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2018

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	)18 , ar	nd en	ding 12-31-	2018	
		undation TSMAN FOUNDATION				entification numbe	r
					74-2521914		
		d street (or P O box number if mail is not delivered to street address) TSMAN WAY	Room/suite		<b>B</b> Telephone nu	mber (see instructioi	ns)
					(801) 584-5700		
		n, state or province, country, and ZIP or foreign postal code CITY, UT 84108			<b>C</b> If exemption	application is pendin	g, check here
<b>G</b> Cl	neck al	Il that apply	former public charity		<b>D 1.</b> Foreign org	janizations, check he	ere 🔲
		Final return Amended return				ganizations meeting	
		$\square$ Address change $\square$ Name change				k here and attach co	· -
H C	neck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt private	foundation			ndation status was t n 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust	e private foundation				
		ket value of all assets at end from Part II, col (c),	☐ Cash ☑ Accru	ıal		tion is in a 60-mont <mark>l</mark> n 507(b)(1)(B), chec	
		►\$ 560,897,379	be on cash basis )		dilder section	1 307 (B)(1)(B), clice	KTICIC
D.	rt I	Analysis of Revenue and Expenses (The total	, 				(d) Disbursements
FG	ILI	of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment	(c) Adjusted net	for charitable
		equal the amounts in column (a) (see instructions) )	books		income	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	281,034	1			
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach	201,031				
		Sch B					
	3	Interest on savings and temporary cash investments	519,878	3	519,878		
	4	Dividends and interest from securities	10,718,905	5	10,718,905		
	5a	Gross rents					
	Ь	Net rental income or (loss)					
El e	6a	Net gain or (loss) from sale of assets not on line 10	293,425	5			
Revenue	b	Gross sales price for all assets on line 6a 5,662,264					
Re	7	Capital gain net income (from Part IV, line 2)			5,955,689		
	8	Net short-term capital gain			<u> </u>		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	29,743,146	5	-135,205		
	12	Total. Add lines 1 through 11	41,556,388	3	17,059,267		
	13	Compensation of officers, directors, trustees, etc	313,792	2	0		313,792
	14	Other employee salaries and wages	242,325	5	0		242,325
es	15	Pension plans, employee benefits					
sue	16a	Legal fees (attach schedule)	<b>9</b> 65,085	5	0		65,085
and Administrative Expenses	ь	Accounting fees (attach schedule)	32,925	5	0		32,925
e E	c	Other professional fees (attach schedule)	100,000		0		100,000
)tiv	17	Interest	3,553,811	1	0		604,148
Str	18	Taxes (attach schedule) (see instructions)	2,786,158	3	281,831		75
Ξ	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy			· · ·		
† pı	21	Travel, conferences, and meetings					
	22	Printing and publications	06.1				
Operating	23	Other expenses (attach schedule)	399,854	+	1,033,555		79,297
rat	24	Total operating and administrative expenses.					
g Z		Add lines 13 through 23	7,493,950	+	1,315,386		1,437,647
_	25	Contributions, gifts, grants paid	30,296,993	2			26,536,993
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	37,790,943	3	1,315,386		27,974,640
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and	3,765,445				
	Ь	disbursements  Net investment income (if negative, enter -0-)	3,703,445		15,743,881		
	c	Adjusted net income (if negative, enter -0-)			13,7 13,001		
For	L Paper	work Reduction Act Notice, see instructions.	ı		Cat No 11289X	For	m <b>990-PF</b> (2018)

620,000

478,117,630

189,795,862

774,866,792

120,000,000

120,022,000

654,844,792

654,844,792

774,866,792

22,000

0

620,000

299,600,782

35,560,984

213,850,064

560,897,379

120,000,000

120,035,031

440,862,348

440,862,348 560,897,379

2 3

4

5

6

654,844,792 3,765,445

658,610,237

217,747,889

440,862,348 Form 990-PF (2018)

35,031

620,000

299,600,782

35,560,984

213,850,064

560,897,379

disqualified persons (attach schedule) (see instructions) . . . . .

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . . .

Investments—corporate bonds (attach schedule) . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . .

Other notes and loans receivable (attach schedule)

Investments—land, buildings, and equipment basis ▶ \_ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

**Analysis of Changes in Net Assets or Fund Balances** 

Less allowance for doubtful accounts

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe ▶\_

Unrestricted . . . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Permanently restricted . .

Temporarily restricted

Grants payable

	5 6
	7
Assets	8 9
As	10
	11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

28

29

30

31 Part III

Liabilities

Balances

Fund 26

ō

Assets 27

Net

2

3

4

5

Page **3** 

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a PORTFOLIO GAINS			Р		
<b>b</b> PARTNERSHIP GAINS			Р		
С					
d					
e					
<b>(e)</b> Gross sales price	(f) Depreciation allowed (or allowable)	Cost or d	( <b>g)</b> other basis ense of sale	Gain o	h <b>)</b> r (loss) ) minus (g)
а					293,425
<b>b</b> 5,66	2,264				5,662,264
c					
d					
е					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation o	on 12/31/69	(	I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> of col(ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a					293,425
b					5,662,264
С					
d					
е					
•	gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instruction	ons) If (loss), enter -0	· }	3	5,955,689
Part V Qualification	Jnder Section 4940(e) for Re	duced Tax on Net	Investment In	come	
For optional use by domestic p	rivate foundations subject to the sec	tion 4940(a) tax on ne	t investment incom	ie )	
if section 4940(d)(2) applies, le					es 🗌 No
	ot qualify under section 4940(e) Do				
• • • • • • • • • • • • • • • • • • • •	nount in each column for each year,	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable	le-use assets	(d) Distribution rati (col (b) divided by c	
2017					
2016					
2015 2014					
2014					
				I	
2 Total of line 1, column (	d)		0		
number of years the four	ofor the 5-year base period—divide t ndation has been in existence if less t ncharitable-use assets for 2018 from	than 5 years			
<b>5</b> Multiply line 4 by line 3			5		
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
			7		
8 Enter qualifying distribut			8  uplete that part usin	g a 1% tax rate Se	e the Part VI
instructions			•		

Page **6** 

Pa	rt VII-B	Statements Regard	ing	Activities for Which	Form 4720 May Be	Required (continu	ed)				
5a	During the	year did the foundation p	ау с	r incur any amount to						Yes	No
	(1) Carry	on propaganda, or otherw	ise a	attempt to influence legisl	ation (section 4945(e))?	□ voc		No			
	(2) Influe	nce the outcome of any sp	ecıfı	e attempt to influence legislation (section 4945(e))?  Yes  Yes							
on, directly or indirectly, any voter registration drive?						· · 🔲 Yes		No			
	(3) Provid	le a grant to an individual	for t	ravel, study, or other sım	ılar purposes?	Yes		No			
	(4) Provid	le a grant to an organization	on of	ther than a charitable, etc	, organization described			110			
	ın sect	tion 4945(d)(4)(A)? See in	stru	ctions		🗸 Yes		No			
	(5) Provid	le for any purpose other th	an r	eligious, charitable, scien	tific, literary, or	ı <b>⊻</b> res	ш	NO			
	educa	tional purposes, or for the	prev	vention of cruelty to childi	ren or animals?	· ·	~				
b	If any ans	wer is "Yes" to 5a(1)-(5),	dıd a	any of the transactions fa	all to qualify under the ex	ceptions described in	¥	No			
		ns section 53 4945 or in a		=					5b		No
	_	ons relying on a current n									
c	-	wer is "Yes" to question 5a					ш				
_		se it maintained expenditu			•	🗖					
		ttach the statement requir		•		· · • Yes	ш	No			
6a		undation, during the year,		· -	—	Ime on					
Va		I benefit contract?			munectly, to pay premit						
h	'	undation, during the year,			urectly on a personal bea	· L Yes	$\checkmark$	No	6b		No
D		6b, file Form 8870	pay	premiums, unectry or me	inectly, on a personal be	nent contract.	•	ŀ	OD		110
7-		•	. +h.a	foundation a narty to a r	rabibited tay abolton tran	anation?	_				
7a 		ne during the tax year, was				res	✓	No	74		
ь	, ,	the foundation receive an		•			•	-	7b		
8		ndation subject to the sect				in remuneration or	_				
	excess pai	rachute payment during th	e ye	ar/		· · L Yes	✓	No			
1	List all of	and Contractors ficers, directors, trustee	_	oundation managers ar (b) Title, and average	nd their compensation. (c) Compensation (If	See instructions (d) Contributions	to	(-)	F		
	<b>(a)</b> Na	me and address	,	hours per week devoted to position	not paid, enter -0-)	employee benefit plar deferred compensa	s and			se acc Iowand	
See .	Additional D	ata Table									
								-			
	Compens	ation of five highest-pai	d er	nployees (other than t	hose included on line 1	_		ne, er	iter "	NONE.	."
(2)	Name and -	address of each employee	2214	(b) Title, and average		(d) Contributions employee benefi		(0)	Evnon	se acco	nt
(4)		ore than \$50,000	Jaiu	hours per week	(c) Compensation	plans and deferre				owanc	
				devoted to position		compensation					
THO	MAS E MUIR	\		TREASURER	171,95	0	0				
1097	CRESTVIE	W CIRCLE		40 00							
SALT	LAKE CITY	,UT 84108									
				]							
				1							
				1							
				1							
Tota	Loumber	f other employees paid ove	r of	I	1		+				
	. Hambel Ol	. Julier employees paid ove	., ф	,			1	For	~ QQ	)-PF	(2019

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Highly Paid E	Employees,
3 Five highest-paid independent contractors for professional	services (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PRESCOTT CONSULTING	CONSULTING	100,000
820 SUNRISE CIRCLE	7	
CENTERVILLE, UT 84014		
STOEL RIVERS LLP	LEGAL	65,085
201 SOUTH MAIN STREET SUITE 1100 SALT LAKE CITY, UT 84111		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		1 0
List the foundation's four largest direct charitable activities during the tax year. Inc.	lude relevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research pape		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation		Amount
1	<del>-</del>	
		1
		1
2		
		1
		1
All other program-related investments See instructions		
3		
		1
		1
Total. Add lines 1 through 3		• 0
		Form <b>990-PF</b> (2018)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

27,974,640

27,974,640

27,974,640

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1a

1b

2

3a 3h

4

5

**b** Total for prior years

27,259,894

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, ,	_	٠	'	١,	_	_	_
t	Х	ī	7	ī		Π	

Par

a From 2013. . . . . **b** From 2014. . . . . c From 2015. . . .

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see

6 Enter the net total of each column as

f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . .

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

same amount must be shown in column (a) )

Undistributed Income (see instructions) 1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . . .

Excess distributions carryover, if any, to 2018

d From 2016. . . . . . e From 2017. . . . . f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part XII, line 4 > \$ 27,974,640

a Applied to 2017, but not more than line 2a

e Remaining amount distributed out of corpus

**b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . . **d** Applied to 2018 distributable amount. . . . .

(a)

Corpus

9

<u>~</u>

(b)

Years prior to 2017

(c)

2017

28,642,300

27,974,640

667,660

0



ter gross amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	excluded by section 512, 513, or 514		
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions )	
a						
b						
c						
e						
f						
g Fees and contracts from government agencies						
Membership dues and assessments						
Interest on savings and temporary cash investments			14	519,878		
Dividends and interest from securities			14	10,718,905		
Net rental income or (loss) from real estate						
a Debt-financed property						
<b>b</b> Not debt-financed property						
Net rental income or (loss) from personal property	,					
Other investment income						
Gain or (loss) from sales of assets other than						
inventory			18	293,425		
Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory						
Other revenue  a PARTNERSHIP INCOME	523000	2,378,193	14	-261,440		
<b>b</b> PFIC INCOME	323000	2,370,193	14	88,464		
c TAX REFUND			01	178,212		
C IVAC REPORTS				· · · · · · · · · · · · · · · · · · ·		
d PARTNERSHIP INCOME			14 <b>I</b>	27.359.717		
d PARTNERSHIP INCOME			14	27,359,717		
e		2,378,193	14	27,359,717 38,897,161		
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).						
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calc	culations )		1	38,897,161	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcart XVI-B  Relationship of Activities to the substitution of the	culations ) the Accomplishi	ment of Exemp	· · · · 1	38,897,161 <b>3</b>	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's expressions.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcart XVI-B  Relationship of Activities to the accomplishment of the foundation's	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
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Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's expressions.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's expressions.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	
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Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's expressions.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calce the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which accomplish the foundation is accomplished to the foundation of the foundation is accomplished to the foundation of the foundation is accomplished to the foundation of the foundation of the foundation is accomplished to the foundation of	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
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Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcort XVI-B  Relationship of Activities to to the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calce the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which accomplish the foundation is accomplished to the foundation of the foundation is accomplished to the foundation of the foundation is accomplished to the foundation of the foundation of the foundation is accomplished to the foundation of	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3		
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calce the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity for which accomplish the foundation is accomplished to the foundation of the foundation is accomplished to the foundation of the foundation is accomplished to the foundation of the foundation of the foundation is accomplished to the foundation of	culations ) <b>the Accomplish</b> i h income is reporte	ment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	38,897,161  3	(	

Form 990	-PF (2018)			Pa	ge <b>13</b>
Part X	VII Information Re Exempt Organi	garding Transfers To and Transactions and Relationships zations	s With Noncharitable		
		directly engage in any of the following with any other organization descr organizations) or in section 527, relating to political organizations?	ribed in section 501	Yes	No
a Trans	fers from the reporting four	dation to a noncharitable exempt organization of			
(1)	Cash		1a(1	)	No
					No
	transactions			1	
(1)	Sales of assets to a nonchar	itable exempt organization	1b(1	)	No
		noncharitable exempt organization		_	No
		nt, or other assets			No
		its		_	No
				_	No
		embership or fundraising solicitations		_	No
		nailing lists, other assets, or paid employees.		Ή	No
<b>d</b> If the of the	answer to any of the above goods, other assets, or ser	is "Yes," complete the following schedule Column (b) should always shouses given by the reporting foundation. If the foundation received less tingement, show in column (d) the value of the goods, other assets, or singement, show in column (d) the value of the goods.	now the fair market value than fair market value		
(a) Line N			s, transactions, and sharing arr	angemer	nts
	ı	1			

Line No	(b) Amount involved	(c) Name of nonchard	able exempt organization	(d) Description of transfers, transactions, and sharing arrangements
Line No	(b) ranoune involved	(c) Hame of Honorian	table exempt organization	(a) bescription of dansiers, dansactions, and sharing arrangements
				<del> </del>
		+		
		+		
-		1		
Is the fou	indation directly or indi	rectly affiliated with, o	or related to, one or more	e tax-exempt organizations
	•	•	•	
			(3)) or in section 32/7.	∟Yes 🛂 No
If "Yes," (	complete the following :			
	(a) Name of organizat	ion	(b) Type of organizat	tion (c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return 2019-11-14 Here with the preparer shown Signature of officer or trustee Title Date (see instr )? 🗹 Yes 🗆 No PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P00966494 employed ▶ □ JOAN S MCMAHON Paid **Preparer** Firm's name ▶ DELOITTE TAX LLP Fırm's EIN ▶86-1065772 **Use Only** Firm's address ▶ 555 MISSION STREET

SAN FRANCISCO, CA 94105

Phone no (415) 738-4000 Form **990-PF** (2018)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JON M HUNTSMAN DOD 2218 0 0 PRESIDENT 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 KAREN H HUNTSMAN 0 CHAIR/DIRECTOR 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 CHRISTENA DURHAM 0 0 EVP/DIRECTOR 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 PAUL C HUNTSMAN EVP/DIRECTOR 0 0 0 20 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 JAMES H HUNTSMAN 0 0 DIRECTOR 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 JENNIFER H PARKIN EVP/DIRECTOR 0 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 CHRISTOPHER HUFFMAN THRU 112 DIRECTOR 0 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 J KIMO ESPLIN THRU 112 DIRECTOR/TREAS 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 DAVID H HUNTSMAN 0 313,792 0 PRESIDENT/COO/DIR 20 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 MARY ANNE HUNTSMAN FROM 112 0 0 DIRECTOR 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 PETER R HUNTSMAN FROM 112 CEO/DIRECTOR 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 CHRISTOPHER H HUFFMAN FROM 112 DIRECTOR 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 MARK H HUNTSMAN HONORARY DIRECTOR 0 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 THOMAS E MUIR VP, CFO, TREASURER 0 0 0 20 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108 RONALD G MOFFITT **SECRETARY** 0 0 1 00 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN CANCER SOCIETY'S HOPE NONE PC GENERAL SUPPORT 50,000 LODGE 375 EAST 100 SOUTH SALT LAKE CITY, UT 84111

AMERICAN INDIAN SERVICES 3115 EAST LION LANE SUITE 320 COTTONWOOD HEIGHTS, UT 84121	NONE	PC	GENERAL SUPPORT	10,000
ARTHRITIS FOUNDATION 5320 SOUTH 900 EAST SUITE 100 SALT LAKE CITY, UT 84117	NONE	PC	GENERAL SUPPORT	2,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BALLET WEST52 WEST 200 SOUTH NONE PC GENERAL SUPPORT 50,000 SALT LAKE CITY LIT 84101

SALI LAKE CITT, OT 04101				
BARLOW BALLET THEATRE 261 SOUTH 1350 EAST STREET LEHI, UT 84043	NONE	PC	GENERAL SUPPORT	5,000
BYU MELVIN J BALLARD CENTER	NONE	PC	GENERAL SUPPORT	100,000

LEHI, UT 84043				
BYU MELVIN J BALLARD CENTER D-346 ASB PROVO, UT 84602	NONE	PC	GENERAL SUPPORT	100,000
Total			<b>&gt;</b> 3a	30 296 993

Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CACHE VALLEY FOR HOPE CANCER NONE PC GENERAL SUPPORT 50,000 FOUNDATION 135 SOUTH MAIN LOGAN, UT 84321

'				
CARDIOVASCULAR FOUNDATION OF SE TEXAS 2680 MCFADDIN STREET BEAUMONT, TX 77702	NONE	PC	GENERAL SUPPORT	30,000
CARNEGIE HALL881 SEVENTH AVENUE	NONE	PC	GENERAL SUPPORT	50,000

30,296,993

NEW YORK, NY 10019

Total . .

Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CATHOLIC COMMUNITY SERVICES NONE PC GENERAL SUPPORT 255,000 745 EAST 300 SOUTH SALT LAKE CITY, UT 84102 D.C NICHT CENTERAL CURRORT 10 000

SCHOLARS 157 NORTH BROADWAY BLACKFOOT, ID 83221	NONE	PC	GENERAL SUPPORT	10,000
CYSTIC FIBROSIS FOUNDATION 455 E 500 SOUTH STREET 308 SALT LAKE CITY, UT 84111	NONE	PC	GENERAL SUPPORT	25,000

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ENCIRCLE FAMILY AND YOUTH RESOURCE CENTER 91 WEST 200 SOUTH PROVO, UT 84601	NONE	PC	GENERAL SUPPORT	20,000
ENVISION UTAHCOALITION FOR UTAH'S FUTURE	NONE	PC	GENERAL SUPPORT	2,500

111010/01 01002				
ENVISION UTAHCOALITION FOR UTAH'S FUTURE 254 SOUTH 600 EAST NUMBER 201 SALT LAKE CITY, UT 84102	NONE	PC	GENERAL SUPPORT	2,500
EQUALITY UTAH	NONE	PC	GENERAL SUPPORT	30,000

254 SOUTH 600 EAST NUMBER 201 SALT LAKE CITY, UT 84102				
EQUALITY UTAH 175 WEST 200 SOUTH SUITE 1004 SALT LAKE CITY, UT 84101	NONE	PC	GENERAL SUPPORT	30,000

EQUALITY UTAH 175 WEST 200 SOUTH SUITE 1004 SALT LAKE CITY, UT 84101	NONE	PC	GENERAL SUPPORT	30,00
Total			▶ 3a	30,296,993

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
GIFTED MUSIC SCHOOL OF UTAH 150 SOUTH 1000 EAST NUMBER 200	NONE	PC	GENERAL SUPPORT	33,000

SALT LAKE CITY, UT 84124				
GREEK ORTHODOX CHURCH 246 WEST BROADWAY SALT LAKE CITY, UT 84104	NONE	PC	GENERAL SUPPORT	5,000

246 WEST BROADWAY SALT LAKE CITY, UT 84104	NONE		GENERAL SUPPORT	3,000
HALE CENTRE THEATRE 3333 SOUTH DECKER LAKE DRIVE WEST VALLEY CITY. UT 84119	NONE	PC	GENERAL SUPPORT	400,000

SALT LAKE CITY, UT 84104				
HALE CENTRE THEATRE 3333 SOUTH DECKER LAKE DRIVE WEST VALLEY CITY, UT 84119	NONE	PC	GENERAL SUPPORT	400,000
Total			<b>&gt;</b> 3a	30,296,993

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HUNTSMAN AWARDS FOR EXCELLENCE NONE PC GENERAL SUPPORT 11,000

IN EDUCATION 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108				
HUNTSMAN CANCER FOUNDATION 500 HUNTSMAN WAY	NONE	PC	GENERAL SUPPORT	417,652

SALT LAKE CITY LIT 84108

SALI LAKE CITT, OT 04100				
IDAHO STATE UNIVERSITY FOUNDATION CAMPUS BOX 8265 POCATELLO, ID 83209	NONE	PC	GENERAL SUPPORT	200,000
Total			▶ 3a	30,296,993

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JARED PRESCOTT MASCARENE ISLANDS NONE PC GENERAL SUPPORT 50,000 CHARITABLE TRUST

JACKSON, WY 83002				
JMH FAMILY COMMUNITY TRUST 1611 NORTHWEST 12TH AVENUE MIAMI, FL 33136	NONE	PC	GENERAL SUPPORT	1,000,000
JUVENILE DIABETES FOUNDATION	NONE	PC	GENERAL SUPPORT	50,000

Total			▶ 3a	30,296,993
JUVENILE DIABETES FOUNDATION 1995 WEST 900 SOUTH WEST JORDAN, UT 84088	NONE	PC	GENERAL SUPPORT	50,000
MIAMI, FL 33136				

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LARRY H MILLER CHARITIES NONE PC GENERAL SUPPORT 30,000 9350 SOUTH 150 EAST SUITE 1000 **SANDY UT 84070** 

5/11/51/01/01/0				
MARQUETTE UNIVERSITYMAJERUS SCHOLARSHIP 1250 WEST WISCONSIN AVENUE MILWAUKEE, WI 53233	NONE	PC	GENERAL SUPPORT	100,000
NATIONAL ABILITY CENTER 1000 ABILITY WAY PARK CITY, UT 84060	NONE	PC	GENERAL SUPPORT	550,000

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL MULTIPLE SCLEROSIS NONE PC GENERAL SUPPORT 25,000

SALT LAKE CITY, UT 84115				
NEIGHBORHOOD HOUSE ASSOCIATION 1050 WEST 500 SOUTH SALT LAKE CITY, UT 84104	NONE	PC	GENERAL SUPPORT	25,000

ı	1050 WEST 500 SOUTH SALT LAKE CITY, UT 84104				23,000
	OLSON-HUNTSMAN VISION FOUNDATION 500 HUNTSMAN WAY	NONE	PC	GENERAL SUPPORT	3,760,000

OLSON-HUNTSMAN VISION FOUNDATION 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108	NONE	PC	GENERAL SUPPORT	3,760,000
				1

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient	
a Paid during the year			

OPERATION HERO 3804 NORTH STONE GULLEY MESA, AZ 85207	NONE	PC	GENERAL SUPPORT	2,500

MESA, AZ 85207				
OUELESSEBOUGOU ALLIANCE 525 EAST 4500 SOUTH SALT LAKE CITY, UT 84107	NONE	PC	GENERAL SUPPORT	2,500

OUELESSEBOUGOU ALLIANCE 525 EAST 4500 SOUTH SALT LAKE CITY, UT 84107	NONE	PC	GENERAL SUPPORT	2,500
PRATHAM USA 9703 RICHMOND AVENUE NUMBER 102 HOUSTON, TX 77041	NONE	PC	GENERAL SUPPORT	25,000

SALT LAKE CITY, UT 84107				
PRATHAM USA 9703 RICHMOND AVENUE NUMBER 102 HOUSTON, TX 77041	NONE	PC	GENERAL SUPPORT	25,00

PRATHAM USA 9703 RICHMOND AVENUE NUMBER 102 HOUSTON, TX 77041	NONE	PC	GENERAL SUPPORT	25,000
Total			▶ 3a	30,296,993

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SALT LAKE COMMUNITY COLLEGE NONE PC GENERAL SUPPORT 2,500 **FOUNDATION** 4600 SOUTH REDWOOD ROAD

SALT LAKE CITY, UT 84123				
SALT LAKE EDUCATION FOUNDATION 440 EAST 100 SOUTH SALT LAKE CITY, UT 84111	NONE	PC	GENERAL SUPPORT	150,000
CANEODD C DEDNICTEIN 6 CO	NONE	DC.	DONOR ADVICED FUND	17.000.000

SALT LAKE CITY, UT 84111				
SANFORD C BERNSTEIN & CO 10 EAST 59TH STREET NEW YORK, NY 10153	NONE	PC	DONOR ADVISED FUND	17,800,000

30,296,993

Ľ	ALI LAKE CITT, UT 64111				
1	ANFORD C BERNSTEIN & CO 0 EAST 59TH STREET EW YORK, NY 10153	NONE	PC	DONOR ADVISED FUND	17,800,00

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SCHOOL OF AMERICAN BALLET NONE PC GENERAL SUPPORT 15,000 70 LINCOLN CENTED DLAZA

NEW YORK, NY 10023				
SIGMA CHI FOUNDATION - HUNTSMAN LEADERSHIP SUMMIT 1714 HINMAN AVENUE EVANSTON LIT 60201	NONE	PC	GENERAL SUPPORT	500,000

EVANSTON, UT 60201				
SONS OF UTAH PIONEERS 3301 EAST LOUISE AVENUE SALT LAKE CITY, UT 84109	NONE	PC	GENERAL SUPPORT	500

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOLITHERN LITALI LINIT/EDSITY MUSIC NONE DC GENERAL SLIDBORT 1 400

EDUCATION 351 WEST UNIVERSITY BOULEVARD CEDAR CITY, UT 84720	NONE		GENERAL SOFFORT	1,400
STAR INSTITUTE FOR SENSORY PROCESSING DISORDER	NONE	PC	GENERAL SUPPORT	10,000

STAR INSTITUTE FOR SENSORY PROCESSING DISORDER 5420 SOUTH QUEBEC STREET SUITE 103 GREENWOOD VILLAGE, CO 80111	NONE	PC	GENERAL SUPPORT	10,000
SUNDANCE INSTITUTE	NONE	PC	GENERAL SUPPORT	50,000

Total			▶ 3a	30,296,993
SUNDANCE INSTITUTE 1825 THREE KINGS DRIVE PARK CITY, UT 84060	NONE	PC	GENERAL SUPPORT	50,000
GREENWOOD VILLAGE, CO 80111				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE ADAMS & GLADWELL RESEARCH NONE PC GENERAL SUPPORT 100,000 FOUNDATION 3920 SOUTH 1100 EAST SUITE 150 SALT LAKE CITY, UT 84124

THE LEUKEMIA & LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE RYE BROOK, NY 10573	NONE	PC	GENERAL SUPPORT	50,000
THE ROAD HOME 210 SOUTH RIO GRANDE STREET SALT LAKE CITY, UT 84101	NONE	PC	GENERAL SUPPORT	3,000

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THIS IS THE PLACE HERITAGE PARK NONE PC GENERAL SUPPORT 50,000 (THIS IS THE PLACE FOUNDATION) 2601 EAST SUNNYSIDE AVENUE SALT LAKE CITY, UT 84108 LINIVEDCITY OF NEVADA HIDEID DDEC NONE DC CENERAL SLIDBORT E00 000

CHAIR SCHOOL OF LAW 4505 SOUTH MARYLAND PARKWAY LAS VEGAS, NV 89154	NONE	PC	GENERAL SUPPORT	300,000
UNIVERSITY OF UTAH - BASKETBALL PROGRAM 201 PRESIDENTS CIRCLEROOM 203 SALT LAKE CITY, UT 84112	NONE	PC	GENERAL SUPPORT	100,000
Total			▶ 3a	30,296,993

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY OF UTAH - CONCOURSE NONE PC GENERAL SUPPORT 200,000 ARENA 1825 SOUTH CAMPUS DRIVE CALT LAVE CITY LIT 04112

SALI LAKE CITY, UT 84112				
UNIVERSITY OF UTAH - CRIMSON PARENTS 201 PRESIDENTS CIRCLE SALT LAKE CITY, UT 84112	NONE	PC	GENERAL SUPPORT	2,500
UNIVERSITY OF UTAH - MOFFITT SCHOLARSHIPS 201 PRESIDENTS CIRCLE	NONE	PC	GENERAL SUPPORT	19,918

30,296,993

SALT LAKE CITY, UT 84112

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY OF UTAH COLLEGE OF FINE NONE PC GENERAL SUPPORT 25,000 ARTS

201 PRESIDENTS CIRCLE SALT LAKE CITY, UT 84112				
UNIVERSITY OF UTAH NEUROPSYCHIATRIC INSTITUTE 501 CHIPETA WAY	NONE	PC	GENERAL SUPPORT	75,000

501 CHIPETA WAY SALT LAKE CITY, UT 84108				
UNIVERSITY OF UTAH PRESIDENTIAL CHAIRS-HEALTH SCIENCES 201 PRESIDENTS CIRCLE	NONE	PC	GENERAL SUPPORT	450,000

•				
UNIVERSITY OF UTAH PRESIDENTIAL CHAIRS-HEALTH SCIENCES 201 PRESIDENTS CIRCLE SALT LAKE CITY, UT 84112	NONE	PC	GENERAL SUPPORT	450,000
Total			<b>&gt;</b> 3a	30,296,993

Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UTAH ANTI-BULLYING COALITION NONE PC GENERAL SUPPORT 100,000 9350 SOUTH STATE STREET SANDY. UT 84093

UTAH FOOD BANK 3150 SOUTH 900 WEST SALT LAKE CITY, UT 84119	NONE	PC	GENERAL SUPPORT	50,000
UTAH STATE UNIVERSITY - JMH PRESIDENT CHAIR IN LEADERSHIP 1400 OLD MAIN HILL LOGAN, UT 84322	NONE	PC	GENERAL SUPPORT	75,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UTAH STATE UNIVERSITY JMH BUS NONE PC GENERAL SUPPORT 2,500,000 SCHOOL 1400 OLD MAIN HILL

LOGAN, UT 84322				
UTAH SYMPHONY 123 WEST SOUTH TEMPLE SALT LAKE CITY, UT 84101	NONE	PC	GENERAL SUPPORT	5,000
UTAH VALLEY UNIVERSITY - KIMBALL FUND 800 WEST UNIVERSITY PARKWAY ROOM AD-218 OREM, UT 84058	NONE	PC	GENERAL SUPPORT	7,023

30,296,993

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UTAH YOUTH VILLAGE NONE PC GENERAL SUPPORT 2,500

5800 SOUTH HIGHLAND DRIVE SALT LAKE CITY, UT 84121				
VALLEY BEHAVIORAL HEALTH 4460 SOUTH HIGHLAND DRIVE NUMBER 230	NONE	PC	GENERAL SUPPORT	14,000

4460 SOUTH HIGHLAND DRIVE NUMBER 230 SALT LAKE CITY, UT 84124				
VOLUNTEERS OF AMERICA UTAH 435 WEST BEARCAT DRIVE SALT LAKE CITY UT 84115	NONE	PC	GENERAL SUPPORT	50,000

SALI LAKE CITY, UT 84124				
VOLUNTEERS OF AMERICA UTAH 435 WEST BEARCAT DRIVE SALT LAKE CITY, UT 84115	NONE	PC	GENERAL SUPPORT	50,000
Total			<b>&gt;</b> 3a	30,296,993

Recipient If recipient is an individual, show any relationship to any foundation manager and address (home or business) any foundation manager recipient Amount

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
YWCA322 EAST 300 SOUTH	NONE	PC	GENERAL SUPPORT	12,500

YWCA322 EAST 300 SOUTH SALT LAKE CITY, UT 84111	NONE	PC	GENERAL SUPPORT	12,500
Total			▶ 3a	30,296,993

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491318038269								
TY 2018 Accounting Fees Schedule								
Name: THE HUNTSMAN FOUNDATION								
	EIN: 74-2521914							
	EIN: /4-232	1914						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
ACCOUNTING FEES	32,92	5 0		32,925				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491318038269 TY 2018 Applied to Prior Year Election Name: THE HUNTSMAN FOUNDATION **EIN:** 74-2521914 **Election:** PURSUANT TO CODE SECION 4942(H)(2) AND REGULATION SECTION 53.4942(A)-3(D)(2), TAXPAYER HEREBY ELECTS TO TREAT THE CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIUBED INCOME AS COMING FROM PRIOR YEAR'S UNDISTRIBUTED INCOME AS FOLLOWS: 2014: \$364,2962015: \$1,844,761SIGNED:

Note: To capture the full content of this document, please select landscape mode (11"  $\times$  8.5") when printing.

## **TY 2018 Expenditure Responsibility Statement**

Name: THE HUNTSMAN FOUNDATION

FTN: 74-2521914

CIN: 74-2321914									
Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
OLSON- HUNTSMAN VISION FOUNDATION	500 HUNTSMAN WAY SALT LAKE CITY , UT 84108	2017-07-14	2,500,000	TO FUND CHARITABLE GRANTMAKING BY OLSON- HUNTSMAN VISION FOUNDATION	911,530	NONE	11/8/2019		FOUNDATION STAFF REVIEWED THE GRANTEE'S REPORT BUT DID NOT CONDUCT ANY INDEPENDENT VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY TREAS REG SECTION 53 4945-5(C)(1)
OLSON- HUNTSMAN VISION FOUNDATION	500 HUNTSMAN WAY SALT LAKE CITY , UT 84108	2018-03-21	2,510,000	TO FUND CHARITABLE GRANTMAKING BY OLSON- HUNTSMAN VISION FOUNDATION	0	NONE	11/8/2019		FOUNDATION STAFF REVIEWED THE GRANTEE'S REPORT BUT DID NOT CONDUCT ANY INDEPENDENT VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY TREAS REG SECTION 53 4945-5(C)(1)
OLSON- HUNTSMAN VISION FOUNDATION	500 HUNTSMAN WAY SALT LAKE CITY , UT 84108	2018-12-20	1,250,000	TO FUND CHARITABLE GRANTMAKING BY OLSON- HUNTSMAN VISION FOUNDATION	0	NONE	11/8/2019		FOUNDATION STAFF REVIEWED THE GRANTEE'S REPORT BUT DID NOT CONDUCT ANY INDEPENDENT VERIFICATION OF THE GRANTEE'S REPORTS AS THERE HAS NOT BEEN ANY REASON TO DOUBT THEIR ACCURACY OR RELIABILITY TREAS REG SECTION 53 4945-5(C)(1)

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491318038269					
TY 2018 Investments Corporate Bonds Schedule							
	_						

Name: THE HUNTSMAN FOUNDATION

**ETN:** 74-2521914

Investments Corporate Bonds Schedule	

Name of Bond

BERNSTEIN - BONDS

35,560,984

End of Year Book

**Value** 

**End of Year Fair** 

35,560,984

Market Value

Name: THE HUNTSMAN FOUNDATION

**EIN:** 74-2521914

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
HUNTSMAN CORPORATION	221,835,000	221,835,000
CFT SECURITIES	431,480	431,480
BERNSTEIN - HUNTSMAN	54,823,472	54,823,472
BERNSTEIN - EQUITIES	21,753,195	21,753,195
BERNSTEIN - EQUITIES UNINVESTED FUNDS	311,031	311,031
BERNSTEIN - BDC PRIVATE CREDIT	267,854	267,854
BERNSTEIN - BDC PRIVATE CREDI UNINVESTED FUNDS	178,750	178,750

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## **TY 2018 Investments - Other Schedule**

Name: THE HUNTSMAN FOUNDATION

ETN: 7/1-252101/

EIN: /4-2	521914		
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FOUNDATION ENTERPRISES LLC	FMV	7,897,469	7,897,469
ARDEN REAL ESTATE PARTNERS I, LP	FMV	3,481,547	3,481,547
TOWER ARCH PARTNERS 1, LP	FMV	9,296,268	9,296,268
THAYER HOTEL INVESTORS	FMV	10,215,561	10,215,561
ARDEN REAL ESTATE PARTNERS II, LP	FMV	23,192,791	23,192,791
YUNFENG FUND II, LP	FMV	27,141,802	27,141,802
HGGC FUND II	FMV	15,349,790	15,349,790
AMPAC	FMV	49,500,000	49,500,000
GUAM TELECOM	FMV	50,013,329	50,013,329
RADCLIFF FU I, LLC	FMV	2,552,458	2,552,458
BERNSTEIN - GRI	FMV	4,685,032	4,685,032
BERNSTEIN - ARYA CAYMAN FUND	FMV	7,135,652	7,135,652
BERNSTEIN - ABSA (CAYMAN) PFIC	FMV	3,388,365	3,388,365

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491318038269						
TY 2018 Legal Fees Schedule						
_						
Name: THE HUNTSMAN FOUNDATION EIN: 74-2521914						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
LEGAL FEES	65,085	0		65,085		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491318038269					
TY 2018 Other Decreases Schedule								
Name:	THE HUNTSMA	AN FOUNDATION						
EIN:	74-2521914							
De	escription		Amount					
UNREALIZED LOSS			217,747,889					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491318
TY 2018 Other Expenses Sche	dule		
-			
Namou	THE HINTOM	NI FOLINDATION	

THE HUNTSMAN FOUNDATION

DLN: 93491318038269

1,243

13,000 24,442

26,449

**EIN:** 74-2521914

## Other Expenses Schedule

BANK FEES

**UMBRELLA INSURANCE** 

PAYROLL TAX EXPENSE

MISCELLANEOUS EXPENSE

INVESTMENT MANAGEMENT FEES

PORTFOLIO DEDUCTIONS FROM PARTNERSHIPS

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICERS LIABILITY INSURANCE	13,000	0		13,000
OFFICE EXPENSE	302	0		302
ADP PAYROLL FEES	861	0		861

0

1,243

13,000

39,374

26,449

305,625

727,930

305,625

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TY 2018 Other Income Schedul	е	

Name: THE HUNTSMAN FOUNDATION EIN: 74-2521914

Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP INCOME	2,116,753	-261,440	2,116,753
PFIC INCOME	88,464	121,910	88,464
TAX REFUND	178,212	4,325	178,212
PARTNERSHIP INCOME	27,359,717		27,359,717

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93491318038269   TY 2018 Other Professional Fees Schedule					
Name: THE HUNTSMAN FOUNDATION EIN: 74-2521914					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

100,000

CONSULTING FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491318038269
TY 2018 Taxes Schedule				_
Name: THE HUNTSMAN FOUNDATION EIN: 74-2521914				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAX EXPENSE	2,585,311	0		0
FOREIGN TAXES	208	281,831		0
STATE TAX PAYMENT	200,639	0		75

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -			DLN: 93491318038269
Schedule B	Schedule d	of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		i 990, 990-EZ, or 990-PF <u>:////////////////////////////////////</u>	on	2018
Name of the organizatio			Employer id	dentification number
Organization type (chec	one)		74-2521914	
	,			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organiz	) (enter number) organization		
	4947(a)(1) nonexempt charitable	trust <b>not</b> treated as a private	te foundation	
	☐ 527 political organization			
Form 990-PF	501(c)(3) exempt private foundat	lon		
4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundat	ion		
	on filing Form 990, 990-EZ, or 990-PF tha roperty) from any one contributor Comple			
Special Rules				
under sections 50 received from any	n described in section 501(c)(3) filing Form 9(a)(1) and 170(b)(1)(A)(vi), that checked one contributor, during the year, total com 1h, or (ii) Form 990-EZ, line 1 Complete I	Schedule A (Form 990 or 99 tributions of the greater of (*)	90-EZ), Part II, line 13,	16a, or 16b, and that
during the year, to	n described in section 501(c)(7), (8), or (1) all contributions of more than \$1,000 <i>excluse</i> prevention of cruelty to children or animals.	<i>usively</i> for religious, charitat	ole, scientific, literary, c	
during the year, co If this box is check purpose Don't co	n described in section 501(c)(7), (8), or (1) ntributions exclusively for religious, charited, enter here the total contributions that inplete any of the parts unless the <b>Genera</b> e, etc., contributions totaling \$5,000 or mo	able, etc , purposes, but no were received during the ye i <b>l Rule</b> applies to this organi	such contributions tota ear for an <i>exclusively</i> re ization because it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and <b>must</b> answer "No" on Part IV, line 2, of its m 990PF, Part I, line 2, to certify that it do	s Form 990, or check the bo	x on line H of its	
For Paperwork Reduction Actor Form 990, 990-EZ, or 990-		Cat No 30613X	Schedule B (Form 990	, 990-EZ, or 990-PF) (2018)

Contributors (see methodorous base depictoric copies of Part II additional Space in needed   Contributions   Contributions   Contributions	Name of organization THE HUNTSMAN FOUNDATION		Employer identification 74-2521914	Employer identification number 74-2521914		
(a) No. Name, address, and ZIP + 4    Complete Part II for nonceash contributions   Person   Payroll   Pay	Part I	Contributors (See instructions) Use duplicate copies of Part I if a	dditional space is needed			
Solidation   Sol		(b)	(c)	(d) Type of contribution		
SALT LAKE CITY, UT 89108    SALT LAKE CITY, UT 89108   Complete Part il for noncash contributions   Complete Pa	1			<b>▼</b>		
(a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4  (c) Total contributions    Complete Part II for nonceash contributions   Type of contribution			\$ 281,034			
No. Name, address, and ZIP + 4    No.   Name, address, and ZIP + 4   Total contributions   Person   Payroll		SALT LAKE CITY, UT 89108				
Payroll   Noncash   Complete Part II for noncash contributions   Name, address, and ZIP + 4   Total contributions   Type of contribution   Person   Payroll   Noncash   Complete Part II for noncash contributions   Person   Payroll   Noncash   Complete Part II for noncash contributions   Noncash   Noncash   Complete Part II for noncash contributions   Noncash   Noncash   Complete Part II for noncash contributions   Noncash   Complete Part II for noncash contributions   Noncash   Complete Part II for noncash contributions   Noncash   Person   Payroll   Noncash   Payroll   Noncash   Person   Payroll   Payroll   Noncash   Person   Payroll			(c) Total contributions	(d)		
S   Noncash       (Complete Part II for noncash contributions)   (Comp	_					
(a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4    Complete Part II for noncash contributions   Person			\$			
No. Name, address, and ZIP + 4    Total contributions   Person   Payroll   Noncash   Complete Part II for noncash contributions   Person   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash   Payroll   Noncash   Payroll   Payroll						
Payroll   Noncash   Complete Part II for noncash contributions   Noncash   Noncash   Complete Part II for noncash contributions   Noncash   Noncash   Complete Part II for noncash contributions   Noncash   Complete Part II for non			(c) Total contributions	(d) Type of contribution		
(a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4  (c) (c) (d) Type of contribution Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4  (c) Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4  (c) Total contributions Type of contribution (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (c) Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)  (c) Complete Part II for noncash contributions				Person		
(a) No. Name, address, and ZIP + 4  (c) (c) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4  (c) (c) (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (c) Total contributions Person Payroll Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (c) Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  (c) Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions)	-			Payroll		
(a) No. Name, address, and ZIP + 4    Complete Part II for noncash contributions   Complete Part II for noncash				Noncash		
No. Name, address, and ZIP + 4    Person   Payroll   Noncash   Complete Part II for noncash contributions   Person   Payroll   Noncash   Person   Payroll   Person   Payroll   Payroll   Person   Payroll						
Payroll   Noncash   Complete Part II for noncash contributions   Noncash   Complete Part II for noncash contributions   Noncash   Nonc			(c) Total contributions	(d) Type of contribution		
S Noncash (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4    Complete Part II for noncash contributions   Person     Payroll     Noncash     (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)  (A) No. Name, address, and ZIP + 4    Complete Part II for noncash contributions     Person     Payroll     Payroll     Payroll     Payroll     Payroll     Payroll     Complete Part II for noncash contributions     Complete Part II for noncash contributions				Person		
(Complete Part II for noncash contributions)  (a) (b) (c) (d) Total contributions  Person Payroll Noncash (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)  (A) (b) (c) (d) Total contributions  (A) No. Name, address, and ZIP + 4 Total contributions  Person Payroll  Person Payroll  Noncash  (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)	-					
(a) No. Name, address, and ZIP + 4  (b) No. Name, address, and ZIP + 4  Contributions  Person Payroll Noncash  (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  Person Occupate Part II for noncash contributions  (Complete Part II for noncash contributions)  Person Payroll Noncash  (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)						
No. Name, address, and ZIP + 4  Total contributions  Person Payroll  Noncash  (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  Payroll Total contributions  Person Type of contributions  (Complete Part II for noncash contributions)  Person Payroll Noncash  (Complete Part II for noncash contributions)  Person Payroll  (Complete Part II for noncash contributions)				contributions)		
Payroll   Noncash   (Complete Part II for noncash contributions)   No. Name, address, and ZIP + 4   Noncash   Payroll   Type of contribution   Person   Payroll   Noncash   Noncash   (Complete Part II for noncash contributions)   Noncash   (Complete Part II for noncash contributions)   Payroll		(b) Name, address, and ZIP + 4	(c) Total contributions	Type of contribution		
S Noncash (Complete Part II for noncash contributions)  (a) (b) (c) (d) Total contributions  Person Payroll Noncash (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)						
(a) (b) (c) (d) Total contributions  Person Payroll Noncash  (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)  (Complete Part II for noncash contributions)			\$			
(a) No. Name, address, and ZIP + 4 Total contributions Type of contribution  Person Payroll Noncash  (Complete Part II for noncash contributions)				(Complete Part II for noncash		
Person Payroll Noncash (Complete Part II for noncash contributions)		(b)	(c)	(d)		
Payroll Noncash (Complete Part II for noncash contributions)	MO.	ivallie, address, allu ZIF + 4	Total Contributions	• •		
S Noncash (Complete Part II for noncash contributions)	-					
contributions )			\$			
A B . AAA AAA FF				contributions)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)