# Form **990**

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Go to www.irs.gov/Form990 for instructions and the latest information.

| Α                       |               |               | lendar year, or tax year beginning                               |                                    | , and e          |                               |                              |
|-------------------------|---------------|---------------|--|------------------------------------|------------------|-------------------------------|------------------------------|
| В                       | Check if a    | applicable:   | C Name of organization Southern Uta                              | h Wilderness Alliance              |                  | D Employer                    | r identification number      |
| Ш                       | Address       | change        | Doing business as  |                                    |                  |                               |                              |
| $\Box$                  |               |               | Number and street (or P.O. box if mail is not                    | delivered to street address)       | Room/suite       | 94-2936961                    | 1                            |
| Ш                       | Name cha      | ange          | 425 East 100 South   |                                    |                  | E Telephone                   | e number                     |
|                         | Initial retu  | ırn           | City or town   | State                              | ZIP code         | 004 400 04                    | 04                           |
| $\equiv$                |               |               | Salt Lake City   | UT                                 | 84111            | 801-486-31                    | 01                           |
| Ш                       | Final return  | /terminated   | Foreign country name Foreign                                     | province/state/county              | Foreign postal   | code                          |                              |
|                         | Amended       | l return      |  |                                    |                  | G Gross rec                   | eipts \$ 21,986,442          |
| $\Box$                  |               |               | F. Name and address of universal officers                        |                                    |                  |                               |                              |
| Ш                       | Applicatio    | n pending     | F Name and address of principal officer:                         |                                    |                  | H(a) Is this a group return f |                              |
|                         |               |               | SCOTT GROENE 425 East 100 Sou                                    | ith, Salt Lake City, UT 8          | 4111             | H(b) Are all subordinate      | , — —                        |
| 1                       | Tax-exer      | npt status:   | X 501(c)(3) 501(c) (   | (insert no.) 4947(a)(1)            | or 527           | If "No," attach a lis         | st. See instructions         |
| _                       |               | ·             | w.suwa.org   | , (///                             |                  | H(a) Croup examption          | number                       |
|                         | Website       |               |  |                                    |                  | H(c) Group exemption I        | number                       |
| K                       | Form of       | organization  | n: X Corporation Trust Associa                                   | ation Other                        | L Yea            | ar of formation: 1983         | M State of legal domicile:   |
|                         | art I         | Sui           | mmary  |                                    | •                |                               | -                            |
|                         | 1             |               | lescribe the organization's mission or                           | most significant activities        | s: The           | preservation of the           | outstanding                  |
| 9                       |               |               | ess at the heart of the Colorado Platea                          |                                    |                  |                               |                              |
| ä                       |               |               | lands in their natural state for the bei                         |                                    | ort, and the r   | nanagamant                    |                              |
| Ę                       |               |               |  |                                    |                  |                               |                              |
| Š                       | 2             | Check th      |  | continued its operations           |                  | of more than 25%              | 1 1                          |
| Ö                       | 3             |               | of voting members of the governing l                             |                                    |                  |                               | 3 11                         |
| ος<br>V                 | 4             | Number        | of independent voting members of the                             | e governing body (Part )           | VI, line 1b) .   |                               | 4 11                         |
| Ęį                      | 5             | Total nu      | ımber of individuals employed in caler                           | ndar year 2022 (Part V, I          | ine 2a) .   .    |                               | 5 36                         |
| Activities & Governance | 6             | Total nu      | imber of volunteers (estimate if neces                           | sary)                              |                  |                               | 6 25                         |
| Ac                      | 7a            |               | nrelated business revenue from Part V                            |                                    | <b>.</b>         |                               | 7a                           |
|                         | b             |               | elated business taxable income from                              |                                    |                  |                               | 7b                           |
|                         | -             | TTO CULLIC    | nated business taxable meetine from                              | - CHII 666 1, 1 GIT1, IIII6        |                  | Prior Year                    | Current Year                 |
|                         | 8             | Contribu      | utions and grants (Part VIII, line 1h) .                         |                                    | ,                |                               | 9,819 4,295,733              |
| ĭe                      |               |               | n service revenue (Part VIII, line 2g) .                         |                                    |                  | 7,700                         | 7,010                        |
| Revenue                 | 9             |               |  |                                    |                  | 4.400                         | 2 000                        |
| Ş.                      | 10            |               | ent income (Part VIII, column (A), line                          |                                    |                  |                               | 3,639 145,561                |
|                         | 11            |               | evenue (Part VIII, column (A), lines 5,                          |                                    |                  |                               | 0,927 9,873                  |
|                         | 12            |               | renue—add lines 8 through 11 (must equ                           |                                    |                  |                               | 4,385 4,451,167              |
|                         | 13            |               | and similar amounts paid (Part IX, col                           |                                    |                  | 430                           | 0,360 371,783                |
|                         | 14            | Benefits      | s paid to or for members (Part IX, colu                          | mn (A), line 4)                    |                  |                               |                              |
| S                       | 15            | Salaries,     | , other compensation, employee benefits                          | (Part IX, column (A), lines        | s 5–10) .    .   | 2,409                         | 9,839 2,501,054              |
| nse                     | 16a           | Professi      | ional fundraising fees (Part IX, column                          | n (A), line 11e)                   |                  |                               |                              |
| Expenses                | b             |               | ndraising expenses (Part IX, column (                            |                                    | 234,212          |                               |                              |
| ŭ                       | 17            |               | xpenses (Part IX, column (A), lines 11                           |                                    |                  | 1,290                         | 0,887 1,625,043              |
|                         | 18            |               | penses. Add lines 13–17 (must equal                              |                                    |                  |                               | 1,086 4,497,880              |
|                         | 19            |               | e less expenses. Subtract line 18 from                           | . ,                                | , i              |                               | 3,299 -46,713                |
| - 4                     | 15            | revenue       | c leas expenses, edibilities no non                              | n line 12                          |                  | Beginning of Current          | 1                            |
| Net Assets or           | 20            | Total ac      | sets (Part X, line 16)   |                                    | ,                | 25,303                        |                              |
| Asse                    | 20            |               |  |                                    |                  | 20,300                        |                              |
| t f                     | 21            |               |  |                                    |                  | 05.000                        | 204,538                      |
|                         |               |               | ets or fund balances. Subtract line 21                           | irom line 20                       |                  | 25,303                        | 3,976 21,989,298             |
|                         | art II        |               | nature Block   |                                    |                  |                               |                              |
|                         |               |               | y, I declare that I have examined this return, inclu             |                                    |                  |                               |                              |
| and                     | bellet, it is | s true, corre | ect, and complete. Declaration of preparer (other                | than officer) is based on all info | rmation of which | n preparer nas any knowi      | eage.                        |
| Sig                     | n             |               |  |                                    |                  |                               |                              |
| Here                    |               |               | ure of officer   |                                    |                  | Date                          |                              |
|                         | . •           | SCO           | TT GROENE  |                                    | EXE              | CUTIVE DIRECTO                | R                            |
|                         |               |               | Type or print name and title                                     |                                    |                  |                               |                              |
|                         |               | Print         | t/Type preparer's name   | Preparer's signature               |                  | Date                          | PTIN                         |
| Pa                      | id            |               | N/ OODODN  | DIOK CODODA                        |                  |                               | Check if                     |
|                         | eparer        | . RIC         | CK OSBORN  | RICK OSBORN                        |                  | 9/8/2023 s                    | self-employed P00008049      |
|                         | parer         |               |  |                                    |                  |                               |                              |
| US                      | e Onl         | / Firm        | n's name RICK OSBORN CPA, PC                                     | ;                                  |                  | Firm's EIN                    | 87-0575007                   |
| US                      | e Only        | <i>'</i>      | n's name RICK OSBORN CPA, PC<br>n's address 7070 SOUTH 2300 EAST |                                    | Y, UT 84121      |                               | 87-0575007<br>(801) 943-4442 |

| F0111 990 (2022) | Southern Gtair Wilderness Alliance           |  |
|------------------|--|--|
| Part III         | Statement of Program Service Accomplishments |  |

|    | Check if Schedule O contains a response or note to any line in this Part III.............   | X         |
|----|---|-----------|
| 1  | Briefly describe the organization's mission:  |           |
|    | The mission of the organization is the preservation of the outstanding wilderness at the  |           |
|    | heart of the Colorado Plateau and Utah's West Desert, and the management of these lands in  |           |
|    | their natural state for the benefit of all Americans.   |           |
| 2  | Did the organization undertake any significant program services during the year which were not listed on  |           |
|    | the prior Form 990 or 990-EZ?   | X No      |
|    | If "Yes," describe these new services on Schedule O.  |           |
| 3  | Did the organization cease conducting, or make significant changes in how it conducts, any program  |           |
|    | services?   | X No      |
| _  | If "Yes," describe these changes on Schedule O.   |           |
| 4  | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,   |           |
|    | the total expenses, and revenue, if any, for each program service reported.   |           |
|    | and total expenses, and revenue, if any, for each program control reported.   |           |
| 4a | (Code: ) (Expenses \$ 2,300,396 including grants of \$ ) (Revenue \$  | )         |
|    | WILDERNESS: Distributed prepared bulletins and researched wilderness topics. Examined laws and  |           |
|    | policies that control these resources and provided information gained to the public. Facilitated  |           |
|    | citizen engagement with state and federal governmental agencies to educate decision-makers.   |           |
|    | Maintained and grew external communications with public through social media campaigns, Engaged   |           |
|    | with news media to educate the public and further build public support.   |           |
|    |   |           |
|    |   |           |
|    |   |           |
|    |   |           |
|    |   |           |
|    |   |           |
| 41 |   |           |
| 4b | (Code: ) (Expenses \$ 890,104 including grants of \$ ) (Revenue \$  | )         |
| 46 | OFF ROAD VEHICLE (ORV): Researched the legal framework for the ORV issue, performed on-the-ground   | )<br>     |
| 4b | OFF ROAD VEHICLE (ORV): Researched the legal framework for the ORV issue, performed on-the-ground surveys of ORV routes and use, and assessed agency compliance with federal statutes. Educated the   | )<br>     |
| 4b | OFF ROAD VEHICLE (ORV): Researched the legal framework for the ORV issue, performed on-the-ground surveys of ORV routes and use, and assessed agency compliance with federal statutes. Educated the public, media and decision-makers on the potential impacts of ORV use on natural and cultural   | )<br>     |
| 46 | OFF ROAD VEHICLE (ORV): Researched the legal framework for the ORV issue, performed on-the-ground surveys of ORV routes and use, and assessed agency compliance with federal statutes. Educated the public, media and decision-makers on the potential impacts of ORV use on natural and cultural resources on public lands, and various feasible and reasonable solutions.   | )<br><br> |
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| 4c | OFF ROAD VEHICLE (ORV): Researched the legal framework for the ORV issue, performed on-the-ground surveys of ORV routes and use, and assessed agency compliance with federal statutes. Educated the public, media and decision-makers on the potential impacts of ORV use on natural and cultural resources on public lands, and various feasible and reasonable solutions.  (Code: ) (Expenses \$ 338,636 including grants of \$ ) (Revenue \$ - RESOURCE MANAGEMENT PLANS (RMP): Submitted written comments, pursuant to Federal Register notices, for draft RMP draft National Conservation Plan, draft Wilderness Plan, and draft Travel Management Plans. Examined laws and policies that control public lands and resources, conducted meetings with state and federal agency staff, consulted with scientists for better management of natural and cultural resources, and provided information to the public. | )         |
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| Part   | Checklist of Required Schedules  |             | 1   |    |
|--------|--|-------------|-----|----|
|        | 1 11 11 11 11 11 11 11 11 11 11 11 11 1  |             | Yes | No |
| 1      | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"  |             | ~   |    |
| 2      | complete Schedule A  | 2           | X   |    |
| 2<br>3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to   |             | ^   |    |
| 3      | candidates for public office? If "Yes," complete Schedule C, Part I  | 3           |     | Х  |
| 4      | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)  | 3           |     | ^  |
| -      | election in effect during the tax year? If "Yes," complete Schedule C, Part II   | 4           | Х   |    |
| 5      | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.   | _           |     |    |
| Ū      | assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III  | 5           |     | Х  |
| 6      | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors  | Ů           |     |    |
|        | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If  |             |     |    |
|        | "Yes," complete Schedule D, Part I   | 6           |     | Х  |
| 7      | Did the organization receive or hold a conservation easement, including easements to preserve open space,  |             |     |    |
|        | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7           |     | Х  |
| 8      | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"  |             |     |    |
|        | complete Schedule D, Part III  | 8           |     | Х  |
| 9      | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a  |             |     |    |
|        | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt  |             |     |    |
|        | negotiation services? If "Yes," complete Schedule D, Part IV   | 9           |     | Χ  |
| 10     | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments   |             |     |    |
|        | or in quasi endowments? If "Yes," complete Schedule D, Part V  | 10          | Χ   |    |
| 11     | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,   |             |     |    |
|        | VII, VIII, IX, or X, as applicable.  |             |     |    |
| а      | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  | 110         | ~   |    |
| h      | Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more  | 11a         | ^   |    |
| b      | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII   | 11b         |     | Х  |
| c      | Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more   | 110         |     |    |
| ·      | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  | 11c         |     | Х  |
| d      | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets  | 1.0         |     |    |
| _      | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d         |     | Х  |
| е      | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  | 11e         | Χ   |    |
|        | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses  |             |     |    |
|        | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X   | 11f         | Χ   |    |
| 12a    | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  |             |     |    |
|        | Schedule D, Parts XI and XII   | 12a         |     | Χ  |
| b      | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"  |             |     |    |
|        | and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b         |     | Χ  |
| 13     | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13          |     | Χ  |
| 14a    | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a         |     | Χ  |
| b      | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,   |             |     |    |
|        | fundraising, business, investment, and program service activities outside the United States, or aggregate  | 441.        |     | V  |
| 45     | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.  | 14b         |     | Х  |
| 15     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV. | 15          |     | Х  |
| 16     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other   | 13          |     | ^  |
| 10     | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.   | 16          |     | Х  |
| 17     | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services  | -10         |     |    |
| .,     | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions   | 17          |     | Х  |
| 18     | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on  | <u> </u>    |     |    |
| . •    | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II   | 18          |     | Х  |
| 19     | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?   |             |     |    |
|        | If "Yes," complete Schedule G, Part III.   | 19          |     | Х  |
| 20a    | Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>   | 20a         |     | Х  |
|        | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | <b>20</b> b |     |    |
| 21     | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or  |             |     |    |
|        | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  | 21          | Χ   |    |

| Par     | t IV Checklist of Required Schedules (continued)   |               |            |              |
|---------|--|---------------|------------|--------------|
|         |  |               | Yes        | No           |
| 22      | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on  |               |            |              |
|         | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  | 22            |            | Х            |
| 23      | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the   |               |            |              |
|         | organization's current and former officers, directors, trustees, key employees, and highest compensated  |               |            |              |
|         | employees? If "Yes," complete Schedule J   | 23            | Χ          |              |
| 24a     | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than  |               |            |              |
|         | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines  |               |            |              |
|         | 24b through 24d and complete Schedule K. If "No," go to line 25a   | 24a           |            | Х            |
|         | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b           |            | <u> </u>     |
| С       | Did the organization maintain an escrow account other than a refunding escrow at any time during the year  |               |            |              |
|         | to defease any tax-exempt bonds?   | 24c           |            | <u> </u>     |
|         | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  | 24d           |            |              |
| 25a     | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit   |               |            |              |
| _       | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 1  | 25a           |            | Х            |
| b       | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a   |               |            |              |
|         | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or   | l             |            | l .,         |
| 00      | 990-EZ? If "Yes," complete Schedule L, Part I  | 25b           |            | Х            |
| 26      | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current  |               |            |              |
|         | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%  | 0.0           |            |              |
| 27      | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II   | 26            |            | Х            |
| 27      | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee |               |            |              |
|         | member, or to a 35% controlled entity (including an employee thereof) or family member of any of these   |               |            |              |
|         | persons? If "Yes," complete Schedule L, Part III   | 27            |            | Х            |
| 28      | Was the organization a party to a business transaction with one of the following parties (see the Schedule L,  | 21            |            | L            |
| 20      | Part IV, instructions for applicable filing thresholds, conditions, and exceptions):   |               |            |              |
| а       | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If   |               |            |              |
| -       | "Yes," complete Schedule L, Part IV.   | 28a           |            | Х            |
| b       | A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV  | 28b           |            | Х            |
|         | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If   |               |            |              |
|         | "Yes," complete Schedule L, Part IV  | 28c           |            | Х            |
| 29      | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | 29            | Х          |              |
| 30      | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified   |               |            |              |
|         | conservation contributions? If "Yes," complete Schedule M  | 30            |            | Х            |
| 31      | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  | 31            |            | Х            |
| 32      | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"  |               |            |              |
|         | complete Schedule N, Part II   | 32            |            | Х            |
| 33      | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations   |               |            |              |
|         | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  | 33            |            | Х            |
| 34      | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,  |               |            |              |
|         | III, or IV, and Part V, line 1   | 34            | Х          | ļ            |
|         | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a           |            | <u> </u>     |
| b       | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled   |               |            |              |
|         | entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2   | 35b           |            | <u> </u>     |
| 36      | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related   |               | \ <u>\</u> |              |
| 27      | organization? If "Yes," complete Schedule R, Part V, line 2  | 36            | Х          | -            |
| 37      | Did the organization conduct more than 5% of its activities through an entity that is not a related organization   | 37            |            | <sub>~</sub> |
| 00      | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI   | 31            |            | X            |
| 38      | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O                                      | 38            | Х          |              |
| Par     |  | <u> 1 30 </u> | ^          | <u> </u>     |
| rai     | Check if Schedule O contains a response or note to any line in this Part V   |               |            | П            |
|         |  | <u> </u>      | Yes        | No           |
| 10      | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   |               | res        | 140          |
| 1a<br>b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  |               |            |              |
| C       | Did the organization comply with backup withholding rules for reportable payments to vendors and   |               |            |              |
| Ü       | reportable gaming (gambling) winnings to prize winners?  | 1c            | Х          |              |

| Part    | V Statements Regarding Other IRS Filings and Tax Compliance (continued)   |            | Yes | No |
|---------|---|------------|-----|----|
| 2a      | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax   |            |     |    |
|         | Statements, filed for the calendar year ending with or within the year covered by this return 2a 36   |            |     |    |
| b       | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | 2b         | Χ   |    |
| 3a      | Did the organization have unrelated business gross income of \$1,000 or more during the year?   | 3a         |     | Χ  |
| b       | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O   | 3b         |     |    |
| 4a      | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,   |            |     |    |
|         | a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  | 4a         |     | Х  |
| b       | If "Yes," enter the name of the foreign country   |            |     |    |
| _       | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   | _          |     |    |
| 5a      | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   | 5a         |     | X  |
| b       | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | 5b         |     | Χ  |
| C       | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?   | 5c         |     |    |
| 6a      | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6-         |     | _  |
| b       | If "Yes," did the organization include with every solicitation an express statement that such contributions or  | 6a         |     | Х  |
| D       | gifts were not tax deductible?  | 6b         |     |    |
| 7       | Organizations that may receive deductible contributions under section 170(c).   | 0.5        |     |    |
| a       | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods   |            |     |    |
| -       | and services provided to the payor?   | 7a         |     | Х  |
| b       | If "Yes," did the organization notify the donor of the value of the goods or services provided?   | 7b         |     |    |
| С       | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was  |            |     |    |
|         | required to file Form 8282?   | 7с         |     | Х  |
| d       | If "Yes," indicate the number of Forms 8282 filed during the year   |            |     |    |
| е       | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   | 7e         |     | Х  |
| f       | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7f         |     | Χ  |
| g       | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  | 7g         |     |    |
| h       | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .  | 7h         |     |    |
| 8       | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the  |            |     |    |
|         | sponsoring organization have excess business holdings at any time during the year?  | 8          |     |    |
| 9       | Sponsoring organizations maintaining donor advised funds.   | 0-         |     |    |
| a       | Did the sponsoring organization make any taxable distributions under section 4966?  | 9a<br>9b   |     | _  |
| b<br>10 | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?   | 90         |     |    |
| а       | Initiation fees and capital contributions included on Part VIII, line 12  |            |     |    |
| b       | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   |            |     |    |
| 11      | Section 501(c)(12) organizations. Enter:  |            |     |    |
| а       | Gross income from members or shareholders   |            |     |    |
| b       | Gross income from other sources (Do not net amounts due or paid to other sources  | 1          |     |    |
|         | against amounts due or received from them.)   |            |     |    |
| 12a     | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  | 12a        |     |    |
| b       | If "Yes," enter the amount of tax-exempt interest received or accrued during the year   |            |     |    |
| 13      | Section 501(c)(29) qualified nonprofit health insurance issuers.  |            |     |    |
| а       | Is the organization licensed to issue qualified health plans in more than one state?  | 13a        |     |    |
|         | Note: See the instructions for additional information the organization must report on Schedule O.   |            |     |    |
| b       | Enter the amount of reserves the organization is required to maintain by the states in which  |            |     |    |
|         | the organization is licensed to issue qualified health plans  |            |     |    |
| C       | Enter the amount of reserves on hand  | 44-        |     | V  |
| 14a     | Did the organization receive any payments for indoor tanning services during the tax year?  | 14a<br>14b |     | Х  |
| b<br>15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or   | 140        |     | -  |
| 10      |   | 15         |     | Х  |
|         | excess parachute payment(s) during the year?  | 15         |     | F  |
| 4.6     | If "Yes," see the instructions and file Form 4720, Schedule N.  |            |     | W  |
| 16      | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?   | 16         |     | Х  |
|         | If "Yes," complete Form 4720, Schedule O.   |            |     |    |
| 17      | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities   |            |     |    |
|         | that would result in the imposition of an excise tax under section 4951, 4952, or 4953?   | 17         |     |    |
|         | If "Yes," complete Form 6069.   |            |     |    |

94-2936961

Part VI

| Sect | ion A. Governing Body and Management   |            |       |          |
|------|--|------------|-------|----------|
|      |  |            | Yes   | No       |
| 1a   | Enter the number of voting members of the governing body at the end of the tax year 11   |            |       |          |
|      | If there are material differences in voting rights among members of the governing body, or   |            |       |          |
|      | if the governing body delegated broad authority to an executive committee or similar   |            |       |          |
|      | committee, explain on Schedule O.  |            |       |          |
| b    | Enter the number of voting members included on line 1a, above, who are independent   |            |       |          |
| 2    | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with   |            |       |          |
|      | any other officer, director, trustee, or key employee?   | 2          |       | Χ        |
| 3    | Did the organization delegate control over management duties customarily performed by or under the direct  |            |       |          |
|      | supervision of officers, directors, trustees, or key employees to a management company or other person?  | 3          |       | Χ        |
| 4    | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4          |       | Χ        |
| 5    | Did the organization become aware during the year of a significant diversion of the organization's assets?   | 5          |       | Χ        |
| 6    | Did the organization have members or stockholders?   | 6          |       | Χ        |
| 7a   | Did the organization have members, stockholders, or other persons who had the power to elect or appoint  |            |       |          |
|      | one or more members of the governing body?   | 7a         |       | Χ        |
| b    | Are any governance decisions of the organization reserved to (or subject to approval by) members,  |            |       |          |
|      | stockholders, or persons other than the governing body?  | 7b         |       | Χ        |
| 8    | Did the organization contemporaneously document the meetings held or written actions undertaken during   |            |       |          |
|      | the year by the following:   |            |       |          |
| а    | The governing body?  | 8a         | Χ     |          |
| b    | Each committee with authority to act on behalf of the governing body?  | 8b         | Χ     |          |
| 9    | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached  |            |       |          |
|      | at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O   | 9          |       | Χ        |
| Sect | ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C   | ode.       |       |          |
|      |  |            | Yes   | No       |
| 10a  | Did the organization have local chapters, branches, or affiliates?   | 10a        |       | Х        |
| b    | If "Yes," did the organization have written policies and procedures governing the activities of such chapters,   |            |       |          |
| 44.  | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  | 10b        | · ·   |          |
| 11a  | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a        | Χ     |          |
| b    | Describe on Schedule O the process, if any, used by the organization to review this Form 990.  | 40-        | V     |          |
| 12a  | Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>   | 12a<br>12b | X     |          |
| b    | Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>   | 120        | ^     |          |
| С    | describe on Schedule O how this was done   | 12c        | Χ     |          |
| 13   | Did the organization have a written whistleblower policy?  | 13         | X     |          |
| 14   | Did the organization have a written document retention and destruction policy?   | 14         | Х     |          |
| 15   | Did the process for determining compensation of the following persons include a review and approval by   |            | ^     |          |
| 13   | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |            |       |          |
| а    | The organization's CEO, Executive Director, or top management official.  | 15a        | Χ     |          |
| b    | Other officers or key employees of the organization  | 15b        | Х     |          |
| -    | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.   | 102        | , , , |          |
| 16a  | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement   |            |       |          |
|      | with a taxable entity during the year?   | 16a        |       | Х        |
| b    | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its   |            |       |          |
|      | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard  |            |       |          |
|      | the organization's exempt status with respect to such arrangements?  | 16b        |       |          |
| Sect | ion C. Disclosure  |            |       |          |
| 17   | List the states with which a copy of this Form 990 is required to be filed See Attached Statement  |            |       |          |
| 18   | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5  | 01(c)      |       | <b>-</b> |
|      | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.   |            |       |          |
|      | X Own website X Another's website X Upon request Other (explain on Schedule O)   |            |       |          |
| 19   | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest polynomials and the sound of the | icy,       |       |          |
|      | and financial statements available to the public during the tax year.  |            |       |          |
| 20   | State the name, address, and telephone number of the person who possesses the organization's books and records   |            |       |          |
|      | M. Martineau 801-486-3161  |            |       |          |
|      | 425 East 100 South, Salt Lake City, UT 84111   |            |       |          |

Page 7

(13) WAYNE Y HOSKISSON

TRUSTEE

### Part VII

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . . . . . . . . .

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

See the instructions for the order in which to list the persons above.

|                              |   |      |   | (0 | C)  |     |            |   |  |
|------------------------------|---|------|---|----|---|-----|------------|---|--|
| (A)<br>Name and title        | (B) Average hours per week (list any hours for related organizations below dotted line) | box, | (do not che<br>box, unless<br>officer and |    | Position eck more that is person is by a director/true employee |     | Reportable | (E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
|                              |   |      |   |    |   | ted |            |   |  |
| (1) SCOTT GROENE             | 40.00   |      |   |    |   |     |            |   |  |
| EXECUTIVE DIRECTOR           | 1.00  |      |   | Х  |   |     | 174,428    |   | 14,271   |
| (2) STEPHEN BLOCH            | 40.00   |      |   |    |   |     |            |   |  |
| LEGAL DIRECTOR/ATTORNEY      | *   |      |   |    |   | Χ   | 146,200    |   | 13,283   |
| (3) TOM KENWORTHY            | 7.50  |      |   |    |   |     |            |   |  |
| CHAIR                        | 2.00  | Χ    |   |    |   |     |            |   |  |
| (4) REBECCA CHAVEZ-HOUCK     | 5.00  |      |   |    |   |     |            |   |  |
| VICE CHAIR/SECRETARY         | 2.00  | Χ    |   |    |   |     |            |   |  |
| (5) RUSTY SCHMIT             | 5.00  |      |   |    |   |     |            |   |  |
| TREASURER                    |   | Χ    |   |    |   |     |            |   |  |
| (6) LIZ THOMAS               | 2.00  |      |   |    |   |     |            |   |  |
| TRUSTEE                      | 1.00  | Χ    |   |    |   |     |            |   |  |
| (7) HANSJOERG WYSS           | 2.00  |      |   |    |   |     |            |   |  |
| TRUSTEE                      |   | Х    |   |    |   |     |            |   |  |
| (8) KERRY SCHUMANN           | 2.00  |      |   |    |   |     |            |   |  |
| TRUSTEE                      | 2.00  | Х    |   |    |   |     |            |   |  |
| (9) SHARON BUCCINO           | 2.00  |      |   |    |   |     |            |   |  |
| TRUSTEE                      |   | Х    |   |    |   |     |            |   |  |
| (10) ORIANA SANDOVAL         | 2.00  |      |   |    |   |     |            |   |  |
| TRUSTEE                      |   | Х    |   |    |   |     |            |   |  |
| (11) REGINA LOPEZ-WHITESKUNK | 2.00  |      |   |    |   |     |            |   |  |
| TRUSTEE                      | 0.00  | Х    |   |    |   |     |            |   |  |
| (12) ANI KAME'ENUI           | 2.00  | V    |   |    |   |     |            |   |  |
| TRUSTEE                      | 1   | X    |   | l  | l   |     | 1          |   | 1  |

Х

| Pa         | art VI Section A. Officers, Directors, Tru  | ıstees, Key Em  | ploye                          | ees,  | and     | iH b         | ghes  | t Co | ompensated Em   | iployees (conti   | nued)              |   |      |
|------------|---|---|--------------------------------|-------|---------|--------------|---|------|---|---|--------------------|---|------|
|            |   |   |                                |       | Pos     | C)<br>sition |   |      |   |   |                    |   |      |
|            | (A)<br>Name and title   | ( <b>B</b> )<br>Average<br>hours                                      | box,                           | unles | ss pe   | rson         | than of the | n an | ( <b>D)</b> Reportable compensation                       | <b>(E)</b> Reportable compensation                            |                    | ( <b>F)</b><br>ated amon<br>of other            | ount |
|            |   | per week (list any hours for related organizations below dotted line) | Individual trustee or director |       | Officer | Key employee | Highest compensated employee                    |      | from the<br>organization (W-2/<br>1099-MISC/<br>1099-NEC) | from related<br>organizations (W-2<br>1099-MISC/<br>1099-NEC) | con<br>/ f<br>orga | npensation<br>rom the<br>nization a<br>organiza | and  |
|            |   | ·   |                                | õ     |         |              | ated  |      |   |   |                    |   |      |
| (15)       |   | <br>  |                                |       |         |              |   |      |   | 7   |                    |   |      |
| (16)       |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
| (17)       |   |   |                                |       |         |              |   |      |   | *   |                    |   |      |
|            |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
|            |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
|            |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
| (20)       |   | <br>  |                                |       |         |              |   |      |   |   |                    |   |      |
| (21)       |   |   |                                | 1     |         |              |   |      |   |   |                    |   |      |
| (22)       |   |   | *                              |       |         |              |   |      |   |   |                    |   |      |
|            |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
|            |   |   | X                              |       |         |              |   |      |   |   |                    |   |      |
|            |   |   |                                | Ĺ     |         |              |   |      |   |   |                    |   |      |
| (25)       |   | 1   |                                |       |         |              |   |      |   |   |                    |   |      |
| 1b         | Subtotal  |   |                                | -     |         | -            |   |      | 320,628   |   |                    | 27  | ,554 |
| c<br>d     | Total from continuation sheets to Part VII, So<br>Total (add lines 1b and 1c)   |   |                                |       |         |              |   |      | 320,628   |   |                    | 27  | ,554 |
| 2          | Total number of individuals (including but not lin  | mited to those lis  |                                |       |         |              |   | ived | more than \$100   | ,000 of   |                    |   | 0    |
|            | reportable compensation from the organization   |   |                                |       |         |              |   |      |   |   |                    | Yes   | No   |
| 3          | Did the organization list any <b>former</b> officer, dire employee on line 1a? <i>If</i> "Yes," <i>complete Sched</i> |   |                                |       |         |              |   |      |   |   | 3                  |   | Х    |
| 4          | For any individual listed on line 1a, is the sum of   |   |                                |       |         |              |   |      |   |   |                    |   |      |
|            | the organization and related organizations greated individual.  |   |                                |       |         |              | -   |      | hedule J for suc  |   | 4                  | Х   |      |
| 5          | Did any person listed on line 1a receive or accr  |   |                                |       |         |              |   |      |   |   | 4                  |   |      |
|            | for services rendered to the organization? If "Yo   | es," complete So  | chedu                          | ıle J | for     | suc          | ch pei  | rsor | )   |   | 5                  |   | Χ    |
| <u>Sec</u> | tion B. Independent Contractors  Complete this table for your five highest compe                                      | ensated independ  | dent (                         | cont  | ract    | ors          | thatı   | rece | eived more than :   | \$100 000 of  |                    |   |      |
|            | compensation from the organization. Report co   |   |                                |       |         |              |   |      |   |   | tax ye             | ar.   |      |
|            | <b>(A)</b><br>Name and business add   | ress  |                                |       |         |              |   |      | ( <b>B</b> )<br>Description of ser                        | vices   | (C)<br>Compen      |   |      |
| S. L.      | MAILING & PRINTING 1841 S PIONE   | ER RD SLC, UT   | 8410                           | )4    |         |              |   | MΑ   | AILING & PRINT  | NG  |                    | 212   | ,511 |
| LOV        | E COMMUNICATIONS 546 S 200 W S  | LC, UT 84101  |                                |       |         |              |   | ME   | DIA CONSULTA  | ANT   |                    | 159   | ,714 |
|            |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
|            |   |   |                                |       |         |              |   |      |   |   |                    |   |      |
| 2          | Total number of independent contractors (inclumore than \$100,000 of compensation from the                            | -   | ted to                         | tho   | se l    | iste         | d abo   |      | who received  |   |                    |   |      |

Part VIII Statement of Revenue

|  |                             | Check if Schedule O contains a response or note to any line in  | this Part VIII              |  |                                      |  |
|--|-----------------------------|---|-----------------------------|--|--------------------------------------|--|
|  |                             |   | <b>(A)</b><br>Total revenue | (B)<br>Related or exempt<br>function revenue | (C)<br>Unrelated<br>business revenue | (D) Revenue excluded from tax under sections 512–514 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1a<br>b<br>c<br>d<br>e<br>f | Federated campaigns   |                             |  | 1                                    |  |
| Contr<br>and C   | h                           | lines 1a-1f   | 4,295,733                   |  |                                      |  |
| Program Service<br>Revenue                             | 2a<br>b<br>c<br>d<br>e<br>f | All other program service revenue   | Ċ                           |  |                                      |  |
|  | 3<br>4<br>5<br>6a<br>b      | Investment income (including dividends, interest, and other similar amounts)  | 480,382                     |  |                                      | 480,382  |
| nue  | c<br>d<br>7a<br>b           | Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of assets other than inventory .  Less: cost or other basis  6c  (i) Securities (ii) Other  17,182,395 18,059 |                             |  |                                      |  |
| Other Revenue  | c<br>d<br>8a                | and sales expenses  | -334,821                    |  |                                      | -334,821   |
|  | b<br>c<br>9a<br>b           | See Part IV, line 18  |                             |  |                                      |  |
|  | c<br>10a<br>b<br>c          | Net income or (loss) from gaming activities   | 9,873                       |  |                                      | 9,873  |
| Miscellaneous<br>Revenue                               | 11a<br>b<br>c               | Business Code  All other revenue  | 0,070                       |  |                                      | 5,570  |
| Σ  | e                           | Total. Add lines 11a-11d  |                             |  |                                      |  |
|  | 12                          | Total revenue See instructions  | 4 451 167                   |  | I                                    | 155 434  |

# Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete

| ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) | ١. |  |
|--|----|--|
|--|----|--|

|          | Check if Schedule O contains a response or note  | to any line in this Pa | art IX                       |                                     |  |
|----------|--|------------------------|------------------------------|-------------------------------------|--|
|          | not include amounts reported on lines 6b, 7b,<br>9b, and 10b of Part VIII.   | (A)<br>Total expenses  | (B) Program service expenses | (C) Management and general expenses | ( <b>D)</b><br>Fundraising<br>expenses |
| 1 2      | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic | 371,783                | 371,783                      |                                     |  |
| •        | individuals. See Part IV, line 22  |                        |                              |                                     |  |
| 3        | Grants and other assistance to foreign organizations, foreign governments, and foreign   |                        |                              |                                     |  |
|          | individuals. See Part IV, lines 15 and 16  |                        |                              |                                     |  |
| 4        | Benefits paid to or for members  |                        |                              |                                     |  |
| 5        | Compensation of current officers, directors, trustees, and key employees   | 174,428                | 164,924                      | 3,749                               | 5,755                                  |
| 6        | Compensation not included above to disqualified  | 174,420                | 104,924                      | 3,749                               | 3,733                                  |
|          | persons (as defined under section 4958(f)(1)) and  |                        |                              |                                     |  |
|          | persons described in section 4958(c)(3)(B)   |                        |                              |                                     |  |
| 7        | Other salaries and wages   | 1,887,440              | 1,784,596                    | 40,572                              | 62,272                                 |
| 8        | Pension plan accruals and contributions (include   | 69,210                 | 65,438                       | 1,489                               | 2 202                                  |
| 9        | section 401(k) and 403(b) employer contributions) Other employee benefits  | 206,731                | 195,467                      | 4,443                               | 2,283<br>6,821                         |
| 10       | Payroll taxes  | 163,245                | 154,351                      | 3,508                               | 5,386                                  |
| 11       | Fees for services (nonemployees):  | •                      |                              | ·                                   | •                                      |
| а        | Management   |                        |                              |                                     |  |
| b        | Legal  | 207,630                | 207,630                      | 00.405                              |  |
| c<br>d   | Accounting   | 36,165                 |                              | 36,165                              |  |
| e        | Professional fundraising services. See Part IV, line 17  |                        |                              |                                     |  |
| f        | Investment management fees   | 72,189                 |                              | 72,189                              |  |
| g        | Other. (If line 11g amount exceeds 10% of line 25, column  |                        |                              |                                     |  |
|          | (A), amount, list line 11g expenses on Schedule O.)  |                        |                              |                                     |  |
| 12       | Advertising and promotion  | 50.140                 | EE 002                       | 2.420                               | 007                                    |
| 13<br>14 | Office expenses  | 59,149<br>98,002       | 55,893<br>85,989             | 2,429<br>4,060                      | 7,953                                  |
| 15       | Royalties  | 30,002                 | 00,000                       | 4,000                               | 7,000                                  |
| 16       | Occupancy  | 106,244                | 100,454                      | 2,284                               | 3,506                                  |
| 17       | Travel   | 75,813                 | 75,619                       |                                     | 194                                    |
| 18       | Payments of travel or entertainment expenses   |                        |                              |                                     |  |
| 19       | for any federal, state, or local public officials  | 37,540                 | 22.756                       | 2 202                               | 2 202                                  |
| 20       | Conferences, conventions, and meetings   | 37,340                 | 32,756                       | 2,392                               | 2,392                                  |
| 21       | Payments to affiliates   |                        |                              |                                     |  |
| 22       | Depreciation, depletion, and amortization  | 64,971                 | 61,430                       | 1,397                               | 2,144                                  |
| 23       | Insurance  | 39,694                 | 37,531                       | 853                                 | 1,310                                  |
| 24       | Other expenses. Itemize expenses not covered   |                        |                              |                                     |  |
|          | above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column   |                        |                              |                                     |  |
|          | (A), amount, list line 24e expenses on Schedule O.)  |                        |                              |                                     |  |
| а        | Bank charges   | 29,847                 |                              | 29,847                              |  |
| b        | Grassroots organizing  | 116,642                | 116,642                      |                                     |  |
| C        | Member services/events   | 588,251                | 450,753                      | 7,195                               | 130,303                                |
| d        | Repairs and maintenance  | 66,725<br>26,181       | 63,088<br>24,754             | 1,435<br>563                        | 2,202                                  |
| е<br>25  | All other expenses  Total functional expenses. Add lines 1 through 24e   | 4,497,880              | 4,049,098                    | 214,570                             | 234,212                                |
| 26       | Joint costs. Complete this line only if the  | 1, 107,000             | 1,010,000                    | 274,010                             | 201,212                                |
|          | organization reported in column (B) joint costs  |                        |                              |                                     |  |
|          | from a combined educational campaign and   |                        |                              |                                     |  |
|          | fundraising solicitation. Check here if  |                        |                              |                                     |  |
|          | following SOP 98-2 (ASC 958-720)   |                        |                              |                                     |  |

### Part X Balance Sheet

| Pledges and grants receivable, net   3   3   3   3   3   3   3   3   3   |             |     | Check if Schedule O contains a response or note to any line in this Part X. |                   |     |             |
|--|-------------|-----|---|-------------------|-----|-------------|
| Cash—non-interest-bearing.   1,990,041   1   1,826,654   2   277,353   3   3   3   3   3   3   3   3   3   |             |     |   | (A)               |     | (B)         |
| Pledges and grants receivable, net   |             |     |   | Beginning of year |     | End of year |
| 3   Pledges and grants receivable, net.   3   4  |             | 1   | Cash—non-interest-bearing   | 1,999,041         | 1   | 1,826,654   |
| A   Accounts receivable, net,   A   Canala and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons.   A   Canala and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   A   Canala and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   A   Canala and other persons and deferred charges   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate of rate of rate or use.   A   Canala and complete fines of rate of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate of rate of rate or use.   A   Canala and complete fines of rate of rate of rate or use.   A   Canala and complete fines of rate    |             | 2   | Savings and temporary cash investments                                      | 621,811           | 2   | 277,353     |
| A   Accounts receivable, net,   A   Canala and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons.   A   Canala and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   A   Canala and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   A   Canala and other persons and deferred charges   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate of rate of rate or use.   A   Canala and complete fines of rate of rate or use.   A   Canala and complete fines of rate or use.   A   Canala and complete fines of rate of rate of rate or use.   A   Canala and complete fines of rate of rate of rate or use.   A   Canala and complete fines of rate    |             | 3   | Pledges and grants receivable, net  |                   | 3   |             |
| trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons.  6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)  7 Notes and loans receivable, net.  9 Prepaid expenses and deferred charges.  9 Prepaid expenses and deferred charges.  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10b Less: accumulated depreciation D  10b Less: accumulated depreciation D  10b Less: accumulated depreciation D  11 Investments—publicly traded securities.  12 Investments—publicly traded securities.  13 Investments—other securities. See Part IV, line 11.  14 Intangible assets. See Part IV, line 11.  15 Other assets. See Part IV, line 11.  17 Accounts payable and accrued expenses.  17 Intants payable.  18 Grants payable.  19 Deferred revenue.  20 Tax-exempt bond liabilities.  21 Escrow or custodial account liability. Complete Part IV of Schedule D.  22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these registers.  22 Controlled entity or family member of any of these registers.  23 Secured mortgages and notes payable to unrelated third parties.  24 Unsecured notes and loans payable to unrelated third parties.  25 Organizations that foliow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets with donor restrictions.  29 Capital story of trust principal, or current funds.  30 Paid-in or capital surplus, or land, building, or equipment fund.  31 Retained earnings, endowment, accumulated income, or other funds.  31 Total inabilities on fund balances.  25 Jan 25,303,976 33 22 1,989,298  27 total inabilities and liabilities.               |             | 4   |   |                   | 4   |             |
| Controlled entity or family member of any of these persons.   Secure of the person o   |             | 5   | Loans and other receivables from any current or former officer, director,   |                   |     |             |
| Section   Company   Comp   |             |     | trustee, key employee, creator or founder, substantial contributor, or 35%  |                   |     |             |
| Under section 4956(f)(1)), and persons described in section 4956(c)(3)(8)   6   7   7   8   1   1   1   1   1   1   1   1   1  |             |     | controlled entity or family member of any of these persons                  | _                 | 5   |             |
| 7   Notes and loans receivable, net   8   8   Inventories for sale or use   9   Prepaid expenses and deferred charges   74,197   9   66,380  |             | 6   | Loans and other receivables from other disqualified persons (as defined     |                   |     |             |
| 10a  |             |     | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   |                   | 6   |             |
| 10a  | ets         | 7   | Notes and loans receivable, net   |                   | 7   |             |
| 10a  | SS          | 8   | Inventories for sale or use   |                   | 8   |             |
| Other basis. Complete Part VI of Schedule D   10a   1,830,844   799,831   10c   831,043   11   Investments—publicity traded securities   11   10b   799,801   799,801   799,831   10c   831,043   11   10vestments—publicity traded securities   21,809,294   11   19,005,014   12   13   10vestments—program-related. See Part IV, line 11   13   13   14   Intangible assets   14   19,667   15   167,725   15   167,725   16   163,725   16   163,725   16   164,725   17   164,725   17   164,725   18   18   19,667   18   19   19   19   19   19   19   19   | ⋖           | 9   |   | 74,197            | 9   | 66,380      |
| B  |             | 10a | Land, buildings, and equipment: cost or                                     |                   |     |             |
| 11   Investments—publicly traded securities   21,809,294   11   19,005,014   12   11   19,005,014   13   11   19,005,014   13   11   13   11   13   11   13   11   13   11   14   11   14   15   15   16   15   16   16   16   16  |             |     | other basis. Complete Part VI of Schedule D 10a 1,630,844                   |                   |     |             |
| 12   Investments—other securities. See Part IV, line 11   13   Investments—program-related. See Part IV, line 11   13   14   19,667   15   167,725   15   167,725   15   167,725   16   17   16   17   17   17   17   17   |             | b   | Less: accumulated depreciation 10b 799,801                                  | 799,633           | 10c | 831,043     |
| 13   Investments—program-related. See Part IV, line 11   13   14   14   14   15   16   15   16   17   15   16   15   16   17   15   16   17   15   16   17   17   10   18   18   18   19   18   18   19   19   |             | 11  | Investments—publicly traded securities                                      | 21,809,294        | 11  | 19,005,014  |
| 14   |             | 12  | Investments—other securities. See Part IV, line 11                          |                   | 12  |             |
| 15   |             | 13  | Investments—program-related. See Part IV, line 11                           |                   | 13  |             |
| 15   |             | 14  | Intangible assets   |                   | 14  | 19,667      |
| 16   Total assets. Add lines 1 through 15 (must equal line 33)   25,303,976   16   22,193,836     17   Accounts payable and accrued expenses   17   110,284     18   Grants payable   18   Deferred revenue   19     20   Tax-exempt bond liabilities   20     21   Escrow or custodial account liability. Complete Part IV of Schedule D   21     22   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons   22     23   Secured mortgages and notes payable to unrelated third parties   24     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D   25   94,254     26   Total liabilities. Add lines 17 through 25   26   204,538     27   Net assets with donor restrictions   24,946,298   27   21,631,620     28   Net assets with donor restrictions   357,678   28   357,678     29   Capital stock or trust principal, or current funds   30     30   Paid-in or capital surplus, or land, building, or equipment fund   30     31   Retained earnings, endowment, accumulated income, or other funds   25,303,976   32   21,989,298     32   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     33   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     34   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     35   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     36   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     37   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     38   Total liabilities and net assets/fund balances   25,303,976   33   22,198,938     38   Total liabilities and net assets/fund balances   25,303,976   33   22,198,928     38   Total liabilities and net assets/fund balances   25,303,976     |             | 15  |   |                   | 15  | 167,725     |
| 17   |             | 16  |   | 25,303,976        | 16  | 22,193,836  |
| 19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21  |             | 17  |   |                   | 17  | 110,284     |
| 19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21  |             | 18  | Grants payable  |                   | 18  |             |
| 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax; payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 28 Net assets with donor restrictions. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 29 Total net assets or fund balances. 20 Total liabilities and net assets/fund balances. 21 Data liabilities and net assets/fund balances. 22 Data liabilities and net assets/fund balances. 25 Jagna, 27 Schedule D. 26 Total liabilities and net assets/fund balances. 26 204,538  27 Qagnizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 34 Data liabilities and net assets/fund balances. 35 Qagnizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 35 Total liabilities and net assets/fund balances. 36 Qagnizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 36 Qagnizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 37 Qagnizations that do not follow FASB ASC 958, check here and complete lines 29 t |             | 19  |   |                   | 19  |             |
| Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons.  Secured mortgages and notes payable to unrelated third parties.  Unsecured notes and loans payable to unrelated third parties.  Unsecured notes and loans payable to unrelated third parties.  Unsecured notes and loans payable to unrelated third parties.  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D.  Total liabilities. Add lines 17 through 25.  Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets with donor restrictions.  Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds.  Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances.  Total liabilities and net assets/fund balances.  22 Loans 35% 35% 35% 35% 35% 35% 35% 35% 35% 35%   |             | 20  | Tax-exempt bond liabilities   |                   | 20  |             |
| trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons.  23 Secured mortgages and notes payable to unrelated third parties.  24 Unsecured notes and loans payable to unrelated third parties.  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D.  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.  28 Net assets with donor restrictions.  29 Capital stock or trust principal, or current funds.  29 Capital stock or trust principal, or current funds.  30 Paid-in or capital surplus, or land, building, or equipment fund.  31 Retained earnings, endowment, accumulated income, or other funds.  32 Total net assets or fund balances.  33 22,1938,363   |             | 21  | Escrow or custodial account liability. Complete Part IV of Schedule D       |                   | 21  |             |
| 24 Unsecured notes and loans payable to unrelated third parties  | es          | 22  | Loans and other payables to any current or former officer, director,        |                   |     |             |
| 24 Unsecured notes and loans payable to unrelated third parties  | Ξ           |     | trustee, key employee, creator or founder, substantial contributor, or 35%  |                   |     |             |
| 24 Unsecured notes and loans payable to unrelated third parties  | abi         |     | controlled entity or family member of any of these persons                  |                   | 22  |             |
| Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D  |             | 23  | Secured mortgages and notes payable to unrelated third parties              |                   | 23  |             |
| parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D   |             | 24  | Unsecured notes and loans payable to unrelated third parties                |                   | 24  |             |
| Part X of Schedule D   |             | 25  | Other liabilities (including federal income tax, payables to related third  |                   |     |             |
| Total liabilities. Add lines 17 through 25.  Organizations that follow FASB ASC 958, check here  |             |     |   |                   |     |             |
| Organizations that follow FASB ASC 958, check here   and complete lines 27, 28, 32, and 33.  7 Net assets without donor restrictions   24,946,298   7 21,631,620   28 Net assets with donor restrictions   357,678   8 357,678   9 Capital stock or trust principal, or current funds   29 Capital stock or trust principal, or current funds   30 Paid-in or capital surplus, or land, building, or equipment fund   31 Retained earnings, endowment, accumulated income, or other funds   32 Total net assets or fund balances   33 Total liabilities and net assets/fund balances   25,303,976   33 22,193,836  |             |     | Part X of Schedule D  |                   | 25  | 94,254      |
| and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions   |             | 26  | Total liabilities. Add lines 17 through 25                                  |                   | 26  | 204,538     |
| and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions   | es          |     | Organizations that follow FASB ASC 958, check here X                        |                   |     |             |
| 133 Total liabilities and het assets/fullu balances  | ğ           |     | and complete lines 27, 28, 32, and 33.                                      |                   |     |             |
| 133 Total liabilities and het assets/fullu balances  | <u>a</u>    | 27  | Net assets without donor restrictions                                       | 24,946,298        | 27  | 21,631,620  |
| 133 Total liabilities and het assets/fullu balances  | 8           | 28  | Net assets with donor restrictions  | 357,678           | 28  | 357,678     |
| 133 Total liabilities and het assets/fullu balances  | Ĭ           |     | Organizations that do not follow FASB ASC 958, check here                   |                   |     |             |
| 133 Total liabilities and het assets/fullu balances  | Ē           |     | and complete lines 29 through 33.   |                   |     |             |
| 133 Total liabilities and het assets/fullu balances  | Ō           | 29  | Capital stock or trust principal, or current funds                          |                   | 29  |             |
| 133 Total liabilities and het assets/fullu balances  | šets        | 30  | Paid-in or capital surplus, or land, building, or equipment fund            |                   | 30  |             |
| 133 Total liabilities and het assets/fullu balances  | <b>A</b> S€ | 31  | Retained earnings, endowment, accumulated income, or other funds            |                   | 31  |             |
| 133 Total liabilities and het assets/fullu balances  | et ,        | 32  | Total net assets or fund balances   | 25,303,976        | 32  | 21,989,298  |
|  | Ž           | 33  | Total liabilities and net assets/fund balances                              | 25,303,976        | 33  | 22,193,836  |

| Form 9 | 90 (2022) Southern Utan Wilderness Alliance   | 94-29 | 30901 | Pag   | ge IZ |
|--------|---|-------|-------|-------|-------|
| Part   | XI Reconciliation of Net Assets   |       |       |       |       |
|        | Check if Schedule O contains a response or note to any line in this Part XI                                     |       |       |       |       |
| 1      | Total revenue (must equal Part VIII, column (A), line 12)   | 1     |       | 4,451 | 1,167 |
| 2      | Total expenses (must equal Part IX, column (A), line 25)  | 2     |       |       | 7,880 |
| 3      | Revenue less expenses. Subtract line 2 from line 1  | 3     |       | -46   | 3,713 |
| 4      | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                       | 4     | 2     | 5,303 | 3,976 |
| 5      | Net unrealized gains (losses) on investments  | 5     | -     | 3,267 | 7,965 |
| 6      | Donated services and use of facilities  | 6     |       |       |       |
| 7      | Investment expenses   | 7     |       |       |       |
| 8      | Prior period adjustments  | 8     |       |       |       |
| 9      | Other changes in net assets or fund balances (explain on Schedule O)  | 9     |       |       |       |
| 10     | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,              | 4     |       |       |       |
|        |   | 10    | 2     | 1,989 | 9,298 |
| Part   |   |       |       |       |       |
|        | Check if Schedule O contains a response or note to any line in this Part XII                                    |       |       |       | Ш_    |
|        |   |       |       | Yes   | No    |
| 1      | Accounting method used to prepare the Form 990:   |       |       |       |       |
|        | If the organization changed its method of accounting from a prior year or checked "Other," explain on           |       |       |       |       |
|        | Schedule O.   |       |       |       |       |
| 2a     | Were the organization's financial statements compiled or reviewed by an independent accountant?                 |       | 2a    |       | Х     |
|        | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or          |       |       |       |       |
|        | reviewed on a separate basis, consolidated basis, or both:  |       |       |       |       |
|        | Separate basis Consolidated basis Both consolidated and separate basis  |       |       |       |       |
| b      | Were the organization's financial statements audited by an independent accountant?                              |       | 2b    | Χ     |       |
|        | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a         |       |       |       |       |
|        | separate basis, consolidated basis, or both:  |       |       |       |       |
|        | X Separate basis Consolidated basis Both consolidated and separate basis  |       |       |       |       |
| С      | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of  |       |       |       |       |
|        | the audit, review, or compilation of its financial statements and selection of an independent accountant?       |       | 2c    | Х     |       |
|        | If the organization changed either its oversight process or selection process during the tax year, explain on   |       |       |       |       |
|        | Schedule O.   |       |       |       |       |
| 3a     | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the |       |       |       |       |
|        | Uniform Guidance, 2 C.F.R. Part 200, Subpart F?   |       | 3a    |       | Х     |
| b      | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the    |       |       |       |       |
|        | required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits         |       | 3b    |       | N/A   |

Form **990** (2022)

#### SCHEDULE A (Form 990)

# **Public Charity Status and Public Support**

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. 990 or Form 990-EZ.

Name of the organization

Southern Utah Wilderness Alliance

94-2936961

| Par    | t I      | Reason for Public Char  | ity Status. (All or          | ganizations must co                                | mplete t           | his part.)            | See instructions.          |                                  |
|--------|----------|---|------------------------------|--|--------------------|-----------------------|----------------------------|----------------------------------|
| he     | orga     | nization is not a private foundat   |                              |  |                    |                       |                            |                                  |
| 1      |          | A church, convention of church  | es, or association o         | f churches described in                            | n <b>section</b>   | 170(b)(1)             | (A)(i).                    |                                  |
| 2      |          | A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) |                              |  |                    |                       |                            |                                  |
| 3      |          | A hospital or a cooperative hos   | pital service organiz        | zation described in <b>sec</b>                     | tion 170(l         | b)(1)(A)(iii          | i).                        |                                  |
| 4      | П        | A medical research organizatio  | n operated in conju          | nction with a hospital d                           | lescribed          | in <b>section</b>     | 170(b)(1)(A)(iii), En      | iter the                         |
|        |          | hospital's name, city, and state  | · · ·                        | ,  |                    |                       |                            |                                  |
| 5      | П        | An organization operated for th   | e benefit of a colleg        | e or university owned                              | or operate         | ed by a go            | vernmental unit desc       | cribed in                        |
|        |          | section 170(b)(1)(A)(iv). (Com  | plete Part II.)              | •  | •                  |                       |                            |                                  |
| 6      |          | A federal, state, or local govern   | ment or governmer            | ntal unit described in <b>se</b>                   | ection 170         | )(b)(1)(A)(           | v).                        |                                  |
| 7      | Χ        | An organization that normally re  | eceives a substantia         | al part of its support fro                         | m a gove           | rnmental ເ            | unit or from the gene      | ral public                       |
|        |          | described in section 170(b)(1)(   | ( <b>A)(vi).</b> (Complete F | Part II.)  |                    |                       |                            |                                  |
| 8      |          | A community trust described in  | section 170(b)(1)(A          | A)(vi). (Complete Part                             | II.)               |                       |                            |                                  |
| 9      |          | An agricultural research organiz  | zation described in          | section 170(b)(1)(A)(ix                            | ) operated         | d in conjur           | nction with a land-gra     | ant college                      |
|        |          | or university or a non-land-gran  | nt college of agricult       | ure (see instructions).                            | Enter the          | name, city            | , and state of the co      | llege or                         |
| 10     | $\Box$   | university:   | anaiyaa (1) mara tha         | on 22 1/20/ of its ourse                           | et franc           | antribution           | a mambarahin fasa          |                                  |
| 10     | Ш        | An organization that normally receipts from activities related t                |                              |  |                    |                       |                            |                                  |
|        |          | support from gross investment   | income and unrelate          | ed business taxable in                             | come (les          | s section !           | 511 tax) from busine       |                                  |
|        |          | acquired by the organization af   | ter June 30, 1975. S         | See section 509(a)(2).                             | (Complet           | e Part III.)          |                            |                                  |
| 11     | Ш        | An organization organized and   | operated exclusivel          | ly to test for public safe                         | ty. See <b>s</b> e | ection 509            | 9(a)(4).                   |                                  |
| 12     |          | An organization organized and   |                              |  |                    |                       |                            |                                  |
|        |          | of one or more publicly support   | ed organizations de          | escribed in section 509                            | (a)(1) or s        | section 50            | 09(a)(2). See section      | n 509(a)(3).                     |
|        | ſ        | Check the box on lines 12a thro   | · ·                          | 71   | 0 0                |                       | ·                          |                                  |
| а      |          | Type I. A supporting organiz<br>the supported organization(s                    |                              |  |                    |                       |                            |                                  |
|        |          | organization. You must con  |                              |  | пајопц с           | n lile dile           | Stors or trustees or tr    | ie supporting                    |
| b      | Ī        | Type II. A supporting organiz   | •                            |  | on with its        | supporte              | d organization(s), by      | having                           |
|        | •        | control or management of th   |                              |  | me perso           | ns that co            | ntrol or manage the        | supported                        |
|        | Г        | organization(s). You must c   |                              |  |                    |                       |                            | 4                                |
| С      | Ĺ        | Type III functionally integral its supported organization(s)                    |                              |  |                    |                       |                            | rated with,                      |
| d      | Ī        | Type III non-functionally in  |                              |  |                    |                       |                            | anization(s)                     |
|        | L        | that is not functionally integr   | ated. The organizat          | ion generally must sati                            | sfy a distr        | ibution red           | quirement and an att       |                                  |
|        | Г        | requirement (see instruction  |                              |  |                    |                       |                            |                                  |
| е      | Ĺ        | Check this box if the organized functionally integrated, or Ty                  |                              |  |                    |                       | Type I, Type II, Typ       | e III                            |
| f      |          | Enter the number of supported   |                              |  | ig Organiz         | .auon.                |                            |                                  |
| a<br>a |          | Provide the following information   | •                            |  |                    |                       |                            |                                  |
|        |          | Name of supported organization  | (ii) EIN                     | (iii) Type of organization                         |                    | organization          | (v) Amount of monetary     | (vi) Amount of                   |
|        |          |   |                              | (described on lines 1–10 above (see instructions)) |                    | ur governing<br>ment? | support (see instructions) | other support (see instructions) |
|        |          |   |                              | ,  |                    |                       | ,                          | ,                                |
|        |          |   |                              |  | Yes                | No                    |                            |                                  |
| A)     |          |   |                              |  |                    |                       |                            |                                  |
|        |          |   |                              |  |                    |                       |                            |                                  |
| B)     |          |   |                              |  |                    |                       |                            |                                  |
| C)     |          |   |                              |  |                    |                       |                            |                                  |
| Ο,     |          |   |                              |  |                    |                       |                            |                                  |
| D)     |          |   |                              |  |                    |                       |                            |                                  |
|        |          |   |                              |  |                    |                       |                            |                                  |
| E)     |          |   |                              |  |                    |                       |                            |                                  |
|        |          |   |                              |  |                    |                       |                            |                                  |
| ota    | <u>L</u> |   |                              |  |                    |                       |                            |                                  |

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec  | ction A. Public Support                               |                        |                       |                        |                            |              |              |
|------|---|------------------------|-----------------------|------------------------|----------------------------|--------------|--------------|
| Cale | ndar year (or fiscal year beginning in)               | (a) 2018               | <b>(b)</b> 2019       | (c) 2020               | (d) 2021                   | (e) 2022     | (f) Total    |
| 1    | Gifts, grants, contributions, and                     |                        |                       |                        |                            |              |              |
|      | membership fees received. (Do not                     |                        |                       |                        |                            |              |              |
|      | include any "unusual grants.")                        | 4,893,425              | 3,595,935             | 3,748,078              | 5,756,265                  | 3,684,121    | 21,677,824   |
| 2    | Tax revenues levied for the                           |                        |                       |                        |                            |              |              |
|      | organization's benefit and either paid                |                        |                       |                        |                            | •            |              |
|      | to or expended on its behalf                          |                        |                       |                        |                            |              |              |
| 3    | The value of services or facilities                   |                        |                       |                        |                            |              |              |
|      | furnished by a governmental unit to the               |                        |                       |                        |                            |              |              |
|      | organization without charge                           |                        |                       |                        |                            |              |              |
| 4    | Total. Add lines 1 through 3                          | 4,893,425              | 3,595,935             | 3,748,078              | 5,756,265                  | 3,684,121    | 21,677,824   |
| 5    | The portion of total contributions by                 |                        |                       |                        |                            |              |              |
|      | each person (other than a                             |                        |                       |                        |                            |              |              |
|      | governmental unit or publicly                         |                        |                       |                        |                            |              |              |
|      | supported organization) included on                   |                        |                       |                        |                            |              |              |
|      | line 1 that exceeds 2% of the amount                  |                        |                       |                        |                            |              |              |
|      | shown on line 11, column (f)                          |                        |                       |                        |                            |              | 900,000      |
| 6    | Public support. Subtract line 5 from line 4           |                        |                       |                        |                            |              | 20,777,824   |
| Sec  | ction B. Total Support                                |                        |                       |                        |                            |              |              |
| Cale | ndar year (or fiscal year beginning in)               | (a) 2018               | <b>(b)</b> 2019       | (c) 2020               | (d) 2021                   | (e) 2022     | (f) Total    |
| 7    | Amounts from line 4                                   | 4,893,425              | 3,595,935             | 3,748,078              | 5,756,265                  | 3,684,121    | 21,677,824   |
| 8    | Gross income from interest, dividends,                |                        |                       |                        |                            |              |              |
|      | payments received on securities loans,                |                        |                       |                        |                            |              |              |
|      | rents, royalties, and income from                     |                        |                       |                        |                            |              |              |
|      | similar sources                                       | 444,741                | 444,935               | 427,861                | 696,762                    | 480,392      | 2,494,691    |
| 9    | Net income from unrelated business                    |                        |                       |                        |                            |              |              |
|      | activities, whether or not the business is            |                        |                       |                        |                            |              |              |
|      | regularly carried on                                  | 12,508                 |                       |                        |                            |              | 12,508       |
| 10   | Other income. Do not include gain or                  |                        |                       |                        |                            |              |              |
|      | loss from the sale of capital assets                  |                        |                       |                        |                            |              |              |
|      | (Explain in Part VI.)                                 |                        |                       |                        |                            |              |              |
| 11   | Total support. Add lines 7 through 10                 |                        |                       |                        |                            |              | 24,185,023   |
| 12   | Gross receipts from related activities, etc. (se      | ee instructions)       |                       |                        |                            | 12           |              |
| 13   | First 5 years. If the Form 990 is for the orga        | anization's first, sec | ond, third, fourth, o | or fifth tax year as a | a section 501(c)(3)        |              |              |
|      | organization, check this box and stop here            |                        |                       |                        |                            |              |              |
| Sec  | ction C. Computation of Public Su                     | pport Percenta         | age                   |                        |                            |              |              |
| 14   | Public support percentage for 2022 (line 6, c         |                        |                       | (f))                   |                            | 14           | 85.91%       |
| 15   | Public support percentage from 2021 Sched             |                        | •                     | · //                   |                            | 15           | 87.57%       |
| 16a  | 33 1/3% support test—2022. If the organiz             |                        |                       |                        |                            | ck this box  |              |
|      | and stop here. The organization qualifies as          |                        |                       |                        |                            |              | X            |
| b    | 33 1/3% support test—2021. If the organiz             | ation did not check    | a box on line 13 o    | r 16a. and line 15 i   | s 33 1/3% or more          | . check this | <u> </u>     |
|      | box and <b>stop here</b> . The organization qualified |                        |                       | ·                      |                            |              |              |
| 17a  | 10%-facts-and-circumstances test—2022                 | If the organization    | n did not check a h   | ox on line 13 16a      | or 16h, and line 1         | 4            |              |
|      | 10% or more, and if the organization meets to         |                        |                       |                        |                            |              |              |
|      | Part VI how the organization meets the facts          |                        |                       |                        |                            |              |              |
|      | organization  |                        |                       |                        |                            |              |              |
| b    | 10%-facts-and-circumstances test—2021                 | I. If the organization | n did not check a b   | ox on line 13, 16a,    | 16b, or 17a, and I         | ine          |              |
|      | 15 is 10% or more, and if the organization m          | eets the facts-and-    | circumstances tes     | t, check this box ar   | nd <b>stop here</b> . Expl | ain          |              |
|      | in Part VI how the organization meets the fac         |                        | _                     |                        |                            |              | <del>-</del> |
|      | organization  |                        |                       |                        |                            |              |              |
| 18   | <b>Private foundation.</b> If the organization did    | not check a box on     | line 13, 16a, 16b,    | 17a, or 17b, check     | this box and see           |              | <del></del>  |
|      | instructions  |                        |                       |                        |                            |              |              |

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec  | ction A. Public Support   |                       |                    |                      |                      |           |           |
|------|---|-----------------------|--------------------|----------------------|----------------------|-----------|-----------|
| Cale | ndar year (or fiscal year beginning in)   | (a) 2018              | <b>(b)</b> 2019    | (c) 2020             | (d) 2021             | (e) 2022  | (f) Total |
| 1    | Gifts, grants, contributions, and membership fees                                     |                       |                    |                      |                      |           | 1         |
| _    | received. (Do not include any "unusual grants.")                                      |                       |                    |                      |                      |           |           |
| 2    | Gross receipts from admissions, merchandise sold or services performed, or facilities |                       |                    |                      |                      |           | 1         |
|      | furnished in any activity that is related to the                                      |                       |                    |                      |                      |           | 1         |
|      | organization's tax-exempt purpose   |                       |                    |                      |                      |           |           |
| 3    | Gross receipts from activities that are not an  |                       |                    |                      |                      |           | 1         |
|      | unrelated trade or business under section 513   |                       |                    |                      |                      |           |           |
| 4    | Tax revenues levied for the   |                       |                    |                      |                      |           | 1         |
|      | organization's benefit and either paid to   |                       |                    |                      |                      |           | 1         |
|      | or expended on its behalf   |                       |                    |                      |                      | _         |           |
| 5    | The value of services or facilities   |                       |                    |                      |                      |           | 1         |
|      | furnished by a governmental unit to the   |                       |                    |                      |                      |           | 1         |
|      | organization without charge   |                       |                    |                      |                      |           |           |
| 6    | <b>Total.</b> Add lines 1 through 5   |                       |                    |                      |                      |           |           |
| 7a   | Amounts included on lines 1, 2, and 3   |                       |                    |                      |                      |           | 1         |
|      | received from disqualified persons  |                       |                    |                      |                      |           |           |
| b    | Amounts included on lines 2 and 3   |                       |                    |                      |                      |           | 1         |
|      | received from other than disqualified persons that exceed the greater of \$5,000      |                       |                    | . 4                  |                      |           | 1         |
|      | or 1% of the amount on line 13 for the year   |                       |                    |                      |                      |           | 1         |
| _    | Add lines 7a and 7b   |                       | <b>*</b>           | <del> </del>         |                      |           |           |
| 8    | Public support (Subtract line 7c from   |                       |                    |                      |                      |           |           |
| Ŭ    | line 6.)  |                       |                    |                      |                      |           | 1         |
| Sec  | tion B. Total Support   |                       | X                  |                      |                      |           | -         |
|      | ndar year (or fiscal year beginning in)   | (a) 2018              | <b>(b)</b> 2019    | (c) 2020             | (d) 2021             | (e) 2022  | (f) Total |
| 9    | Amounts from line 6   | , ,                   |                    | . ,                  | , ,                  | , ,       |           |
| 10a  | Gross income from interest, dividends,  | •                     |                    |                      |                      |           |           |
|      | payments received on securities loans, rents,   |                       |                    |                      |                      |           | 1         |
|      | royalties, and income from similar sources  |                       |                    |                      |                      |           |           |
| b    | Unrelated business taxable income (less   | 4                     |                    |                      |                      |           | 1         |
|      | section 511 taxes) from businesses  |                       |                    |                      |                      |           | 1         |
|      | acquired after June 30, 1975  |                       | *                  |                      |                      |           |           |
| С    | Add lines 10a and 10b   |                       |                    |                      |                      |           |           |
| 11   | Net income from unrelated business  |                       |                    |                      |                      |           | 1         |
|      | activities not included on line 10b, whether  |                       |                    |                      |                      |           | 1         |
|      | or not the business is regularly carried on .   |                       |                    |                      |                      |           |           |
| 12   | Other income. Do not include gain or  |                       |                    |                      |                      |           | 1         |
|      | loss from the sale of capital assets  |                       |                    |                      |                      |           | 1         |
|      | (Explain in Part VI.)   |                       |                    |                      |                      |           |           |
| 13   | Total support. (Add lines 9, 10c, 11,   |                       |                    |                      |                      |           | i         |
| 11   | and 12.)  | nization's first, soo | and third fourth o | or fifth toy year as | 0 000tion 501(0)(2)  |           |           |
| 14   | organization, check this box and <b>stop here</b>                                     |                       |                    | •                    | ( /( /               |           | Г         |
| S00  | tion C. Computation of Public Su  |                       |                    |                      |                      |           |           |
| 15   | Public support percentage for 2022 (line 8, c   |                       |                    | (f))                 |                      | 15        |           |
|      | Public support percentage for 2022 (line 6, C   |                       |                    |                      |                      | 16        |           |
|      | ction D. Computation of Investmen   |                       |                    |                      |                      | 1 1 1     |           |
| 17   | Investment income percentage for 2022 (line   |                       |                    | olumn (f))           |                      | 17        |           |
| 18   | Investment income percentage from <b>2021</b> S                                       |                       |                    |                      |                      | 18        |           |
|      | 33 1/3% support tests—2022. If the organi   |                       |                    |                      |                      |           |           |
|      | not more than 33 1/3%, check this box and s   |                       |                    |                      |                      |           |           |
| b    | 33 1/3% support tests—2021. If the organi   |                       |                    |                      |                      |           | ı         |
|      | line 18 is not more than 33 1/3%, check this  | box and stop here     | . The organization | qualifies as a pub   | licly supported orga | anization |           |
| 20   | Private foundation. If the organization did i   | not check a hov on    | line 14 19a or 10  | h check this hov a   | and see instructions | 1         |           |

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

|     | Yes | No |
|-----|-----|----|
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| 9a  |     |    |
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| 9b  |     |    |
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| 9с  |     |    |
|     |     |    |
| 10a |     |    |
| 10b |     |    |

Page **5** 

Southern Utah Wilderness Alliance

| Part     | Supporting Organizations (continued)   |          |            |          |
|----------|--|----------|------------|----------|
|          |  |          | Yes        | No       |
| 11       | Has the organization accepted a gift or contribution from any of the following persons?  |          |            |          |
| а        | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and   | 4.4      |            |          |
| <b>L</b> | 11c below, the governing body of a supported organization?   | 11a      |            |          |
| b        | A family member of a person described on line 11a above?   | 11b      |            |          |
| С        | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .  | 11c      |            |          |
| Secti    | on B. Type I Supporting Organizations  | 110      |            | <u> </u> |
|          |  |          | Yes        | No       |
| 1        | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or   |          |            |          |
|          | more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,  |          |            |          |
|          | directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)  |          |            |          |
|          | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported   |          |            |          |
|          | organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the   |          |            |          |
|          | supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.   | 1        |            |          |
| 2        | Did the organization operate for the benefit of any supported organization other than the supported  |          |            |          |
|          | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part  |          |            |          |
|          | VI how providing such benefit carried out the purposes of the supported organization(s) that operated,   |          |            |          |
|          | supervised, or controlled the supporting organization.   | 2        |            |          |
| Secti    | on C. Type II Supporting Organizations   |          | \ <u>'</u> |          |
| 4        | Were a majority of the armonization's directors or trustees during the tay years less a majority of the directors  |          | Yes        | No       |
| 1        | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors   |          |            |          |
|          | or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed                  |          |            |          |
|          | the supported organization(s).   | 1        |            |          |
| Secti    | on D. All Type III Supporting Organizations  |          |            | <u> </u> |
| 00011    | on B. All Type in Supporting Significations  |          | Yes        | No       |
| 1        | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the   |          |            |          |
|          | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax  |          |            |          |
|          | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the   |          |            |          |
|          | organization's governing documents in effect on the date of notification, to the extent not previously provided?   | 1        |            |          |
| 2        | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported   |          |            |          |
|          | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how   |          |            |          |
|          | the organization maintained a close and continuous working relationship with the supported organization(s).  | 2        |            |          |
| 3        | By reason of the relationship described on line 2, above, did the organization's supported organizations have  |          |            |          |
|          | a significant voice in the organization's investment policies and in directing the use of the organization's   |          |            |          |
|          | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's   |          |            |          |
|          | supported organizations played in this regard.   | 3        |            | <u> </u> |
| Secti    | on E. Type III Functionally Integrated Supporting Organizations  |          |            |          |
| 1        | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru  | ctions   | s).        |          |
| а        | The organization satisfied the Activities Test. Complete line 2 below.   |          |            |          |
| b        | The organization is the parent of each of its supported organizations. Complete line 3 below.  |          |            |          |
| С        | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see   | instruct | ions).     |          |
| 2        | Activities Test. Answer lines 2a and 2b below.   |          | Yes        | No       |
| а        | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of   |          |            |          |
|          | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify   |          |            |          |
|          | those supported organizations and explain how these activities directly furthered their exempt purposes,   |          |            |          |
|          | how the organization was responsive to those supported organizations, and how the organization determined  |          |            |          |
|          | that these activities constituted substantially all of its activities.   | 2a       |            |          |
| b        | Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,  |          |            |          |
|          | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in   |          |            |          |
|          | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in   |          |            |          |
|          | these activities but for the organization's involvement.   | 2b       |            |          |
| 3        | Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>  |          |            |          |
| а        | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or  | 2-       |            |          |
| h        | trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in <b>Part VI</b>.</i>   | 3a       |            |          |
| b        | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard. | 3b       |            |          |
|          | or to supported organizations: If Tes, describe in Fart VI the role played by the organization in this regard.   | JU       |            | <u> </u> |

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O   | rgar   | nizations                   |                                |  |  |  |  |
|--|--------|-----------------------------|--------------------------------|--|--|--|--|
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See |        |                             |                                |  |  |  |  |
| instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.          |        |                             |                                |  |  |  |  |
| Section A - Adjusted Net Income  |        | (A) Prior Year              | (B) Current Year<br>(optional) |  |  |  |  |
| 1 Net short-term capital gain  | 1      |                             |                                |  |  |  |  |
| 2 Recoveries of prior-year distributions   | 2      |                             |                                |  |  |  |  |
| 3 Other gross income (see instructions)  | 3      |                             |                                |  |  |  |  |
| 4 Add lines 1 through 3.   | 4      |                             |                                |  |  |  |  |
| 5 Depreciation and depletion   | 5      | <u> </u>                    |                                |  |  |  |  |
| 6 Portion of operating expenses paid or incurred for production or collection of   |        |                             |                                |  |  |  |  |
| gross income or for management, conservation, or maintenance of property   |        |                             |                                |  |  |  |  |
| held for production of income (see instructions)   | 6      |                             |                                |  |  |  |  |
| 7 Other expenses (see instructions)  | 7      |                             |                                |  |  |  |  |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)   | 8      |                             |                                |  |  |  |  |
| Section B - Minimum Asset Amount   |        | (A) Prior Year              | (B) Current Year<br>(optional) |  |  |  |  |
| 1 Aggregate fair market value of all non-exempt-use assets (see  |        |                             |                                |  |  |  |  |
| instructions for short tax year or assets held for part of year):  |        |                             |                                |  |  |  |  |
| a Average monthly value of securities  | 1a     |                             |                                |  |  |  |  |
| <b>b</b> Average monthly cash balances   | 1b     |                             |                                |  |  |  |  |
| c Fair market value of other non-exempt-use assets   | 1c     | <b>/</b> )                  |                                |  |  |  |  |
| d Total (add lines 1a, 1b, and 1c)   | 1d     |                             |                                |  |  |  |  |
| e Discount claimed for blockage or other factors   |        |                             |                                |  |  |  |  |
| (explain in detail in <b>Part VI</b> ):  |        |                             |                                |  |  |  |  |
| Acquisition indebtedness applicable to non-exempt-use assets   | 2      |                             |                                |  |  |  |  |
| 3 Subtract line 2 from line 1d.  | 3      |                             |                                |  |  |  |  |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,  |        |                             |                                |  |  |  |  |
| see instructions).   | 4      |                             |                                |  |  |  |  |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5      |                             |                                |  |  |  |  |
| 6 Multiply line 5 by 0.035.  | 6      |                             |                                |  |  |  |  |
| 7 Recoveries of prior-year distributions   | 7      |                             |                                |  |  |  |  |
| 8 Minimum Asset Amount (add line 7 to line 6)  | 8      |                             |                                |  |  |  |  |
| Section C - Distributable Amount   |        |                             | Current Year                   |  |  |  |  |
| 1 Adjusted net income for prior year (from Section A, line 8, column A)  | 1      |                             |                                |  |  |  |  |
| 2 Enter 0.85 of line 1.  | 2      |                             |                                |  |  |  |  |
| 3 Minimum asset amount for prior year (from Section B, line 8, column A)   | 3      |                             |                                |  |  |  |  |
| 4 Enter greater of line 2 or line 3.   | 4      |                             |                                |  |  |  |  |
| 5 Income tax imposed in prior year   | 5      |                             |                                |  |  |  |  |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to   |        |                             |                                |  |  |  |  |
| emergency temporary reduction (see instructions).  | 6      |                             |                                |  |  |  |  |
| 7 Check here if the current year is the organization's first as a non-functionall instructions).                                   | y inte | egrated Type III supporting | organization (see              |  |  |  |  |

| Part '   | Type III Non-Functionally Integrated 509(a)(3  | ) Supporting Organi                | zations (continue                     | d) | •   |  |  |
|----------|--|------------------------------------|---------------------------------------|----|---|--|--|
| Section  | on D - Distributions   |                                    |                                       |    | Current Year                              |  |  |
| 1        | Amounts paid to supported organizations to accomplish exe                              | empt purposes                      |                                       | 1  |   |  |  |
| 2        | 2 Amounts paid to perform activity that directly furthers exempt purposes of supported |                                    |                                       |    |   |  |  |
|          | organizations, in excess of income from activity                                       |                                    |                                       | 2  |   |  |  |
|          | Administrative expenses paid to accomplish exempt purpos                               | es of supported organiza           | ations                                | 3  |   |  |  |
|          | Amounts paid to acquire exempt-use assets  |                                    |                                       | 4  |   |  |  |
| 5        | Qualified set-aside amounts (prior IRS approval required—                              | provide details in <b>Part V</b> i | )                                     | 5  |   |  |  |
| 6        | Other distributions (describe in <b>Part VI</b> ). See instructions.                   |                                    |                                       | 6  |   |  |  |
| 7        | <b>Total annual distributions.</b> Add lines 1 through 6.                              |                                    |                                       | 7  |   |  |  |
| 8        | Distributions to attentive supported organizations to which the                        | he organization is respo           |                                       |    |   |  |  |
|          | (provide details in <b>Part VI</b> ). See instructions.                                |                                    |                                       | 8  |   |  |  |
| 9        | Distributable amount for 2022 from Section C, line 6                                   |                                    |                                       | 9  | •   |  |  |
| 10       | Line 8 amount divided by line 9 amount   | Т                                  |                                       | 10 | 0.000                                     |  |  |
|          | Section E - Distribution Allocations (see instructions)                                | (i)<br>Excess Distributions        | (ii)<br>Underdistribution<br>Pre-2022 | ıs | (iii)<br>Distributable<br>Amount for 2022 |  |  |
| 1        | Distributable amount for 2022 from Section C, line 6                                   |                                    |                                       |    |   |  |  |
| 2        | Underdistributions, if any, for years prior to 2022                                    |                                    |                                       |    |   |  |  |
|          | (reasonable cause required—explain in Part VI). See                                    |                                    |                                       |    |   |  |  |
|          | instructions.  |                                    |                                       |    |   |  |  |
| 3        | Excess distributions carryover, if any, to 2022  |                                    |                                       |    |   |  |  |
| a        | From 2017  | 4 4 7                              |                                       |    |   |  |  |
| b        | From 2018  |                                    |                                       |    |   |  |  |
| c        | From 2019  |                                    |                                       |    |   |  |  |
| d        | From 2020  |                                    |                                       |    |   |  |  |
|          | From 2021  |                                    |                                       |    |   |  |  |
|          | <b>Total</b> of lines 3a through 3e  | X                                  |                                       |    |   |  |  |
|          | Applied to underdistributions of prior years   |                                    |                                       |    |   |  |  |
| <u> </u> | Applied to 2022 distributable amount   |                                    |                                       |    |   |  |  |
| i        | Carryover from 2017 not applied (see instructions)                                     |                                    |                                       |    |   |  |  |
| <u>i</u> | Remainder. Subtract lines 3g, 3h, and 3i from line 3f.                                 |                                    |                                       |    |   |  |  |
| 4        | Distributions for 2022 from Section D, line 7: \$                                      |                                    |                                       |    |   |  |  |
| <u>a</u> | Applied to underdistributions of prior years   |                                    |                                       |    |   |  |  |
| b        | Applied to 2022 distributable amount   |                                    |                                       |    |   |  |  |
| c        | Remainder. Subtract lines 4a and 4b from line 4.                                       |                                    |                                       |    |   |  |  |
| 5        | Remaining underdistributions for years prior to 2022, if                               |                                    |                                       |    |   |  |  |
|          | any. Subtract lines 3g and 4a from line 2. For result                                  |                                    |                                       |    |   |  |  |
|          | greater than zero, explain in Part VI. See instructions.                               |                                    |                                       |    |   |  |  |
| 6        | Remaining underdistributions for 2022. Subtract lines 3h                               |                                    |                                       |    |   |  |  |
|          | and 4b from line 1. For result greater than zero, explain                              |                                    |                                       |    |   |  |  |
|          | in Part VI. See instructions.  |                                    |                                       |    |   |  |  |
| 7        | Excess distributions carryover to 2023. Add lines 3j                                   |                                    |                                       |    |   |  |  |
|          | and 4c.  |                                    |                                       |    |   |  |  |
| 8        | Breakdown of line 7:   |                                    |                                       |    |   |  |  |
| a        | Excess from 2018   |                                    |                                       |    |   |  |  |
| b        | Excess from 2019   |                                    |                                       |    |   |  |  |
| C        | Excess from 2020   |                                    |                                       |    |   |  |  |
| d        | Excess from 2021   |                                    |                                       |    |   |  |  |
| e        | Excess from 2022   |                                    |                                       |    |   |  |  |

| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, |
|---------|--|
|         | lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)   |
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# SCHEDULE C (Form 990)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

| • 5        | Section 501(c)(4), (5), or (6) o            | rganizations: Complete Part III.   |                      |  |  |  |  |
|------------|---|--|----------------------|--|--|--|--|
| Nam        | e of organization                           |  |                      | Employ                                     | yer identification number                          |  |  |
| Sou        | outhern Utah Wilderness Alliance 94-2936961 |  |                      |  |  |  |  |
| Pa         | rt I-A Complete if t                        | he organization is exempt und  | der section 501      | (c) or is a section 527                    | organization.                                      |  |  |
| 1          | Provide a description of the                | he organization's direct and indirect p  | oolitical campaign   | activities in Part IV. See ir              | structions for                                     |  |  |
|            | definition of "political cam                |  |                      |  |  |  |  |
| 2          |   | expenditures. See instructions   |                      |  | \$   |  |  |
| 3          |   | cal campaign activities. See instruction                                       |                      |  |  |  |  |
| Pa         |   | he organization is exempt und  |                      |  |  |  |  |
| 1          |   | excise tax incurred by the organization  |                      |  | B  |  |  |
| 2          |   | excise tax incurred by organization m  |                      |  | •  |  |  |
| 3          | If the organization incurre                 | ed a section 4955 tax, did it file Form  | 4720 for this year   | ?  | Yes No   |  |  |
| 4a         | Was a correction made?                      |  |                      |  | Yes No   |  |  |
| b          | If "Yes," describe in Part I                |  |                      |  |  |  |  |
| Pa         |   | he organization is exempt und  |                      |  | 1(c)(3).   |  |  |
| 1          |   | expended by the filing organization f  |                      |  |  |  |  |
|            |   |  |                      |  | \$   |  |  |
| 2          |   | ling organization's funds contributed  |                      |  |  |  |  |
|            |   | vities   |                      |  | \$   |  |  |
| 3          |   | penditures. Add lines 1 and 2. Enter h   |                      |  |  |  |  |
|            |   |  |                      |  | \$ <del></del> <del></del>                         |  |  |
| 4          |   | file Form 1120-POL for this year? .  |                      |  | Yes No   |  |  |
| 5          |   | ses and employer identification numb   |                      |  |  |  |  |
|            |   | ents. For each organization listed, en   |                      |  |  |  |  |
|            |   | ntributions received that were promp<br>I fund or a political action committee |                      |  |  |  |  |
|            | as a separate segregated                    |  | (1 AO). Il additione |  | information in rate iv.                            |  |  |
|            | (a) Name                                    | (b) Address  | (c) EIN              | (d) Amount paid from filing organization's | (e) Amount of political contributions received and |  |  |
|            |   |  |                      | funds. If none, enter -0                   | promptly and directly                              |  |  |
|            |   | (/)  |                      |  | delivered to a separate political organization. If |  |  |
|            |   |  |                      |  | none, enter -0                                     |  |  |
|            |   |  |                      |  |  |  |  |
| (1)        |   |  |                      |  |  |  |  |
|            |   |  |                      |  |  |  |  |
| (2)        |   |  | †                    |  |  |  |  |
| <b>(0)</b> |   |  |                      |  |  |  |  |
| (3)        |   |  |                      |  |  |  |  |
| (4)        |   |  |                      |  |  |  |  |
| (")        |   |  |                      |  |  |  |  |
| (5)        | :   |  |                      |  |  |  |  |
| ,          |   |  |                      |  |  |  |  |
| (6)        | :   |  |                      |  |  |  |  |
|            |   |  |                      |  |  |  |  |

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Schedule C (Form 990) 2022

|          | - (  |                    |                     |                      |                       | raye <b>z</b>  |
|----------|--|--------------------|---------------------|----------------------|-----------------------|----------------|
| P        | art II-A Complete if the organization  | n is exempt u      | nder section 50     | 01(c)(3) and filed   | Form 5768 (elec       | ction          |
|          | under section 501(h)).   |                    |                     |                      |                       |                |
| Α        | Check if the filing organization belong  | •                  | •                   |                      | ed group member's     |                |
|          | name, address, EIN, expense  |                    |                     | • ,                  |                       |                |
| В        | Check if the filing organization check   | ed box A and "lii  | mited control" prov | isions apply.        |                       |                |
|          | Limits on Lobb   |                    |                     |                      | (a) Filing            | (b) Affiliated |
|          | (The term "expenditures" me  | eans amounts p     | oaid or incurred.)  |                      | organization's totals | group totals   |
| 1a       | Total lobbying expenditures to influence pub   | lic opinion (gras  | sroots lobbying) .  |                      | 5,056                 |                |
| b        | Total lobbying expenditures to influence a le  | gislative body (c  | lirect lobbying)    |                      | 20,632                |                |
| С        | Total lobbying expenditures (add lines 1a an   | d 1b)              |                     |                      | 25,688                |                |
| d        | Other exempt purpose expenditures  |                    |                     |                      | 4,472,192             |                |
| е        | Total exempt purpose expenditures (add line  | es 1c and 1d) .    |                     |                      | 4,497,880             |                |
| f        | Lobbying nontaxable amount. Enter the amo  | unt from the foll  | owing table in both | 1                    |                       |                |
|          | columns.   |                    | · ·                 |                      | 374,894               |                |
|          | If the amount on line 1e, column (a) or (b) is:  | The lobbying       | nontaxable amou     | nt is:               |                       |                |
|          | Not over \$500,000   |                    | ount on line 1e.    |                      |                       |                |
|          | Over \$500,000 but not over \$1,000,000  |                    | 15% of the excess   |                      |                       |                |
|          | Over \$1,000,000 but not over \$1,500,000  |                    | 10% of the excess   |                      |                       |                |
| -        | Over \$1,500,000 but not over \$17,000,000   | \$225,000 plus     | 5% of the excess of | ver \$1,500,000.     |                       |                |
|          | Over \$17,000,000  | \$1,000,000.       |                     |                      |                       |                |
| g        | Grassroots nontaxable amount (enter 25% o  | f line 1f)         |                     |                      | 93,724                |                |
| h        | Subtract line 1g from line 1a. If zero or less,  | enter -0           |                     |                      |                       |                |
| i        | Subtract line 1f from line 1c. If zero or less, e  |                    |                     |                      |                       |                |
| j        | If there is an amount other than zero on either  | er line 1h or line | 1i, did the organiz | ation file Form 4720 | reporting _           |                |
|          | section 4911 tax for this year?  |                    |                     |                      |                       | Yes No         |
|          | 4-Y  | ear Averaging      | Period Under Sec    | tion 501(h)          |                       |                |
|          | (Some organizations that made a se   | ction 501(h) ele   | ection do not hav   | e to complete all o  | f the five columns    | below.         |
|          | See the  | separate instr     | uctions for lines   | 2a through 2f.)      |                       |                |
|          |  |                    |                     |                      |                       |                |
|          | Lobbyin  | g Expenditures     | During 4-Year A     | veraging Period      |                       |                |
|          | Calendar year (or fiscal year  | (a) 2019           | <b>(b)</b> 2020     | <b>(c)</b> 2021      | (d) 2022              | (e) Total      |
|          | beginning in)  | (a) 2013           | (6) 2020            | (6) 2021             | (d) 2022              | (c) Total      |
|          | 2299   |                    |                     |                      |                       |                |
| <u> </u> | Labbada a a sabarable sa   |                    |                     |                      |                       |                |
| 2a       | Lobbying nontaxable amount   | 351,988            | 344,431             | 356,554              | 374,894               | 1,427,867      |
| b        | Lobbying ceiling amount  |                    |                     |                      |                       |                |
|          | (150% of line 2a, column(e))   |                    |                     |                      |                       | 2,141,801      |
| С        | Total lobbying expenditures  |                    |                     |                      |                       |                |
|          |  | 30,989             | 30,021              | 44,394               | 25,688                | 131,092        |
| d        | Grassroots nontaxable amount   | _                  |                     |                      |                       |                |
| -        | The state of the s | 87.997             | 86.108              | 89.139               | 93.724                | 356.968        |

13,398

7,870

2,170

Schedule C (Form 990) 2022

5,056

535,452

28,494

Schedule C (Form 990) 2022 Page **3** 

| Fai               | t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).  | iiea   | Forr           | n 5768   | }      |       |
|-------------------|---|--------|----------------|----------|--------|-------|
| For               |   | (a     | )              |          | (b)    |       |
|                   | each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.   | es     | No             | Aı       | nount  | t     |
| 1<br>a<br>b       | During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  Volunteers?   |        |                |          |        |       |
| c<br>d<br>e       | Media advertisements?   |        | •              |          |        |       |
| f<br>g<br>h<br>i  | Direct contact with legislators, their staffs, government officials, or a legislative body?   |        |                |          |        |       |
| 2a<br>b<br>c<br>d | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912  |        |                |          |        |       |
| Par               | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).   | (5),   | or se          | ection   |        |       |
| 1<br>2<br>3       | Were substantially all (90% or more) dues received nondeductible by members?  |        |                | 2        | Yes    | No    |
|                   | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes."   | (5),   | or se          | ection   | line 3 | 3, is |
| 1<br>2            | Dues, assessments and similar amounts from members  |        | 1              |          |        |       |
| a<br>b<br>c       | Current year  | -      | 2a<br>2b<br>2c |          |        |       |
| 3                 | Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues If notices were sent and the amount on line $2c$ exceeds the amount on line $3$ , what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible | Ī      | 3              |          |        |       |
| 5                 | lobbying and political expenditures next year?  | · -    | 5              |          |        |       |
|                   | Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lise instructions); and Part II-B, line 1. Also, complete this part for any additional information.  | st); P | art II-        | A, lines | 1 and  |       |
|                   |   |        |                |          |        |       |
|                   |   |        |                |          |        |       |
|                   |   |        |                |          |        |       |

|         | orm 990) 2022                        | Page <b>4</b> |
|---------|--------------------------------------|---------------|
| Part IV | Supplemental Information (continued) |               |
|         |                                      |               |
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# SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

### **Supplemental Financial Statements**

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification numbe

Southern Utah Wilderness Alliance Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds 1 Total number at end of year . . . . . . . 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) . . . . 3 Aggregate value at end of year . . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . . . c Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after July 25, 2006, and not Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: **b** Assets included in Form 990, Part X.

| Part     | Organizations Maintaining (   | Collections of Ar      | t, Historical Tre            | asures, or Othe                       | r Similar Assets                        | (conti        | nued)    |          |  |
|----------|---|------------------------|------------------------------|---------------------------------------|---|---------------|----------|----------|--|
| 3        | 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its |                        |                              |                                       |   |               |          |          |  |
|          | collection items (check all that apply):  |                        |                              |                                       |   |               |          |          |  |
| а        | Public exhibition   |                        | <b>d</b> Loan or             | exchange program                      | 1                                       |               |          |          |  |
| b        | Scholarly research  |                        | e Other                      |                                       |   |               |          |          |  |
| С        | Preservation for future generations   | S                      |                              |                                       |   |               |          |          |  |
| 4        |   |                        |                              |                                       |   |               |          |          |  |
|          | XIII.   |                        |                              | · ·                                   |   |               |          |          |  |
| 5        | During the year, did the organization se  | olicit or receive dona | ations of art, historic      | cal treasures, or ot                  | her similar                             |               |          | _        |  |
|          | assets to be sold to raise funds rather   | than to be maintaine   | ed as part of the org        | ganization's collecti                 | on?                                     | Ye            | es       | No       |  |
| Part     | IV Escrow and Custodial Arrar   | ngements.              |                              |                                       | 1                                       |               |          |          |  |
|          | Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form                           |                        |                              |                                       |   |               |          |          |  |
|          | 990, Part X, line 21.   |                        |                              |                                       |   |               |          |          |  |
| 1a       | Is the organization an agent, trustee, c  |                        | =                            | ibutions or other a                   | ssets not                               |               | _        | 1        |  |
|          | included on Form 990, Part X?   |                        |                              |                                       |   | Ye            | es       | No       |  |
| b        | If "Yes," explain the arrangement in Pa   | irt XIII and complete  | the following table          | :                                     |   |               |          |          |  |
| _        | Paginning halange   |                        |                              |                                       | lc A                                    | mount         |          |          |  |
| c<br>d   | Beginning balance   |                        |                              |                                       | ld                                      |               |          |          |  |
| e        | Distributions during the year   |                        |                              |                                       | le                                      |               |          |          |  |
| f        | Ending balance  |                        |                              |                                       | 1f                                      |               |          |          |  |
| 2a       | Did the organization include an amoun   |                        |                              | ow or custodial acc                   | count liability?                        | Ye            | s X      | No       |  |
| b        | If "Yes," explain the arrangement in Pa   |                        |                              | , , , , , , , , , , , , , , , , , , , |   |               |          |          |  |
| Part     |   | III AIII. OHOOK HOIC I | ir the explanation ha        | as been provided o                    |   | · · ·         |          | <u> </u> |  |
| rart     | Complete if the organization a  | nswered "Yes" o        | n Form 990 Part              | IV line 10                            |   |               |          |          |  |
|          | Complete if the organization of   | (a) Current year       | (b) Prior year               | (c) Two years back                    | (d) Three years back                    | <b>(e)</b> Fo | ur years | back     |  |
| 1a       | Beginning of year balance   | 4,153,937              | 3,581,747                    | 3,068,457                             | † · · · · · · · · · · · · · · · · · · · |               |          | 54,791   |  |
| b        | Contributions   | , ,                    |                              | , ,                                   | , ,                                     |               |          |          |  |
| С        | Net investment earnings, gains,   |                        |                              |                                       |   |               |          |          |  |
|          | and losses  | -763,737               | 585,426                      | 523,500                               | 611,916                                 | 3             | -17      | 78,715   |  |
| d        | Grants or scholarships  |                        |                              |                                       |   |               |          |          |  |
| е        | Other expenditures for facilities   |                        |                              |                                       |   |               |          |          |  |
| _        | and programs  | 20.000                 | 40.000                       | 10.010                                | 0.04                                    |               |          | 0.004    |  |
| f        | Administrative expenses   | 12,809                 | 13,236                       | 10,210                                |   | _             |          | 9,891    |  |
| g        | End of year balance   | 3,377,391              | 4,153,937                    | 3,581,747                             | 3,068,457                               | <u>′  </u>    | 2,46     | 6,185    |  |
| г<br>а   | Provide the estimated percentage of the Board designated or quasi-endowment   |                        | 9%                           | numm (a)) neiu as.                    |   |               |          |          |  |
| b        | Permanent endowment   | 11%                    |                              |                                       |   |               |          |          |  |
| С        | Term endowment  | %                      |                              |                                       |   |               |          |          |  |
|          | The percentages on lines 2a, 2b, and 2  | c should equal 100     | 1%.                          |                                       |   |               |          |          |  |
| 3a       | Are there endowment funds not in the  | possession of the o    | rganization that are         | held and administ                     | ered for the                            | ŗ             | 1        |          |  |
|          | organization by:  |                        |                              |                                       |   |               | Yes      | No       |  |
|          | (i) Unrelated organizations   |                        |                              |                                       |   | 3a(i)         |          | Х        |  |
|          | ( )   |                        |                              |                                       |   | 3a(ii)        |          | X        |  |
| b        | If "Yes" on line 3a(ii), are the related on   | •                      | •                            |                                       |   | 3b            |          | N/A      |  |
| Part     | Describe in Part XIII the intended uses  VI Land, Buildings, and Equip  |                        | s chaowinent lunas           | o.                                    |   |               |          |          |  |
| rart     | Complete if the organization a  |                        | n Form 990 Part              | IV line 11a Sec                       | Form 990 Part                           | X line        | 10       |          |  |
|          | Description of property   | (a) Cost or oth        |                              |                                       | c) Accumulated                          |               | ook valu |          |  |
|          | Description of property   | (investme              | , ,                          | other)                                | depreciation                            | (u) D         | Jon valu | •        |  |
| 1a       | Land  |                        |                              | 416,000                               |   |               | 41       | 6,000    |  |
| b        | Buildings   |                        |                              | 857,740                               | 559,970                                 |               | 29       | 7,770    |  |
| С        | Leasehold improvements  |                        |                              |                                       |   |               |          |          |  |
| d        | Equipment   | 1                      |                              | 357,104                               | 239,831                                 |               | 11       | 17,273   |  |
| <u>е</u> | Other   |                        |                              |                                       |   |               | _        |          |  |
| Total    | . Add lines 1a through 1e. (Column (d) r  | nust equal Form 99     | <u>∪, Part X, colu</u> mn (E | 3), line 10c.) .   .   .              |   |               | 83       | 31,043   |  |

| Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.  (a) Description of security or chaptory (b) Book visible (Cost or excit-dy-pear market visible (Cost or excit-dy-p | Part VII     | Investments—Other Securities.   | II) / II           | 5 . 10 . 1                                | 200 5 13/ 11 10           |
|--|--------------|---|--------------------|---|---------------------------|
| (1) Financial derivatives (2) Closely held equity interests. (3) Other (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (10) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9   |              |   |                    |   |                           |
| (2) Closely held equity interests  |              | (a) Description of security or category<br>(including name of security) | (b) Book value     | (c) Method of va<br>Cost or end-of-year i | aluation:<br>market value |
| (3) Other (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B   |              |   |                    |   |                           |
| A  |              | · ·   |                    |   |                           |
| (B)  |              |   |                    |   |                           |
| C  |              |   |                    |   |                           |
| (F)    |              |   |                    |   |                           |
| (E)   (F)    |              |   |                    | •   |                           |
| (F)  |              |   |                    |   |                           |
| (S) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.).    Part XI   |              |   |                    |   |                           |
| Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.   | (0)          |   |                    |   | -                         |
| Total. Column (b) must equal Form 990. Part X, col. (B) line 12.   |              |   |                    |   |                           |
| Investments—Program Related.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  |              | n (b) must equal Form 990. Part X. col. (B) line 12.).                  |                    |   |                           |
| Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.   (a) Description of Investment   (b) Book value   (c) Method of valuation: Cost of end-d-lyses market value  |              |   | 1                  |   |                           |
| (a) Description of investment (b) Book value Cost or end-of-year market value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total, (Collumn (b) must equal Form 990, Part X, col. (B) line 13.).  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) must equal Form 990, Part X, col. (B) line 15.)  (9) Total, (Collumn (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (1) (2) (3) (4) (5) (9) Total, (Collumn (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (1) Federal income taxes (2) LEASE LIABILITY (b) Book value (1) Federal income taxes (2) LEASE LIABILITY (3) (4) (5) (6) (7) (6) (7) (8) (9)  |              |   | "Yes" on Form 990, | Part IV, line 11c. See Form 9             | 990, Part X, line 13.     |
| (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.).  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) LEASE LIABILITY (b) Book value (3) (4) (5) (6) (7) (8) (9) (9)  |              |   |                    | (c) Method of va                          | aluation:                 |
| (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY (a) Description of liability (b) Book value  (4) (5) (6) (6) (7) (8) (9)   | (1)          |   |                    |   |                           |
| (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9) (9)   | (2)          |   |                    |   |                           |
| (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.).  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes. (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (5) (6) (6) (7) (8) (9) (9) (9)  | (3)          |   |                    |   |                           |
| (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.).  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (6) (7) (8) (9)   | (4)          |   | •                  |   |                           |
| (7) (8) (9) Total. (Column (b) must equal Form 990. Part X, col. (B) line 13.).  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)  | (5)          |   |                    |   |                           |
| (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.).  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (f) (2) (3) (4) (5) (6) (7) (8) (9)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY (3) (4) (5) (6) (7) (8) (9)  | (6)          |   |                    |   |                           |
| Total.   Column (b) must equal Form 990, Part X, col. (B) line 13.).   Part IX   |              |   |                    |   |                           |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.).   Part IX  |              |   |                    |   |                           |
| Part IX  |              | (I)   |                    |   |                           |
| Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (6) (7) (8) (9)   |              |   |                    |   |                           |
| (a) Description (b) Book value  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2) LEASE LIABILITY 94,254  (3)  (4)  (5)  (6)  (7)  (8)  (9)  | Part IX      |   | "Vao" on Form 000  | Dort IV line 11d See Form                 | 000 Dort V line 15        |
| (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)  |              | <del>-</del>  |                    | Part IV, line 11d. See Forms              |                           |
| (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)   | (1)          | (a) Descri  | 19tion             |   | (b) Book value            |
| (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)   |              |   |                    |   |                           |
| (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)   |              |   |                    |   |                           |
| (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  |              |   |                    |   |                           |
| (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)   |              |   |                    |   |                           |
| (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)  |              |   |                    |   |                           |
| (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  |              |   |                    |   |                           |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)   | (8)          |   |                    |   |                           |
| Part X Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY (3) (4) (5) (6) (7) (8) (9)   |              |   |                    |   |                           |
| Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) LEASE LIABILITY (3) (4) (5) (6) (7) (8) (9)  | Total. (Colu | ımn (b) must equal Form 990, Part X, col. (B) I                         | ine 15.)           |   |                           |
| Line 25.   Control   Con   | Part X       |   |                    |   |                           |
| 1.       (a) Description of liability       (b) Book value         (1) Federal income taxes       94,254         (2) LEASE LIABILITY       94,254         (3)       94,254         (4)       95         (6)       99   |              | Complete if the organization answered                                   | "Yes" on Form 990, | Part IV, line 11e or 11f. See             | Form 990, Part X,         |
| (1) Federal income taxes (2) LEASE LIABILITY (3) (4) (5) (6) (7) (8) (9)   |              | line 25.  |                    |   |                           |
| (2) LEASE LIABILITY 94,254 (3) (4) (5) (6) (7) (8) (9)   |              |   | tion of liability  |   | (b) Book value            |
| (3) (4) (5) (6) (7) (8) (9)  |              |   |                    |   |                           |
| (4)<br>(5)<br>(6)<br>(7)<br>(8)<br>(9)   |              | LIABILITY   |                    |   | 94,254                    |
| (5)<br>(6)<br>(7)<br>(8)<br>(9)  |              |   |                    |   |                           |
| (6)<br>(7)<br>(8)<br>(9)   |              |   |                    |   |                           |
| (7)<br>(8)<br>(9)  |              |   |                    |   |                           |
| (8)<br>(9)   |              |   |                    |   |                           |
| (9)  |              |   |                    |   |                           |
|  |              |   |                    |   |                           |
|  |              | umn (h) must equal Form 000 Part V col (P) I                            | ine 25 )           |   | 04.254                    |

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

Х

|  | Reconciliation of Revenue per Audited Financial Statements With Revenue per Re   | eturn.  |
|--|--|---------|
|  | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  |         |
| 1  | Total revenue, gains, and other support per audited financial statements   | 1       |
| 2  | Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |         |
| а  | Net unrealized gains (losses) on investments   | -       |
| b  | Donated services and use of facilities   | -       |
| С  | Recoveries of prior year grants  | -       |
| d  | Other (Describe in Part XIII.)   |         |
| е  | Add lines 2a through 2d  | 2e      |
| 3  | Subtract line 2e from line 1   | 3       |
| 4  | Amounts included on Form 990, Part VIII, line 12, but not on line 1:   |         |
| а  | Investment expenses not included on Form 990, Part VIII, line 7b 4a  |         |
| b  | Other (Describe in Part XIII.)   |         |
| _  | Add lines <b>4a</b> and <b>4b</b>  | 4c      |
| 5  | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  | 5       |
| Part   | Reconciliation of Expenses per Audited Financial Statements With Expenses per  | Return. |
|  | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  |         |
| 1  | Total expenses and losses per audited financial statements   | 1       |
| 2  | Amounts included on line 1 but not on Form 990, Part IX, line 25:  |         |
| а  | Donated services and use of facilities   |         |
| b  | Prior year adjustments   |         |
| С  | Other losses   |         |
| d  | Other (Describe in Part XIII.)   |         |
| е  | Add lines 2a through 2d  | 2e      |
| 3  | Other losses   | 3       |
| 4  | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |         |
| а  | investment expenses not included on Form 990, Part VIII, line 7b   |         |
| b  | Other (Describe in Part XIII.)   |         |
| С  | Add lines <b>4a</b> and <b>4b</b>  | 4c      |
| 5  | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)   | 5       |
|  | NIII Supplemental Information  |         |
|  | XIII Supplemental Information.   |         |
|  | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa  |         |
|  |  |         |
| 2; Pa  | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa  |         |
| 2; Pa  | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information  |         |
| 2; Pa<br>Part )  | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information  |         |
| 2; Pa<br>Part )<br>as ex   | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the Organization has been recognized by the Internal Revenue Service (IRS)  seempt from federal income taxes under Section 501(c)(3), qualifying for the charitable  |         |
| 2; Pa<br>Part )<br>as ex   | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IX, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the Organization has been recognized by the Internal Revenue Service (IRS)   |         |
| 2; Pa<br>Part )<br>as ex   | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the Organization has been recognized by the Internal Revenue Service (IRS)  seempt from federal income taxes under Section 501(c)(3), qualifying for the charitable  |         |
| 2; Pa Part > as ex contri  | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the Organization has been recognized by the Internal Revenue Service (IRS)  seempt from federal income taxes under Section 501(c)(3), qualifying for the charitable  |         |
| 2; Pa Part > as ex contri  | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the Organization has been recognized by the Internal Revenue Service (IRS)  seempt from federal income taxes under Section 501(c)(3), qualifying for the charitable ibution deduction under section170(b)(1)(A)(vi) and has been determined not to be a   |         |
| 2; Pa Part ) as ex contri  | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the complete this  | ation.  |
| 2; Pa Part ) as ex contri  | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the complete this  |         |
| 2; Pa Part ) as ex contri privat Retur                           | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional informax X Line 2 The Organization has been recognized by the Internal Revenue Service (IRS)  Exempt from federal income taxes under Section 501(c)(3), qualifying for the charitable ibution deduction under section170(b)(1)(A)(vi) and has been determined not to be a te foundation under Section 509(a). The Organization is annually required to file a rn of Organization Exempt from Income Tax (Form 990) and is subject to income tax on  | ation.  |
| 2; Pa Part ) as ex contri privat Retur                           | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete the comp | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in                    | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the Also Complete this part to provide any additional information in the Companization has been recognized by the Internal Revenue Service (IRS)  Rempt from federal income taxes under Section 501(c)(3), qualifying for the charitable ibution deduction under section 170(b)(1)(A)(vi) and has been determined not to be a set of the foundation under Section 509(a). The Organization is annually required to file a set of Organization Exempt from Income Tax (Form 990) and is subject to income tax on the come that is derived from business activities that are unrelated to their exempt   | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in                    | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the Also Complete this part to provide any additional information in the Companization has been recognized by the Internal Revenue Service (IRS)  Rempt from federal income taxes under Section 501(c)(3), qualifying for the charitable ibution deduction under section 170(b)(1)(A)(vi) and has been determined not to be a set of the foundation under Section 509(a). The Organization is annually required to file a set of Organization Exempt from Income Tax (Form 990) and is subject to income tax on the come that is derived from business activities that are unrelated to their exempt   | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in                    | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the second  | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in                    | Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete this part to provide any additional information in the complete that is derived from business activities that are unrelated to their exempt complete the complete that the complete the compl | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in purpo busin        | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IX, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the second part of the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 2 The Organization for the charitable  Example 3 The Organization for the charitable  Example 4 The Organization is annually required to the annually required to file a  Example 4 The Organization form business activities that are unrelated to their exempt  Example 5 The Organization is not subject to unrelated  Example 6 The Organization is not subject to unrelated  Example 6 The Organization has appropriate support for the Part III organization has appropriate has a support III organization has appropriate has | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in purpo busin        | ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IX, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the second part of the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 2 The Organization for the charitable  Example 3 The Organization for the charitable  Example 4 The Organization is annually required to the annually required to file a  Example 4 The Organization form business activities that are unrelated to their exempt  Example 5 The Organization is not subject to unrelated  Example 6 The Organization is not subject to unrelated  Example 6 The Organization has appropriate support for the Part III organization has appropriate has a support III organization has appropriate has | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in purpo busin any ta | Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the part of the Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 2 The Organization For the charitable determined from federal income taxes under Section 501(c)(3), qualifying for the charitable determined in the federal income taxes under Section 501(c)(3), qualifying for the charitable determined not to be a determined not to be a determined not to be a determined for the federal income tax on the federal income tax on the federal income tax on the federal income taxes activities that are unrelated to their exempt determined that the Organization is not subject to unrelated determined that the Organization has appropriate support for ax positions taken in its annual filing and does not have any uncertain tax positions   | ation.  |
| 2; Pa Part ) as ex contri privat Retur net in purpo busin any ta | Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information in the part of the Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 1 The Organization has been recognized by the Internal Revenue Service (IRS)  Example 2 The Organization For the charitable determined from federal income taxes under Section 501(c)(3), qualifying for the charitable determined in the federal income taxes under Section 501(c)(3), qualifying for the charitable determined not to be a determined not to be a determined not to be a determined for the federal income tax on the federal income tax on the federal income tax on the federal income taxes activities that are unrelated to their exempt determined that the Organization is not subject to unrelated determined that the Organization has appropriate support for ax positions taken in its annual filing and does not have any uncertain tax positions   | ation.  |
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| Schedule D (Fo |         | Southern Utah Wilderness Alliance      | 94-2936961   | Page <b>5</b> |
|----------------|---------|--|--------------|---------------|
| Part XIII      | Supplem | ental Information (continued)          |              |               |
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# SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public

Inspection

Name of the organization Employer identification number Southern Utah Wilderness Alliance 94-2936961 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (d) Amount of cash (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government cash assistance noncash assistance or assistance (if applicable) grant other) (1) RURAL UTAH PROJECT EDUCAT 323 S 600 E STE 130 SALT LAKE CIT 84-2842840 501(c)(3) 350.000 **FMV** (11) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . . . . . . .

Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

Schedule I (Form 990) 2022

| Part III | Cart III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed. |                          |                          |                                  |   |                                       |  |  |
|----------|---|--------------------------|--------------------------|----------------------------------|---|---------------------------------------|--|--|
|          | (a) Type of grant or assistance   | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |  |  |
| 1        |   |                          |                          |                                  |   | 1                                     |  |  |
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| 7        |   |                          |                          |                                  |   |                                       |  |  |
| Part IV  | Supplemental Information. Provide   | e the information i      | required in Part I, lir  | ne 2; Part III, column           | (b); and any other addi                               | tional information.                   |  |  |
|          | e 2 - Compliance with grant conditions is veri  |                          | nce and biweekly con     | versations between the           | recipient   |                                       |  |  |
|          |   | (0)                      |                          |                                  |   |                                       |  |  |
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### **SCHEDULE J** (Form 990)

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization Southern Utah Wilderness Alliance 94-2936961

| Par | Questions Regarding Compensation  |  |    |     |    |
|-----|---|--|----|-----|----|
| 1a  | Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a. Complete Part III to provide 1 or 1 o         | ded any of the following to or for a person listed on Form ovide any relevant information regarding these items. |    | Yes | No |
|     | First-class or charter travel   | Housing allowance or residence for personal use  |    |     |    |
|     | Travel for companions   | Payments for business use of personal residence  |    |     |    |
|     | Tax indemnification and gross-up payments   | Health or social club dues or initiation fees  |    |     |    |
|     | Discretionary spending account  | Personal services (such as maid, chauffeur, chef)  |    |     |    |
| b   | If any of the boxes on line 1a are checked, did the orga<br>or reimbursement or provision of all of the expenses de   |  |    |     |    |
|     | explain   |  | 1b |     |    |
| 2   | Did the organization require substantiation prior to reim directors, trustees, and officers, including the CEO/Exe 1a?  | cutive Director, regarding the items checked on line   | 2  |     |    |
|     |   |  |    |     |    |
| 3   | Indicate which, if any, of the following the organization organization's CEO/Executive Director. Check all that a related organization to establish compensation of the C | ipply. Do not check any boxes for methods used by a  |    |     |    |
|     | X Compensation committee  | Written employment contract  |    |     |    |
|     | X Independent compensation consultant   | X Compensation survey or study   |    |     |    |
|     | Form 990 of other organizations   | X Approval by the board or compensation committee  |    |     |    |
| 4   | During the year, did any person listed on Form 990, Pa organization or a related organization:  | rt VII, Section A, line 1a, with respect to the filing   |    |     |    |
| а   | Receive a severance payment or change-of-control pay  |  | 4a |     | Χ  |
| b   | Participate in or receive payment from a supplemental   |  | 4b |     | X  |
| С   | If "Yes" to any of lines 4a–c, list the persons and provid  | compensation arrangement?  | 4c |     | Х  |
|     | Only section 501(c)(3), 501(c)(4), and 501(c)(29) orga  | anizations must complete lines 5–9.  |    |     |    |
| 5   | For persons listed on Form 990, Part VII, Section A, line compensation contingent on the revenues of:   |  |    |     |    |
| а   | The organization?   |  | 5a |     | Х  |
| b   | Any related organization?   |  | 5b |     | Х  |
| 6   | For persons listed on Form 990, Part VII, Section A, line   | e 1a, did the organization pay or accrue any   |    |     |    |
| а   | compensation contingent on the net earnings of: The organization?   |  | 6a |     | Χ  |
| b   | Any related organization?   |  | 6b |     | X  |
|     | If "Yes" on line 6a or 6b, describe in Part III.  |  |    |     |    |
| 7   | For persons listed on Form 990, Part VII, Section A, line   |  |    |     |    |
| _   |   | cribe in Part III  | 7  |     | Χ  |
| 8   | Were any amounts reported on Form 990, Part VII, paid to the initial contract exception described in Regulations  |  |    |     |    |
|     |   |  | 8  |     | Х  |
| 9   | If "Yes" on line 8, did the organization also follow the re   | buttable presumption procedure described in  |    |     |    |
| -   | Regulations section 53.4958-6(c)?   |  | 9  |     |    |

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title        |             | (B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation |                                     |   |  |                                 |                                    |  |
|---------------------------|-------------|--|-------------------------------------|---|--|---------------------------------|------------------------------------|--|
|                           |             | (i) Base<br>compensation   | (ii) Bonus & incentive compensation | (iii) Other<br>reportable<br>compensation | (C) Retirement and other deferred compensation | ( <b>D)</b> Nontaxable benefits | (E) Total of columns<br>(B)(i)–(D) | (F) Compensation<br>in column (B) reported<br>as deferred on prior<br>Form 990 |
| STEPHEN BLOCH             | (i)         | 143,100  | 2,500                               | 600                                       | 5,117  | 8,166                           | 159,483                            |  |
| 1 LEGAL DIRECTOR/ATTORNEY | (ii)        |  |                                     |   |  |                                 |                                    |  |
| SCOTT GROENE              | (i)         | 171,928  | 2,500                               |   | 6,105  | 8,166                           | 188,699                            |  |
| 2 EXECUTIVE DIRECTOR      | (ii)        |  |                                     |   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
| 3                         | (ii)        |  |                                     |   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
| 4                         | (ii)        |  |                                     | _   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
| _ 5                       | (ii)        |  |                                     |   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
| 6                         | (ii)        |  |                                     |   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
| 7                         | (ii)        |  |                                     |   |  |                                 |                                    |  |
| 8                         | (i)<br>(ii) |  |                                     | <b>)</b>                                  |  |                                 |                                    |  |
| 9                         | (i)<br>(ii) |  |                                     |   |  |                                 |                                    |  |
| 10                        | (i)<br>(ii) |  |                                     |   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
|                           | (ii)        |  |                                     |   |  |                                 |                                    |  |
| 12                        | (i)<br>(ii) |  |                                     |   |  |                                 |                                    |  |
| 13                        | (i)<br>(ii) | <b>J</b>   |                                     |   |  |                                 |                                    |  |
| 14                        | (i)<br>(ii) |  |                                     |   |  |                                 |                                    |  |
|                           | (i)         |  |                                     |   |  |                                 |                                    |  |
| 15                        | (ii)        |  |                                     |   |  |                                 |                                    |  |
| 16                        | (i)<br>(ii) |  |                                     |   |  |                                 |                                    |  |

Page **3** 

| Part III Supplemental Information  |
|--|
| Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. |
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# SCHEDULE M (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

2022

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Southern Utah Wilderness Alliance

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Instruction | Employer identification number

Inspection

94-2936961

Part I Types of Property (c) (b) (d) (a) Noncash contribution Method of determining Check if Number of contributions or amounts reported on items contributed applicable noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . . . . 2 Art—Historical treasures . . . 3 Art—Fractional interests . . . 4 Books and publications . . . . 5 Clothing and household goods . . . . . . . . . . . 6 Cars and other vehicles . . . . 7 Boats and planes . . . . . Intellectual property . . . . 8 9 103,811 FMV-NYSE Securities—Publicly traded . . Χ 17 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . . . . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . . . . . . Qualified conservation 14 contribution—Other . . . . Real estate—Residential . . . 15 16 Real estate—Commercial . . . 17 Real estate—Other . . . . 18 Collectibles . . . . . . . . . Food inventory . . . . . . 19 20 Drugs and medical supplies . . 21 Taxidermy . . . . . . . . . 22 Historical artifacts . . . . . 23 Scientific specimens . . . . Archaeological artifacts . . . 24 25 26 Other ( 27 Other ( 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part V, Donee Acknowledgement . . . . . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required 30a **b** If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 Χ 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32a Χ **b** If "Yes." describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

|         | Form 990) 2022 Southern Utah Wilderness Alliance   | 94-2936961    | Page <b>2</b> |
|---------|--|---------------|---------------|
| Part II | Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and    | 33, and whe   | ether         |
|         | the organization is reporting in Part I, column (b), the number of contributions, the number | of items rece | ived,         |
|         | or a combination of both. Also complete this part for any additional information.            |               | ,             |
|         | of a combination of soun, 7400 complete the parties any additional information.              |               |               |
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#### SCHEDULE O (Form 990)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service

Name of the organization

Southern Utah Wilderness Alliance 94-2936961 Form 990, Part III, Line 4d: Program Service Expenses: 328,612, Grants and allocations: 0, Revenue: 0 RS2477 (REVISED STATUE 2477): Researched the legal framework for the issue determined public opinions, and performed on the ground surveys regarding RS2477 claims. Educated public on the potential problems raised by ORV use and the possible solutions. Form 990, Part III, Line 4d: Program Service Expenses: 191,350, Grants and allocations: 0 Revenue: 0 - ENERGY: Researched issues related to federal approvals for oil and gas development, public health and environmental protection. There was an emphasis on issues related to air and water quality, wildlife habitat and special emphasis areas. Tracked leasing of public lands for oil, gas and coal and determined where sensitive values may be compromised by this leasing. Summarized and provided this information to the public through paper and electronic medium. Form 990, Part VI, Section B, Line 11b: - A complete copy of form 990 is emailed to all members of the governing body before filing the form with the IRS Form 990, Part VI, Section B, Line 12c: - Annual questionaires are circulated to all applicable individuals addressing the noted policies. Form 990, Part VI, Section B, Line 15a and 15b: - the issue is discussed and voted upon during the governing board's executive session: Form 990, Part VI, Section C, Line 19: - Copies of all applicable documents are maintained at the organization's main office

| Schedule O (Form 990) 2022        | Page <b>2</b>                  |
|-----------------------------------|--------------------------------|
| Name of the organization          | Employer identification number |
| Southern Utah Wilderness Alliance | 94-2936961                     |
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#### SCHEDULE R (Form 990)

### **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Southern Utah Wilderness Alliance

Employer identification number 94-2936961

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (a) (c) (d) Total income Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state End-of-year assets Direct controlling Primary activity or foreign country) entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Part II one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b)<br>Primary activity | (c) Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | conti | g)<br>512(b)(13)<br>rolled<br>ity? |
|--|-------------------------|---|----------------------------|--|-------------------------------|-------|------------------------------------|
|  |                         |   |                            |  |                               | Yes   | No                                 |
| (1) RUP INC 82-1603888                             | SOCIAL WELFARE          |   |                            |  |                               |       |                                    |
| PO BOX 2665 SALT LAKE CITY, UT 84110               |                         | UT  | 501(c)(4)                  |  | N/A                           | Х     |                                    |
|  | EDUCATIONAL             |   |                            |  |                               |       |                                    |
| 323 S 600 E STE 130 SALT LAKE CITY, UT 84102       |                         | UT  | 501(c)(3)                  | LINE 7   | N/A                           | Х     |                                    |
| (3)  | -                       |   |                            |  |                               |       |                                    |
| (4)  | -                       |   |                            |  |                               |       |                                    |
| (5)  | -                       |   |                            |  |                               |       |                                    |
| <u>(6)</u>   | -                       |   |                            |  |                               |       |                                    |
|  | -                       |   |                            |  |                               |       |                                    |

| Schedu | ule R (Form 990) 2022                              | Southern Utah Wi                           | derness Alliand                               | e                             |   |                                 |  |                               |               | 94-   | <u> 2936961</u>  |         | Page 2                                  |
|--------|--|--|---|-------------------------------|---|---------------------------------|--|-------------------------------|---------------|---|--|---------|---|
| Part   | Identification of because it had or                | Related Organizati<br>ne or more related o | ons Taxable                                   | as a Partners                 | ship. Complete i  | f the organiza                  | ation answer                           | ed "Yes                       | s" on F       | orm 990   | , Part IV  | line 34 | 1,                                      |
|        | (a) Name, address, and EIN of related organization | (b)<br>Primary activity                    | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f)<br>Share of total<br>income | (g)<br>Share of end-of-<br>year assets | (h) Disproport allocatio      | ionate ons? a | (i)<br>Code V—UE<br>mount in box<br>of Schedule K<br>(Form 1065 | General Genera | aging o | <b>(k)</b><br>ercentage<br>wnership     |
| (1)    |  | -  |   |                               |   |                                 |  | Yes                           | No            | 1   | Yes  | No      |   |
| (2)    |  | -  |   |                               |   |                                 |  |                               |               | )   |  |         |   |
| (3)    |  | -  |   |                               |   |                                 |  |                               |               |   |  |         |   |
| (4)    |  | -  |   |                               |   |                                 |  |                               |               |   |  |         |   |
| (5)    |  | -  |   |                               |   |                                 | 9                                      |                               |               |   |  |         |   |
| (6)    |  | -  |   |                               |   |                                 |  |                               |               |   |  |         |   |
| (7)    |  | -  |   |                               | V,  |                                 |  |                               |               |   |  |         |   |
| Part   |  | Related Organizati                         |   |                               |   |                                 |  |                               |               | Yes" on I   | orm 99   | 0, Part |   |
|        | (a)<br>Name, address, and EIN of relat             | ted organization                           | (b)<br>Primary activity                       | Legal do<br>(state or forei   |   | trolling Type                   | ,                                      | (f)<br>are of total<br>income |               | (g)<br>Share of<br>of-year assets                               | (h)<br>Percentag<br>ownership  | COI     | (i)<br>512(b)(13)<br>ntrolled<br>ntity? |
| (1)    |  |  | X   |                               |   |                                 |  |                               |               |   |  | Yes     | No                                      |
| (2)    |  |  |   |                               |   |                                 |  |                               |               |   |  |         |   |
| (3)    |  | 10   |   |                               |   |                                 |  |                               |               |   |  |         |   |

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

94-2936961

#### Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

| 1  | During the tax year, did the organization engage in any of the following transactions with one or more   | related organ       | izations listed in Parts I | I–IV?               |          |           |    |
|--|--|---------------------|----------------------------|---------------------|----------|-----------|----|
| а  | a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity  |                     |                            |                     |          |           | Χ  |
| b  | <b>b</b> Gift, grant, or capital contribution to related organization(s)   |                     |                            |                     |          |           |    |
| С  |  |                     |                            |                     |          |           |    |
| d  | d Loans or loan guarantees to or for related organization(s)   |                     |                            |                     |          |           |    |
| е  | Loans or loan guarantees by related organization(s)  |                     |                            |                     | 1e       |           | Χ  |
|  |  |                     | _                          |                     |          |           |    |
| f  | Dividends from related organization(s)   |                     |                            |                     | 1f       |           | Χ  |
| g  | Sale of assets to related organization(s)  |                     |                            |                     | 1g       |           | Χ  |
| h  | Purchase of assets from related organization(s)  |                     |                            |                     | 1h       |           | Χ  |
| i  | Exchange of assets with related organization(s)  |                     |                            |                     | 1i       |           | Χ  |
| j  | Lease of facilities, equipment, or other assets to related organization(s)   |                     |                            |                     | 1j       |           | Χ  |
| -  |  |                     |                            |                     |          |           |    |
| k  | Lease of facilities, equipment, or other assets from related organization(s)   |                     |                            |                     | 1k       |           | Χ  |
| ı  |  |                     | ·                          |                     | 11       |           | Χ  |
| m  | Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) |                     |                            |                     | 1m       |           | Χ  |
| n  | Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  |                     |                            |                     | 1n       | Χ         |    |
| 0  | Sharing of paid employees with related organization(s)   |                     |                            |                     | 10       |           | Χ  |
|  |  |                     |                            |                     |          |           |    |
| р  | p Reimbursement paid to related organization(s) for expenses   |                     |                            |                     |          |           | Х  |
| q Reimbursement paid by related organization(s) for expenses |  |                     |                            |                     |          |           | Χ  |
| ·  |  |                     |                            |                     | 1q       |           |    |
| r  | Other transfer of cash or property to related organization(s)  |                     |                            |                     | 1r       |           | Х  |
| s  | Other transfer of cash or property from related organization(s)  |                     |                            |                     | 1s       |           | Χ  |
| 2  | If the answer to any of the above is "Yes," see the instructions for information on who must complete t  | his line, inclu     | ding covered relationsh    | ips and transaction | thresh   | olds.     |    |
|  | (a)  | (b)                 | (c)                        | (                   | d)       |           |    |
|  |  | nsaction<br>e (a—s) | Amount involved            | Method of determin  | ing amou | nt involv | ed |
|  | Тур  | e (a—3)             |                            |                     |          |           |    |
|  |  |                     |                            | ACV                 |          |           |    |
| <b>1)</b> Rl   | JRAL UTAH PROJECT EDUCATION FUND   | b                   | 350,000                    |                     |          |           |    |
|  |  |                     |                            | N/A                 |          |           |    |
| <b>2)</b> RI   | JP INC   | n                   |                            |                     |          |           |    |
|  |  |                     |                            |                     |          |           |    |
| 3)   |  |                     |                            |                     |          |           |    |
|  |  |                     |                            |                     |          |           |    |
| 4)   |  |                     |                            |                     |          |           |    |
| -\   |  |                     |                            |                     |          |           |    |
| 5)   |  |                     |                            |                     |          |           |    |
| <b>C</b> \   |  |                     |                            |                     |          |           |    |
| 6)   |  |                     |                            |                     | D /F     |           |    |

94-2936961

Part VI

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (k)                     |
|-------------------------|
| Percentage<br>ownership |
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| Schedule R (Fo | rm 990) 2022 | Southern Utah Wilderness Alliance                                | 94-2936961        | Page <b>5</b> |
|----------------|--------------|--|-------------------|---------------|
|                |              | ental Information  |                   |               |
| Part VII       | Provide a    | additional information for responses to questions on Schedule R. | See instructions. |               |
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Southern Utah Wilderness Alliance 94-2936961

# Part VI, Line 17 (990) - States with Which a Copy of this Form 990 is Required to be Filed

|   | Armed Forces the Americas      | Х | Louisiana                                    |   | Palau               |
|---|--------------------------------|---|--|---|---------------------|
|   | Armed Forces Europe            | Х | Massachusetts                                | Х | Rhode Island        |
| Х | Alaska                         | Х | Maryland                                     | Х | South Carolina      |
| Χ | Alabama                        | Х | Maine  |   | South Dakota        |
|   | Armed Forces Pacific           |   | Marshall Islands                             | Χ | Tennessee           |
| Χ | Arkansas                       | Х | Michigan                                     |   | Texas               |
|   | American Samoa                 | Х | Minnesota                                    | Χ | Utah                |
|   | Arizona                        | Х | Missouri                                     | Χ | Virginia            |
| Χ | California                     |   | Commonwealth of the Northern Mariana Islands |   | U.S. Virgin Islands |
| Χ | Colorado                       | Х | Mississippi                                  |   | Vermont             |
| Χ | Connecticut                    |   | Montana                                      | Χ | Washington          |
| Χ | District of Columbia           | Х | North Carolina                               | Χ | Wisconsin           |
|   | Delaware                       | Х | North Dakota                                 | Χ | West Virginia       |
| Χ | Florida                        |   | Nebraska                                     |   | Wyoming             |
|   | Federated States of Micronesia | Χ | New Hampshire                                |   |                     |
| Χ | Georgia                        | Х | New Jersey                                   |   |                     |
|   | Guam                           | Х | New Mexico                                   |   |                     |
|   | Hawaii                         | Х | Nevada                                       |   |                     |
|   | lowa                           | Х | New York                                     |   |                     |
|   | Idaho                          | Х | Ohio   |   |                     |
| Χ | Illinois                       | Х | Oklahoma                                     |   |                     |
|   | Indiana                        | Х | Oregon                                       |   |                     |
| Χ | Kansas                         | Χ | Pennsylvania                                 |   |                     |
| Χ | Kentucky                       |   | Puerto Rico                                  |   |                     |
|   |                                |   |  |   |                     |