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 OV
Go to www.irs gov/Form990PF for instructions and the latest information.

OMB No 1545-0047

De Int	partm ernal f	ent of the Treasury Revenue Service	to www.irs	gov/Form990F	PF for instr	n this form as uctions and t	he latest inf	forma	tion.	pen to Public Inspection
		lendar year 2019 or tax year b	eginning			, 2019	, and end			, 20
		foundation _FOUNDATION							A Employer identif	
_		and street (or P.O. box number if mail is	not delivered to	o street address	,		Room/suite		B Telephone numb	
					,					, o. (000 monomor)
	100	WEST TOWNE RIDGE PARE	YAW						(385) 35	51 -8371
Cit	ty or to	own, state or province, country, and ZIP	or foreign posta	al code			1			
									C If exemption applic pending, check here	
_	SANI	DY, UT 84070							panang, anaan	
G	Che	ck all that apply Initial r	eturn	<u> </u>		of a former p	oublic char	rıty	D 1 Foreign organiza	ations, check here >
		Final re		<b>⊢</b>	nended re				2 Foreign organiza 85% test check	
_			s change		me chang					
H	_	ck type of organization X S		· ——	-		. nu		E If private foundation	on status was terminated
Ŧ		ection 4947(a)(1) nonexempt char				ivate founda			under section 507(I	b)(1)(A), check here . > L
1		market value of all assets a of year (from Part II, col (c), lin		unting meth ther (specify		ash [_X] Acc	cruai			s in a 60-month termination
		> \$ 7,258,233.		column (d), m		ash hasis )			under section 507(t	o)(1)(B) check here .
		Analysis of Revenue and Exp		1		2011 20010 7				(d) Disbursements
		total of amounts in columns (b), (c	c), and (d)	(a) Rever		(b) Net inve		(0	c) Adjusted net income	for charitable purposes
		may not necessarily equal the am column (a) (see instructions) )	ounts in	boo	ks					(cash basis only)
	1	Contributions, gifts, grants, etc received (atta-		2,5	00,300.					
	2	Check ► if the foundation is no attach Sch B								
	3	Interest on savings and temporary cash			55,763.					
	4	Dividends and interest from securit	ies							
	5a	Gross rents								
۸.	ŀ	Net rental income or (loss)								
Revenue		Net gain or (loss) from sale of assets no Gross sales price for all assets on line 6a	ot on line 10							
ě	7	Capital gain net income (from Part	IV, line 2).							<u> </u>
ш.	8	Net short-term capital gain								<u> </u>
	9 10 a	Income modifications Gross sales less returns								
	-	and allowances								
	l	Less Cost of goods sold . L Gross profit or (loss) (attach schedu	راما							<u> </u>
	11	Other income (attach schedule)								
	12	Total Add lines 1 through 11		2,5	56,063.	/ ~	RES		· ••	
_	13	Compensation of officers, directors, trus	tees, etc		0.		- CE	1120		
ses	14	Other employee salaries and wage	s			/&/_ <sub>A/</sub>	OV.	<u> </u>	0	
ë	15	Pension plans, employee benefits		ļ			01/23		>_/	
×	16 a	Legal fees (attach schedule)			-			<i>'020</i>	72/	<del> </del>
ē	15 16 a b c 17 18 19 20 21	Accounting fees (attach schedule)			1,340.	30/	DEAL	_		1,340.
ativ	C	Other professional fees (attach sch	•	<del></del>	1,010.		~ (V	15	<del>/ॡ</del> /	1,540.
str	11/	Interest		<u> </u>				$\stackrel{\leftarrow}{}$		
Ē	19	Depreciation (attach schedule) an		<u> </u>						
ᄪ	20	Occupancy	•	-						
Ă	21	Travel, conferences, and meetings								
anc	22	Printing and publications								
٥	23	Other expenses (attach schedule)			2,076.				· ·	2,076.
atir	23 24 25	Total operating and administrative	e expenses.							
oer.		Add lines 13 through 23		1.0	3,416.					3,416.
Õ	25	Contributions, gifts, grants paid .			30,429.				· · · · · · · · · · · · · · · · · · ·	1,630,429.
_	26	Total expenses and disbursements Add lin	es 24 and 25	1,6	33,845.					1,633,845.
	27	Subtract line 26 from line 12	at a barrier	۵	22,218.					
		Net investment income (if negative		·	,-10.		0.		<del></del>	<del> </del>
		Adjusted net income (if negative,	·							
F		perwork Reduction Act Notice, see	<del></del>			L	1			Form <b>990-PF</b> (2019)

Form **990-PF** (2019)

7,255,733.

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

6

_		•
Pag	e	,

Pa	(a) List and des	and Losses for Tax on Investigate the kind(s) of property sold (for rick warehouse, or common stock, 200	example, real estate,	(b) How acquired P - Purchase		(d) Date sold (mo , day, yr )
1 a				D - Donation		
_ <u>- a</u>						
c						
d		<del>-</del> · · · · · · · · · · · · · · · · · · ·	*			
<u>u</u>						
		(A Department allowed	(g) Cost or other basis	<b></b>	(h) Coin or (le	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
<u>a</u>		· · · - · · -				
<u>b</u>						
C						
d						
е	······					
	Complete only for assets si	howing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a						
b					***************************************	***************************************
d	··· · · · · · · · · · · · · · · · · ·					
				<del> </del>		
ее			gain, also enter in Part I, line 7	<del>  </del>		
2	Capital gain net income	or (net capital loss)	(loss), enter -0- in Part I, line 7	2		
3	Not chart torm conital a	,	· · · · · · · · · · · · · · · · · · ·			
3		ain or (loss) as defined in section				
	-		structions If (loss), enter -0- in			
				3		
			educed Tax on Net Investment I he section 4940(a) tax on net invest			
Was			ibutable amount of any year in the b	ase perio	d?	Yes No
1		<del> </del>	ear, see the instructions before mak	ing any er	ntries	<del></del>
<u> </u>	(a)	(b)			(d)	
Cal	Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
Cal	endar year (or tax year beginning in) 2018			<u> </u>	(COI (D) divided by	CO: (C))
	2018			<del> </del>		
	2017					
	2015					
	2015	<del></del>	<del>                                     </del>			
	2014					
_	<b>_</b>					
2				2		
3	_	*	de the total on line 2 by 5 0, or by			
	the number of years the	foundation has been in existence	e if less than 5 years	3		
4	Enter the net value of no	oncharitable-use assets for 2019	from Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
6	Enter 1% of net investm	ent income (1% of Part I, line 27b	)	6		
7	Add lines 5 and 6			7		
8						
	If line 8 is equal to or g Part VI instructions	reater than line 7, check the bo	x in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	instr	uctior	1S)
¹ 1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1 )			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here  and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	-		
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
	Add lines 1 and 2			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0			0.
6	Credits/Payments			
	2019 estimated tax payments and 2018 overpayment credited to 2019   6a			
ь	Exempt foreign organizations - tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0.
	Enter any penalty for underpayment of estimated tax Check here If Form 2220 is attached 8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	-		0.
9	Tax dad if the total of lines of and of the more than more, and amount of the		-	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
		$\neg$		TNO
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	Yes	No X
	participate or intervene in any political campaign?		+	+
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			l x
	instructions for the definition	1 b	+	<del>+ ^-</del>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1	
	published or distributed by the foundation in connection with the activities			l x
	Did the foundation file Form 1120-POL for this year?	1c	+	+-^-
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1	
	(1) On the foundation > \$ (2) On foundation managers > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers   \$		1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			·
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	┼	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	₩	X
5	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	ŀ		
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law 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	Х	<u></u>
	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	UT,	_		
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Genera			
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	۱	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		.T	T
-	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"		1	
	complete Part XIV			X
			+	<del>+</del>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		X

Form **990-PF** (2019)

Pai	T-VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If 'Yes," attach schedule See instructions	11_		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions,	12	<del></del>	<u> </u>
13	the state of the s	13	X	
	Website address ► N/A	0.0	-	
14	The books are in care of ► CORT_FIRTH Telephone no ► (385) 351	-83	/ <u> </u>	
	Located at ▶100 WEST TOWNE RIDGE PARKWAY SANDY, UT ZIP+4 ▶ 84070		· · ·	<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	4.0	162	X
	over a bank, securities, or other financial account in a foreign country?	16	L	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Par	the foreign country ►  rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
e C	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
4	,		163	110
ıa	During the year, did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		-	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days ) Yes X No			
b	olf 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		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<b>-</b>		
	were not corrected before the first day of the tax year beginning in 2019?	1c		Χ,
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years			
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			
	ail years listed, answer "No" and attach statement - see instructions )	2b		
c	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	·			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
_	at any time during the year?			
b	off "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			•
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	21		
	foundation had excess business holdings in 2019 )	3b	<b></b>	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
Þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	46		Х
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		

Pai	t VILE Statements Regarding Activities	tor Which Form	4720 May Be Req	uired (continued)			
5a	During the year, did the foundation pay or incur any amo	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	. Yes X No	,		
	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry or	n,			
	directly or indirectly, any voter registration drive?			. Yes X No	,		
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?		. Yes X No	,		,
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described in	n			
	section 4945(d)(4)(A)? See instructions	-			,		ŀ
	(5) Provide for any purpose other than religious, ch						
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	,		1
ь	If any answer is "Yes" to 5a(1)-(5), did any of the				,	1	1
	Regulations section 53 4945 or in a current notice regar			•	I		
	Organizations relying on a current notice regarding disas	-	·				
c	If the answer is "Yes" to question 5a(4), does the				_		}
·	because it maintained expenditure responsibility for the		•			1	
	If "Yes," attach the statement required by Regulations so	-					
6a	Did the foundation, during the year, receive any fun		actly to pay promiur	ne			
Va	on a personal benefit contract?			Yes X No	,		
ь	Did the foundation, during the year, pay premiums, dire			. — —	′   6ь		×
	If "Yes" to 6b, file Form 8870	city of indirectly, on a	personal benefit contre				<del></del>
7 a	At any time during the tax year, was the foundation a pa	arty to a prohibited tax	chalter transaction?	Yes X No			
/a b	If "Yes," did the foundation receive any proceeds or have						
	Is the foundation subject to the section 4960 tax on pay	•		0117	7b	<del> </del>	<del>                                     </del>
8		• • •		. Yes X No			
Da	remuneration or excess parachute payment(s) during the tVIII Information About Officers, Director					1	L
	and Contractors						
1	List all officers, directors, trustees, and foundate						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expen other al	se accor	unt, es
		devoted to position	enter -0-)	and deferred compensation			
ATC	H 3		0.	o.l			0.
				•			<del></del>
	Compensation of five highest-paid employees	(ather than thes	a included on line	1 coo instructu	one) If n	000	ontor
2	"NONE."	(other than thos	e included on mi	e i - see ilistructi	0115 <i>)</i> . 11 11	one,	enter
		(b) Title, and average		(d) Contributions to	(a) Evnos		
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expen other al	lowance	unt, es
				compensation			
	NONE						
	NONE						
		<del> </del>					
Tota	I number of other employees paid over \$50,000			<u> ▶      </u>	Form 99	A 55	
					Earm UQ	11.06	/20101

Form 990-PF (2019)

NONE

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	ign foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	5,618,189.
	Fair market value of all other assets (see instructions).	1c	
	Total (add lines 1a, b, and c)	1d	5,618,189.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d,		5,618,189.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions),	4	84,273.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4.		5,533,916.
6	Minimum investment return. Enter 5% of line 5	6	276,696.
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found		
	and certain foreign organizations, check here ▶ and do not complete this part )		076 606
1	Minimum investment return from Part X, line 6	1	276,696.
2 a	Tax on investment income for 2019 from Part VI, line 5 2a		
b	Income tax for 2019 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	276,696.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	276,696.
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	276,696.
Pai	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	1,633,845.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	15	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	
	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		1,633,845.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		1,633,845.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(a) reduction of tax in those years		ine roundation

Form 990-PF (2019)

Pa	rt XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2010 from Port VI	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
'	Distributable amount for 2019 from Part XI,	······································	· · · · · · · · · · · · · · · · · · ·	·	276,696.
_	line 7				270,090.
	Undistributed income, if any, as of the end of 2019				
	Enter amount for 2018 only				
	Total for prior years 20 17 ,20 16 ,20 15		·····		
	Excess distributions carryover, if any, to 2019			j	
	From 2014				
	From 2015				
	1 267 252			r	
	From 2017				
	From 2018	2 726 650		- •	* 1
	Total of lines 3a through e	2,736,650.			
4	Qualifying distributions for 2019 from Part XII, line 4 > \$ 1,633,845.				
а	Applied to 2018, but not more than line 2a		<u></u>		
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2019 distributable amount				276,696.
	Remaining amount distributed out of corpus	1,357,149.			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same				
	amount must be shown in column (a) )			<del> </del>	
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,093,799.		-	
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2019 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2020				
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 2014 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2020.  Subtract lines 7 and 8 from line 6a	4,093,799.			
10	Analysis of line 9	· · · · · · · · · · · · · · · · · · ·			
	Excess from 2015				
	Excess from 2016				
	Excess from 2017 1,267,253.				
	Excess from 2018 1,437,801.				
	Excess from 2019 1,357,149.				
<u>~</u>		<u></u>			

Pa	rt XIV Private Op	erating Foundations	(see instructions ai	nd Part VII-A, questi	on 9) 1	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	ating	
	foundation, and the ruling	g is effective for 2019, e	nter the date of the ruling		▶	
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 4942(j	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		
	justed net income from Part	(a) 2019	(b) 2018	(c) 2017	(d)/2016	(e) Total
	I or the minimum investment		<u> </u>			
	return from Part X for each					
	year listed					
D	85% of line 2a					<u> </u>
С	Qualifying distributions from Part					
а	XII line 4, for each year listed .  Amounts included in line 2c not				\\	
ŭ	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
	2d from line 2c					
3	Complete 3a, b, or c for the					-
а	'Assets' alternative test - enter					
	(1) Value of all assets					<u> </u>
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X					
	line 6 for each year listed  Support" alternative test - enter	••••••	/			
٠	(1) Total support other than					
	gross investment income					
	(interest dividends, rents payments on securities					
	loans (section 512(a)(5)),					
	or royallies)	/				
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(J)(3)(B)(III)			<del></del>		
	(3) Largest amount of sup- port from an exempt					
	organization	/				
	(4) Gross investment income.	(				
Pa				only if the founda	ition had \$5,000 o	r more in assets at
		uring the year - see				
1	Information Regarding					
а	List any managers of					ed by the foundation
	before the close of any	tax year (but only if th	ey nave contributed n	nore than \$5,000) (Se	ee section 507(d)(2))	
	N/A	AA				
b	List any managers of					/ large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest	
	N/A					
2	Information Regarding	g Contribution, Grant	Gift, Loan, Scholarsh	ip, etc., Programs:		<u></u>
	Check here ► X if t	he foundation only i	makes contributions	to preselected chari	table organizations a	and does not accept
	unsolicited requests for	or funds. If the found:	ation makes gifts, gra	nts, etc., to individua	ls or organizations ur	ider other conditions,
	complete items 2a, b, o	c, and d. See instructio	ns			
а	The name, address, a	nd telephone number	or email address of th	e person to whom app	lications should be add	ressed
L	The form in which	ligations should be suit	mitted and internetion	a and materials the	ماد مام ماد مام	
D	The form in which appl	iications snould be SU	omitica ana imormatio	m and materials they	anoulu include	
	Any submission doodle	nec	<del> </del>			
C	Any submission deadli	1100				
	Any contrictions on the	mitations on augusts	auch on hu con	anhuad areas sheets	ble fields limbs of	
a	Any restrictions or li	ilinations on awards.	such as by geogra	apilicai areas, charita	ible fields, kinds of	institutions, or other

Page **11** 

Form 990 PF (2019) Part XV Supplementary Information (	(continued)	<del>_</del> -		Page 11
3 Grants and Contributions Paid Dur	ing the Year or Ann	royed for	Future Payment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual	Foundation	Output de la contraction de la	T
Name and address (home or business)	any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	. corp.cin	-	
,				
ATCH 4				
				•
				ŀ
	,			
			:	
		-		j
Total			▶ 3a	1,630,429.
b Approved for future payment				
, ,				
				Ì
T-1-1		L	<u> </u>	
Total				1

r gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp
Program service revenue NONE					(See instructions
					<del> </del>
					<del></del>
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments -	· ··· = ··		-		55,7
Dividends and interest from securities					
Net rental income or (loss) from real estate  Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Sain or (loss) from sales of assets other than inventory					
let income or (loss) from special events	<u> </u>				
Gross profit or (loss) from sales of inventory			1		
Other revenue a					
					·
Subtotal Add columns (b), (d), and (e)					
				13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the substitution of the substitu	ulations)	ccomplishment of I	Exempt Pur	poses	55,7
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calc	ulations) s to the A	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Fotal, Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculated the color of the col	ulations) s to the A	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total, Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the columns of activities of a	ulations) s to the A	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcont XVI-B  Relationship of Activitie  e No.  Explain below how each activity accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total, Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the substitution of activities of the substitution of the substituti	es to the A ty for which	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcont XVI-B  Relationship of Activitie  e No.  Explain below how each activity accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities No. Explain below how each activity accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities No. Explain below how each activity accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities No. Explain below how each activity accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses  e) of Part XVI-A contribu	55,7
ubtotal Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calc  t XVI-B Relationship of Activitie  a No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
ubtotal Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  t XVI-B Relationship of Activitie  a No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
inbtotal Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  t XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcont XVI-B  Relationship of Activitie  e No.  Explain below how each activity accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  TXVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calce  IT XVI-B Relationship of Activitie  e No. Explain below how each activity  accomplishment of the foundation	es to the A ty for which	ccomplishment of I	Exempt Purp	poses e) of Part XVI-A contribu	55,7

19)	WCF	FOUNDATION						81-2893	553	Pag	ge 13
Information Organization		Transfers to	and	Transaction	ns and	Relationships	With	Nonchar	itable	Exe	∍mpt
organization dir	ectly or indi	rectly engage i	n any o	of the following	g with	any other organiz	zation o	lescribed		Yes	No

		Organizations										-
ın	sec	organization directl tion 501(c) (other					•				Yes	No
	_	rations?										
		ers from the reportin	-							4		
•		sh										
	•	ransactions								1a(2)	<del></del>	
		es of assets to a noi	ncharitable exe	mpt organization.						16(1)		
		chases of assets fro										
		ntal of facilities, equi										
(4)	) Rei	mbursement arrange	ements	. <i></i>						1b(4)		
•		ins or loan guarantee										
		formance of service		_							ļ	
		g of facilities, equipm									Ĺ	
		answer to any of the fitted and the										
va	lue ii	n any transaction or	sharing arran	gement, show in	column (d) t	he value c	of the goods	, other a	assets, or s	ervice	s rec	eived
(a) Line i	no	(b) Amount involved	(c) Name of	noncharitable exempt	organization		ription of transf	ers, transa	ctions, and sha	aring arra	angeme	nts
		N/A			<del> </del>	N/A						
	-											
			-			 						
	+								···			
			<u> </u>									
								• •				
					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							******
	_											
	-											
	-+									-		<del></del> -
	+											
2a Is	the	foundation directly of	or indirectly at	filiated with, or	related to, on	e or more	tax-exempt	organiz	ations			
de	escrib	ped in section 501(c)	(other than se	ction 501(c)(3))	or in section 5	277				Y	es 🛚 🗆	] No
b If	"Yes	" complete the follow	wing schedule			·		<del></del>				
		(a) Name of organization	า	(b) Type	of organization		(	c) Descrip	tion of relation	ship		
									<del></del>			
			***************************************									*******
				<u> </u>				-				
		penalties of perjury, I decla						the best	of my knowled	ge and t	elief it	is true
Sign	correc	t and complete Declaration of	preparer (other than	taxpayer) is based on all i	ntormation of which	preparer nas an	iy knowleage		May the IR	S deque	e this	coluca
Here		// (M 100m	_	11/15,	/2020	TREAS	URER			reparer s		below?
liele	Sign	fature of officer or trustee		Date		Title			See instruction	15	Yes	No
	V	Print/Type preparer's nar	me	Preparer's signa	nture		Date	Ch	eck ıf	PTIN		
Paid -							<u></u>	1	f-employed			
Prepa		Firm's name						Firm's EIN	<b>&gt;</b>			
Use O	nly	Firm's address										_
		<u> </u>						Phone no				
									Fo	orm 990	J-PF	(2019)

## 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

2019

Employer identification number

WCF FOUNDATION 81-2893553 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

JSA

Employer identification number 81-2893553

Part I	Contributors (see instructions) Use duplicate cop	ies of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	WCF MUTUAL INSURANCE COMPANY  100 WEST TOWNE RIDGE PARKWAY  SANDY, UT 84070	\$\$	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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization WCF FOUNDATION

Employer identification number 81-2893553

Part II	Noncash Property (see instructions) Use duplicate copies	of Part II if additional space is ne	eded
(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
		\ \$	
(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

Employer identification number

		81-2893553
Part III	Exclusively religious, charitable, etc., contributions to organizations described	l in section 501(c)(7), (8), or

		ions completing Par e year (Enter this in	t III, enter the total formation once S	Complete columns (a) through (e) and of exclusively religious, charitable, etc. ee instructions ) ► \$
(a) No. from	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
Part I	(2) 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			(a) Description of now girls field
		(e) Transf	er of gift	
	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) Transi nd ZIP + 4	_	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
		(e) Transf	er of gift	<u></u>
	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) Transi nd ZIP + 4	_	nship of transferor to transferee
		· · · · · · · · · · · · · · · · · · ·		

PART I - OTHER PROFESSIONAL FEES FORM 990PF, REVENUE AND

EXPENSES PER BOOKS

1,340.

1,340.

CHARITABLE PURPOSES

1,340.

INSURANCE

DESCRIPTION

1,340.

TOTALS

ATTACHMENT 1

81-2893553

ATTACHMENT 2

PART I - OTHER EXPENSES FORM 990PF, REVENUE AND EXPENSES PER BOOKS

2,076. CHARITABLE PURPOSES

DESCRIPTION BANK FEES

2,076.

TOTALS

ATTACHMENT 2

6921NL T47F 11/5/2020 12:14:33 PM V 19-7.5F

AND TRUSTEES

PART VIII - LIST OF OFFICERS, DIRECTORS,

FORM 990PF,

ATTACHMENT

EXPENSE ACCT

CONTRIBUTIONS

ATTACHMENT 3

ALLOWANCES AND OTHER BENEFIT PLANS TO EMPLOYEE COMPENSATION TITLE AND AVERAGE HOURS PER VICE PRESIDENT AND DIRECTOR WEEK DEVOTED TO POSITION PRESIDENT AND DIRECTOR SECRETARY AND DIRECTOR GRAND TOTALS TREASURER DIRECTOR DIRECTOR 100 WEST TOWNE RIDGE PARKWAY NAME AND ADDRESS SANDY, UT 84070 DALLAS BRADFORD LANE SUMMERHAYS SANDY, UT 84070 PEGGY LARSEN SCOTT WESTRA DENNIS LLOYD RAY PICKUP

81-2893553

ATTACHMENT 4

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNITED WAY OF SALT LAKE 257 EAST 200 S, STE 300 SALT LAKE CITY, UT 84111	DG.	TO IMPROVE POVERTY, POOR HEALTH AND EDUCATIONAL ACHIEVEMENT	18, 362
THE DAYS OF '47, INC PO BOX 112287 SALT LAKE CITY, UT 84147-2287	• PC	HONOR UTAH'S EARLY AND MODERN PIONEERS	25, 000
TURN COMMUNITY SERVICES, INC 423 WEST 800 SOUTH, STE A200 SALT LAKE CITY, UT 84110-1287	PC	PATIENT LIFT SYSTEMS	26,000
JUVENILE DIABETES RESEARCH FOUNDATION 132 SOUTH 600 EAST, STE 100 SALT LAKE CITY, UT 84102	PC	FIND A TYPE 1 DIABETES CURE	30, 000
JUNIOR LEAGUE OF SALT LAKE CITY INC 526 EAST 300 SOUTH SALT LAKE CITY, UT 84102	PC	CARE FAIR	2,000
GUADALUPE CENTER EDUCATIONAL PROGRAMS INC 1385 N 1200 W SALT LAKE CITY, UT 84116	PC	CHANGE MINORITY LIVES THROUGH EDUCATION	2,000

81-2893553

ATTACHMENT 4 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE WOMEN'S LEADERSHIP INSTITUTE 175 EAST 400 SOUTH SUITE 600 SALT LAKE CITY, UT 84111	SA SA	ELEVATEHER CHALLENGE	25,000
UPLIFT UTAH FAMILIES FOUNDATION PO BOX 1562 OGDEN, UT 84402	PC	STRENGTHEN PARENT/CHILD RELATIONSHIPS, PROVIDE TOOLS AND RESOURCES THAT IMPROVE PARENTING SKILLS, AND HELP CHILDREN MAKE SAFE AND HEALTHY CHOICES	25,000
LOVELAND LIVING PLANET AQUARIUM 12033 S LONE PEAK PARKWAY DRAPER, UT 84020	P.C.	LOVELAND LIVING PLANET AQUARIUM	10,000
JUNIOR ACHIEVEMENT OF UTAH INC 515 SOUTH 700 EAST, SUITE 1F SALT LAKE CITY, UT 84102	PC PC	CAPITAL CAMPAIGN UTAH COUNTY	250,000
JUNIOR ACHIEVEMENT OF UTAH INC 515 SOUTH 700 EAST SUITE 1F SALT LAKE CITY, UT 84102	PC	JA CITY STOREFRONT SPONSORSHIP PROMOTING TO YOUTH CRITICAL THINKING, COLLABORATION, CREATIVITY, PROBLEM SOLVING AND COMMUNICATION SKILLS	20,000
ROCKY MOUNTAIN CENTER FOUNDATION 391 CHIPTEA WAY SUITE C SALT LAKE CITY, UT 84108	PC	DR PAUL S RICHARDS WORKPLACE SCHOLARSHIPS	16,500

			ATTACHMENT 4 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	-	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FOUNDATION FOR PRIVATE ENTERPRISE EDUCATION 100 W TOWNE RIDGE PARKWAY SANDY, UT 84070	PC	UTAH BUSINESS WEEK SCHOLARSHIPS	15,000
COMMUNITY NURSING SERVICES 2830 S REDWOOD ROAD SUITE A WEST VALLEY CITY, UT 84119	Q	ART AND SOUP EVENT	10,000
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS, TX 75231	O <sub>4</sub>	GO RED FOR WOMEN CAMPAIGN	10,000
KOSTOPULOS DREAM FOUNDATION 4180 E EMIGRATION CANYON SALT LAKE CITY, UT 84108	O.	SEND A KID TO CAMP GALA	20,000
CENTERPOINT LEGACY THEATER 525 N 400 WEST CENTERVILLE, UT 84014	PC	PRODUCTION OF MY FAIR LADY AND NEWSIES	25,000
UTAH FOUNDATION 150 SOUTH STATE STREET, SUITE 444 SALT LAKE CITY, UT 84111	PC	SUPPORT THOROUGH, WELL-SUPPORTED RESEARCH THAT HELPS POLICYMAKERS, BUSINESS AND COMMUNITY LEADERS, AND CITIZENS BETTER UNDERSTAND COMPLEX ISSUES AND PROVIDING PRACTICAL, WELL-REASONED RECOMMENDATIONS	THAT 7,500 Y DMPLEX ONED

ATTACHMENT 4 (CONT'D)

WCF FOUNDATION V 19-7 SF

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FAMILY PROMISE OF OGDEN	2	SHELTER, SAFETY, AND SUSTENANCE TO FAMILIES	10,000
PO BOX 13818		SEARCHING FOR WORK AND HOUSING	
OGDEN, UT 84412			
FOREVER YOUNG FOUNDATION	O.	INDIVIDUALS WITH ADAPTIVE NEEDS THROUGH	5,000
9385 S SNOWBIRD CENTER DRIVE		RECREATIONAL, EDUCATIONAL, AND SOCIAL MEANS	
SNOWBIRD, UT 84092			
SUCCESS IN EDUCATION FOUNDATION	PC PC	TO ENHANCE AND ENRICH SCHOLASTIC EXPERIENCES BY	10,000
111 E BROADWAY STE 900		CREATING, ENABLING, AND INTEGRATING PROGRAMS THAT	
SALT LAKE CITY, UT 84115		CHANGE THE WORLD	
MAKE A WISH FOUNDATION OF UTAH	P.C.	GRANT THE WISH OF A CHILD DIAGNOSED WITH A	6,514
771 EAST WINCHESTER		LIFE-THREATENING MEDICAL CONDITION IN THE UNITED	
MURRAY, UT 84107		STATES	
SCHOLARSHIPS	PC	LEGACY OF LEARNING SCHOLARSHIPS AWARDED TO FAMILY	115,571
		MEMBERS OF DECEASED WORKERS' PAID DIRECTLY TO	
		COLLEGES	
MAKE A WISH FOUNDATION OF SOUTHERN NEVADA	. 54	GRANT THE WISH OF A CHILD DIAGNOSED WITH A	10,000
9950 COVINGTON CROSS DR		LIFE-THREATENING MEDICAL CONDITION IN THE UNITED	
LAS VEGAS, NV 89144		STATES	

ATTACHMENT 4 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
СНАВАD БИВАVITCH ОF UTAH	PC	SUPPORT PROJECT H E A R T, A YOUTH OUTREACH	25,000
1760 SOUTH 1100 EAST		PROGRAM	
SALT LAKE CITY, UT 84105			
THE GOOD SAWARITAN FOUNDATION	PC	EMPOWER REFUGEES AND OTHERS TO OBTAIN THE MEANS,	10,000
6925 UNION PARK CENTER SUITE 500		SKILLS, EDUCATION AND TRAINING LEADING TO	
COTTONWOOD, UT 84047		EMPLOYMENT, INDEPENDENCE AND SELF-RELIANCE	
ROCKY MOUNTAIN CENTER FOR OCCUPATIONAL HEALTH	PC	SUPPORT THE NEED FOR COMPREHENSIVE OCCUPATIONAL	250,000
391 CHIPETA WAY SUITE C		AND ENVIRONMENTAL SAFETY AND HEALTH PROGRAMS IN	
SALT LAKE CITY, UT 84108		THE WEST	
WESTMINSTER COLLEGE	PC	HONORS COLLEGE STATEWIDE ESSAY CONTEST	5,000
1840 S 1300 E			
SALT LAKE CITY, UT 84105			
THE SANDY CHAMBER ECONOMIC DEVELOPMENT FOUNDATION	PC	TO RECOGNIZE OUTSTANDING ACHIEVEMENT BY HIGH	7,000
35 EAST 9270 SOUTH		SCHOOL SENIORS	
SANDY, UT 84070			
THE SANDY CLUB	PC	TO PROVIDE HEALTHY AFTER SCHOOL SNACKS, ACTIVITY	10,000.
450 EAST 8680 SOUTH		SUPPLIES, AND YOUTH INCENTIVES	
SANDY, UT 84070			

WCF FOUNDATION

81-2893553

ATTACHMENT 4 (CONT'D) FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	AMOUNT	250,000	115,000	23, 303	25,000.	20,000	25,000
	PURPOSE OF GRANT OR CONTRIBUTION	ESTABLISHMENT OF A MINOR IN THE WOODBURY SCHOOL OF BUSINESS IN RISK MANAGEMENT AND INSURANCE PROGRAM	CHANGING THE ODDS CAMPAIGN	SUPPORT THE NOAH'S ARK RAINY DAY FUND FOR CHILDREN WITH NEUROLOGICAL CONDITIONS REQUIRING SPECIALIZED CARE AND EQUIPMENT	SPIKE 150 COMMISSION	HEART & STROKE WALK	LEAVITT CHARITY CUP
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	PC	PC	PC	COV	PC	Q
	RECIPIENT NAME AND ADDRESS	UTAH VALLEY UNIVERSITY FOUNDATION 800 WEST UNIVERSITY PKWY MS 111 OREM, UT 84058	UNITED WAY OF SALT LAKE 257 E 200 S STE 300 SALT LAKE CITY, UT 84111	NEUROWORX 90 W ALBION VILLAGE WAY SANDY, UT 84070	STATE OF UTAH HERITAGE AND ARTS 300 S RIO GRANDE STREET SALT LAKE CITY, UT 84101	AMERICAN HEART ASSOCIATION 465 SOUTH 400 EAST STE 110 SALT LAKE CITY, UT 84111	CHARITABLE EVENTS CORPORATION PO BOX 1027 CEDAR CITY, UT 84721

ATTACHMENT 4 (CONT'D)

EXPERIENCES, AND PROVIDE THOUGHT LEADERSHIP THROUGH INNOVATIVE RESEARCH AND DISCOVERY

WCF FOUNDATION

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	70	STRENGTHENING FAMILIES THROUGH SUCCESSFUL 5,000 EMPLOYMENT	DINNER FOR BEN MCADAMS 5,000	PROVIDES COMFORT, HAPPINESS, AND MONETARY SUPPORT TO CRITICALLY ILL OR INJURED CHILDREN THROUGH EVENTS FOCUSED AROUND THE SHARED PASSION FOR THE AUTOMOTIVE COMMUNITY	WEATHER-RELATED CRISIS IN OKLAHOMA 5,000	DEVELOP AND SHARE ECONOMIC, DEMOGRAPHIC, AND PUBLIC POLICY RESEARCH THAT SHEDS LIGHT AND HELPS PEOPLE MAKE INFORMED DECISIONS WE ALSO ASSIST
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	D <sub>d</sub>	PC	29	O A	PC	PC
RECIPIENT NAME AND ADDRESS	WARRIOR RISING 11614 S ANNA EMILY DR SOUTH JORDAN, UT 84095	PEOPLE HELPING PEOPLE 205 NORTH 400 WEST SALT LAKE CITY, UT 84103	CIRCLES SALT LAKE 68 SOUTH MAIN STREET 8TH FLOOR SALT LAKE CITY, UT 84101	CARS 4 KIDS FOUNDATION INC 49 EAST 3300 SOUTH SALT LAKE CITY, UT 84115	AMERICAN RED CROSS 6616 SOUTH 900 EAST SALT LAKE CITY, UT 84121	KEM C GARDNER POLICY INSTITUTE 411 E SOUTH TEMPLE SALT LAKE CITY, UT 84111

ATTACHMENT 4 (CONT'D)

YEAR	
THE	l
DURING	
PAID	l
GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	
AND	
GRANTS	
, ×	l
PART XV	
990PF,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SEASON OF CARE	I	EMPLOYEES DONATED TO SEASON OF CARE CAMPAIGN TO SUPPORT FAMILIES OF DECEASED WORKERS	10,000
UTAH FOOD BANK 3150 SOUTH 900 WEST SALT LAKE CITY, UT 84119	2	FOUNDATION MATCH OF EMPLOYEE DONATIONS	7,646
AMERICAN CANCER SOCIETY 375 EAST 100 SOUTH SALT LAKE CITY, UT 84111	2	FOUNDATION MATCH OF EMPLOYEE DONATIONS	7, 321
HUMANE SOCIETY OF UTAH PO BOX 573659 SALT LAKE CITY, UT 84157	2	FOUNDATION MATCH OF EMPLOYEE DONATIONS	5,976
ODYSSEY HOUSE OF UTAH 344 E 100 S STE 301 SALT LAKE CITY, UT 84111	22	FOUNDATION MATCH OF EMPLOYEE DONATIONS	100
ROAD HOME 210 SOUTH RIO GRANDE SALT LAKE CITY, UT 84101	PC	FOUNDATION MATCH OF EMPLOYEE DONATIONS	3, 330

V 19-7.5F

L C C C C	
2	2
,	
	2
FERGUSTION	
1	

81-2893553

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 4 (CONT'D)

AMOUNT	1, 202	4,104	5, 000	5,000	2, 000
PURPOSE OF GRANT OR CONTRIBUTION	FOUNDATION MATCH OF EMPLOYEE DONATIONS	FOUNDATION MATCH OF EMPLOYEE DONATIONS	CODE A THON ALL GIRLS ONLY	2019 LEGACY OF LIFE	UNITED NATIONS 68TH CIVIL SOCIETY CONFERENCE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PC .	S A	PC	22	PC C
RECIPIENT NAME AND ADDRESS	BIG BROTHERS BIG SISTERS OF UT 2121 SOUTH STATE STREET STE 201 SALT LAKE CITY, UT 84115	CATHOLIC COMMUNITY SERVICES 2570 WEST 1700 SOUTH SALT LAKE CITY, UT 84104	SUCCESS IN EDUCATION FOUNDATION 111 E BROADWAY STE 900 SALT LAKE CITY, UT 84115	INTERMOUNTAIN RESEARCH AND MEDICAL FOUNDATION 5121 SOUTH COTTONWOOD DRIVE MURRAY, UT 84157	UTAH ARTS & CULTURE COALITION 175 S WEST TEMPLE STE 30 SALT LAKE CITY, UT 84101

1,630,429