organization because it it, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it must answer "No" on certify that it doesn't meet t	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fig. Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fithe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	orm 990-PF, Part I, line 2, to
LHA For Paperwork Redu	action Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule I	B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

<u>RLC F</u>	amily Foundation		<u> -2071653</u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Robert B. and Lisa W. Campbell 8047 South Farm Brook Way Sandy, UT 84093	\$1,800,808.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	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 Payroli 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 Payroli Noncash Complete Part II for noncash contributions )

Name of organization

Employer identification number

#### RLC Family Foundation

26-2071653

art II	Noncash Property (see instructions). Use duplicate copies of F	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b>\$</b>	
(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
		<b>\$</b>	
(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

723454 11-01-17

Transferee's name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Relationship of transferor to transferee

Form 990-PF	Dividends	and Intere	est from Secur	ities St	atement 1
Source	Gross Amount	Capital Gains Dividends	Revenue	(b) Net Invest- ment Income	(c) Adjusted Net Income
Charles Schwab & Co., Inc.	17,660.	4,510	0. 13,150.	13,150.	
To Part I, line 4 =	17,660.	4,51	13,150.	13,150.	
Form 990-PF		Accounti	ng Fees	St	atement 2
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting Fees	_	600.	0.		0.
To Form 990-PF, Pg 1	I, ln 16b	600.	0.		0.
Form 990-PF		Taxe	es	St	atement 3
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Federal Excise Tax		208.	0.		0.
To Form 990-PF, Pg 1	l, ln 18 =	208.	0.		0.
Form 990-PF		Other E	xpenses	St	tatement 4
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
<del>-</del>					
Brokerage Fees Foreign Taxes	_	6,185. 79.	6,185. 79.		0. 0.

# RLC Family Foundation

Form 990-PF Other	Investments		Statement 5
Description	Valuation Method	Book Value	Fair Market Value
Charles Schwab & Co., Inc.	COST	2,573,042.	2,659,132.
Total to Form 990-PF, Part II, line 1	3	2,573,042.	2,659,132.