SCANNED OCT 2 5 2018

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

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.¹ 🦪 🖟

Open to Public

Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2016 calendar year, or tax year beginning NOV 1 20 17 D Employer identification number C Name of organization UTAH HUMANITIES COUNCIL Check if applicable Doing business as UTAH HUMANITIES Address change 87-0307076 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change  $\Box$ Initial return 801-359-9670 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Amended return SALT LAKE CITY, UT 84103 G Gross receipts \$ 1.380.776 Application pending F Name and address of principal officer **SUMIKO MARTINEZ** H(a) Is this a group return for subordinates? Yes No SAME AS ENTITIY H(b) Are all subordinates included? Tyes No. 501(c) ( If "No," attach a fist (see instructions) **✓** 501(c)(3) ) ◀ (insert no ) ☐ 4947(a)(1) or Tax-exempt status Website: ▶ **WWW.UTAHHUMANITIES.ORG** H(c) Group exemption number ▶ Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 1975 M State of legal domicile UΤ Part I Summary Briefly describe the organization's mission or most significant activities: UTAH HUMANITIES PROVIDES LEADERSHIP BY EMPOWERING INDIVIDUALS AND GROUPS TO IMPROVE THEIR COMMUNITIES THROUGH ACTIVE ENGAGEMENT IN THE Activities & Governance 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . 15 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 13 Total number of volunteers (estimate if necessary) . . . 6 115 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form.990-T, line-34 7h 0. Current Year Pnor Year Contributions and grants (Part VIII, line 1h). 1,155,882 1,379,940 9 Program service revenue (Part VIII, line 2g) 0. Investment income (Part VIII, column (A), lines 3, 4 and 7d) 10 3,134. 836. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII Colly for VA), line 12) 1.159.016. 1,380,776 Grants and similar amounts paid (Part IX, column (A); lines 1-3) . 13 44,892 51,332. Benefits paid to or for members (Part IX, column (A), line 4) . . 14 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 682,368. 711,468. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 365,421. 427,429. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,190,228. 1,092,681 Revenue less expenses Subtract line 18 from line 12 19 66,335. 190,548. **Beginning of Current Year** 20 Total assets (Part X, line 16) 2,280,450. 2,492,429. 21 Total liabilities (Part X, line 26) . . . 124,101 115,170. 22 Net assets or fund balances. Subtract line 21 from line 20 2,156,349 2,377,259. Signature Block 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 officer) is based on all information of which preparer has any knowledge Sign Executive Director Jodi Gra Here Type or print name and title Print/Type preparer's name Preparer's signature Paid Check I If self-employed Preparer Firm's name Firm's EIN ▶ **Use Only** Firm's address Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2016)

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Part I	III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u> D</u>
	Briefly describe the organization's mission:	
	UTAH HUMANITIES COLLABORATES WITH LIBRARIES, MUSEUMS, HISTORICAL SOCIETIES, SCHOOLS AND COLLEGES, A	
	CULTURAL AND CIVIC GROUPS; PROVIDES CAPACITY-BUILDING OPPORTUNITIES FOR VOULNTEERS AND PROFESSIONA	
	THE CULTURAL SECTOR; PRESENTS SPECIAL EVENTS INCLUDING AN ANNUAL STATEWIDE BOOK FESTIVAL; AND OFFE	RS
	MODEST GRANTS TO NONPROFIT ORGANIZATIONS FOR PUBLIC HUMANITIES PROJECTS  Did the organization undertake any significant program services during the year which were not listed on the	
2		[7] N -
	prior Form 990 or 990-EZ?	<b>™</b> NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3	services?	[7] No.
	If "Yes," describe these changes on Schedule O	₩ NO
	Describe the organization's program service accomplishments for each of its three largest program services, as mea	oured by
-4	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	o others
	the total expenses, and revenue, if any, for each program service reported	o others,
	the total experience, and total any, the basis program control topolitica	
	(Code ) (Expenses \$ 823,755. including grants of \$ ) (Revenue \$	<u> </u>
	UTAH HUMANITIES AWARDS MODEST GRANTS TO NONPROFIT ORGANIZATIONS FOR PUBLIC HUMANITIES PROGRAMS;	/
	COLLABORATES WITH LIBRARIES, MUSEUMS, HISTORICAL SOCIETIES, AND CULTURAL AND CIVIC GROUPS; PROVIDES	
	OPPORTUNITIES FOR LIFELONG LEARNING IN THE HUMANITIES; AND PRESENTS SPECIAL EVENTS, INCLUDING AN ANNI	
	BOOK FESTIVAL.	
4b	(Code) (Expenses \$including grants of \$) (Revenue \$	)
		••
4c	(Code. ) (Expenses \$ including grants of \$ ) (Revenue \$	)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶ 823,755.	

ABOUTO

Part I	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	1	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓_
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓_
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<b>✓</b>
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? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>✓</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
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Part I	V Checklist of Required Schedules (continued)			<u> </u>
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1
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		1
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		1
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
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 I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			<u> </u>
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
24	conservation contributions? If "Yes," complete Schedule M	30		<b>✓</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		<b>√</b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	<b></b>	<b>✓</b>
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		<del>                                     </del>
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	

Form **990** (2016)

Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	· ·	
4.	Fat allows when we talk		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0.	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		}
·	reportable gaming (gambling) winnings to prize winners?	10		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	'
_	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		<u> </u>	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<del>                                     </del>
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	l		ļ
	account)?	4a		✓
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	1		
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>/</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	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	1	1	}
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<b>/</b>
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۵.		]
7	gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c).  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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<del>                                     </del>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	<u> </u>		
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		-
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
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		L
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		ļ
. b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	(		
a b	Initiation fees and capital contributions included on Part VIII, line 12	1		
11	Section 501(c)(12) organizations. Enter:	1		1
''a	Gross income from members or shareholders	1	,	
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)	1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<i>-</i>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
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	1		
С	Enter the amount of reserves on hand	<b> </b>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	l 14h	l I	į .

Part '				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
Sactiv	Check if Schedule O contains a response or note to any line in this Part VI	<u>···</u>	<u></u> -	. 🗸
Secui	bit A. Governing body and wanagement		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .   1a   15		100	
	If there are material differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar		Ì	
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 15			
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		<b>✓</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		<b>✓</b>
6	Did the organization have members or stockholders?	6_		<b>✓</b>
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?			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		<b>/</b>
U	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	70		-
	the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
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 in Schedule O	9		✓_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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	1	<del>                                     </del>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	✓	
13	Did the organization have a written whistleblower policy?	13	<b>✓</b>	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	✓_	<u> </u>
b	Other officers or key employees of the organization	15b		<b>-</b>
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
, , a	with a taxable entity during the year?	16a		<b>-</b>
b		, va		
_	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		
Secti	on C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed ▶ UTAH			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	501(	c)(3)s	only)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, 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 red JODI GRAHAM, 202 W 300 N SALT LAKE CITY, UT 84103, 801-359-9670	cords	. ▶	

Form	200	100	-

Form **990** (2016)

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

#### 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons

Check this box if neither the organization no	r any relate	d org	anız	atıo	n c	ompe	nsa	ited any currer	t officer, directo	r, or trustee.
	}			((	2)					
(A)	(B)			Pos				(D)	(E)	(F)
Name and Title	Average	(do not de box, unle						Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for	익호	5	Q	<u>چ</u>	g Ţ	Ţ	from the	related organizations	other compensation
	related	Individual trustee or director	를	Officer	Key employee	p g	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ctal	g		퓛	e c	=	(W-2/1099-MISC)		organization
	line)	trus	1 m		yee	ğ		l	ļ	and related organizations
		fee	Institutional trustee		"	Highest compensated employee	ļ	ļ	ļ	
	<u> </u>	ļ	e			ê	_			
(1) DAVID ALLRED	1.5									
DIRECTOR	†	1						o.	o	0.
(2) JANICE BROOKS	1.5		П							·
DIRECTOR		1			l	[		0	o	0
(3) SIMÓN CANTARERO	15									
DIRECTOR		✓						o.	o.	0.
(4) JONI CRANE	15									
DIRECTOR		1						0	o	0.
(5) KEN CROSSLEY	1.5	]			(					
DIRECTOR	L	/					L	0.	0	0.
(6) DON GOMES	1.5	ļ			ļ					
DIRECTOR	<u> </u>	1			_		_	0_		0.
(7) JULIE HARTLEY	1.5	ļ				ļ				
DIRECTOR	<del> </del>	<b>✓</b>			<u>_</u>		L	<b>O</b> .	0.	0
(8) PHYLLIS HOCKETT	1.5				l	ļ		{		
DIRECTOR		<b>✓</b>			L	L	_	0.	0.	0.
(9) MATTHEW LAWYER	1.5	]			ļ	ļ		l		
DIRECTOR		1			L			O.	0.	0.
(10) MELISSA MARSTED	1.5	ļ	U		ļ	ļ	ļ	{		
FISCAL AGENT	<b></b>			✓	L	L		0.	0.	0.
(11) SUMIKO MARTINEZ	3.0	ļ	l I			l		{	ļ	
BOARD CHAIR		L		✓		<u> </u>		0.	0.	0.
(12) DON MONTOYA	1,5	1			ļ	[	į i	į.		
DIRECTOR	<u> </u>	1			_			0.	0.	0.
(13) SCOTT SPRENGER	1.5		, ,		ļ	[		Į.		
DIRECTOR	<u> </u>	1				<u> </u>		0.	0.	0.
(14) RANDY WILLIAMS	1.5	ļ			ļ	(		l		
VICE CHAIR		L	L	✓	L	L		<u> </u>	0.	0.

										mployees (c				
					•	C)			1	ļ				
	(A)	(B)	(do n		Pos eck		than o	one	(D)	(E)		(	(F)	
	Name and title	Average hours per	box,	unles	s pe	rson	ıs both	an	Reportable compensation	Reportable compensation	1		mated ount of	
		week (list any		_	_	_	or/trust	<del></del>	from	related	"0"		ther	
		hours for related	u div	nstit	Officer	Key employee	ig dig	Former	the organization	organizatio (W-2/1099-M			ensation m the	
		organizations	ecto	ē	<b>.</b>	ğ	est c	ᅙ	(W-2/1099-MISC)		.50,		nization	
		below dotted line)	2 2	<u>a</u>		loye	ğ	1	}	<u> </u>	1		related	
		"""	Individual trustee or director	Institutional trustee		6	Highest compensated employee	1	1			organ	izations	
		ĺ		"			ated		1					
(15) HE	NRY WURTS	1.5		П										
PAST	CHAIR				✓	_		_	0.		0			0.
(16)				} }	}	}	1	1	}	1				
/4.71							ļ	-		<b>-</b>				
<u>m</u>				1	1	Ì	1							
(18)				$\vdash$	-	-	ļ	-	<del> </del>	<del> </del>				
327							[	l	l	•				
(19)						_		Ι-						
							<u></u>							_
(20)			}			1	1	Ì	1	}				
(04)					-	<del> </del>	<u> </u>			ļ				
(21)		<del>}</del>	ł	1	1		]		]					
(22)		<del> </del>	├─	$\vdash$	├	├	<del> </del>	├-	<del> </del>	<del> </del>	$\dashv$			
<u> </u>	·	† <b>-</b>	1											
(23)								$\vdash$						
			<u> </u>				L	<u> </u>						
(24)														
			<b> </b>	1				<u> </u>						
(25)			Ì	1	Ì			•	l					
1b	Sub-total	<b></b>	L	نـــا		<u> </u>	<u> </u>	Ļ	<del> </del>					
C	Total from continuation sheets to Part		n A	•	•	•			0	<del></del>	0.			<u>0.</u> 0.
d	Total (add lines 1b and 1c)			•		•	•	•	0		0.			0.
2	Total number of individuals (including bu					ted	above	e) w	<del></del>	ore than \$10		of		
	reportable compensation from the organ								0.					
													Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est comper	nsated	ļ		
	employee on line 1a? If "Yes," complete							•				3		✓_
4	For any individual listed on line 1a, is the organization and related organizations													
	individual			100,				., .,	· · · · ·			4		<b>√</b>
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	fro	m an	/ un	related organiz	zation or ind	vidual	-		<u> </u>
	for services rendered to the organization											5		1
Section	on B. Independent Contractors													
1	Complete this table for your five highest													
	compensation from the organization. Re	oort compe	nsatio	on fo	or th	те с	alend	lar y	ear ending wit	h or within t	he orga	anizatıc	n's tax	<
	year.							т-		<del></del>				
	(A) Name and business add	tress						1	(B) Description of s	ervices	С	(C) Compens	ation	
						-		├─	<del></del>	<del></del>				
								1						
	<del></del>	<del>- ,</del>						L						
2	Total number of independent contractor received more than \$100,000 of compens							o th	iose listed ab	ove) who				į

Part	VIII	Check if Schedule O contains a response or note	to any line in this	Part VIII		П
		Officer in Octiculate O Contains a response of Fioto	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns 1a				
irar	b	Membership dues 1b				
s, G Am	С	Fundraising events 1c				
Contributions, Giffs, Grants and Other Similar Amounts	d	Related organizations 1d				
	е	Government grants (contributions) 1e 1,011,54	6			
	f	All other contributions, gifts, grants,				
혈		and similar amounts not included above 1f 368,39	<del>-</del>			
ont nd (	g	Noncash contributions included in lines 1a-1f S 4,38				
<u>5 6</u>	h	Total. Add lines 1a-1f ▶  Business Code	1,070,040.1			ļ
Program Service Revenue	0-	Business Code	<u>'</u>			
eve	2a			<del></del>		<del> </del>
9	b		<del>                                     </del>			<del> </del>
Ž	d		<del> </del>		<del></del>	<del> </del>
Š	e		<del> </del>		<del> </del>	<del> </del>
grar	f	All other program service revenue	+		<del> </del>	<del> </del>
ě	g	Total. Add lines 2a–2f	0.		<u> </u>	<u> </u>
	3	Investment income (including dividends, interest			<u> </u>	Ţ <u>-</u>
	ļ	and other similar amounts)	836.	836.		
	4	Income from investment of tax-exempt bond proceeds ▶				T
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	b	Less <sup>,</sup> rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Secunties (ii) Other assets other than inventory	-			
	b	Less cost or other basis and sales expenses .				
	С	Gain or (loss) .	-			ļ
	d	Net gain or (loss)				
enne,	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c). See Part IV, line 18				
돌	ь	Less. direct expenses b	7			
0	c	Net income or (loss) from fundraising events . ▶				
	9a	Gross income from gaming activities.  See Part IV, line 19 a				
	b	Less: direct expenses b  Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less				
	_	·	-{			
	b	Less: cost of goods sold b				<b>∮</b>
	<u></u>	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				<del> </del>
	110	TVISCERATIOUS NEVETURE BUSINESS COLO	<u></u>			·
	11a		<del> </del>	<del></del>	<del></del>	<del> </del>
	b		<del>                                     </del>	<del></del>	<del></del>	<del> </del>
	d	All other revenue	<del>                                     </del>		}	<del> </del>
	e	Total. Add lines 11a-11d	0.		<del>}</del>	<del>}</del> -
	12	Total revenue. See instructions	<del>-</del>	836.	<del> </del>	<del> </del>
	<del></del>		1,380,116	535.		Form <b>990</b> (2016)

# Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com			s must complete colu	ımn (A)
	Check if Schedule O contains a respon-			<del> </del>	
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	51,332.	51,332.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0.	0.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0	0.		
4	Benefits paid to or for members	0	0.		
5	Compensation of current officers, directors,		İ		
	trustees, and key employees		0.	0.	0.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0.	0.
7	Other salaries and wages	499,110	304,309.	113,166	81,635.
8	Pension plan accruals and contributions (include section 401/k) and 403/h) employer contributions)				
•	section 401(k) and 403(b) employer contributions)	56,648.	32,453.	13,776.	10,419.
9	Other employee benefits	117,660	74,329.	21,262	22,069.
10	Payroll taxes	38,049	22,996	8,670	6,383.
11	Fees for services (non-employees)				
a	Management			<del></del>	<del></del>
b	Legal	22 220	2044		
c d	Lobbying	23,338.	2,044.	21,294.	<u>0.</u>
e	Professional fundraising services See Part IV, line 17	6,354.		6,354.	0.
f	Investment management fees	0	0	0.	0. 0.
g	Other. (If line 11g amount exceeds 10% of line 25, column			0.	<u>U.</u>
3	(A) amount, list line 11g expenses on Schedule O.) .	0	0.	0.	0.
12	Advertising and promotion	2,872.	0.	2,872.	0.
13	Office expenses	32,164	16,353.	11,610.	4,201.
14	Information technology	20,026	14,040	5,986	<del>- 1,231.</del>
15	Royalties	0.	0.	0.	0.
16	Occupancy	32,052.	17,629	11,218.	3,205.
17	Travel	28,475	23,645.	2,724	2,106
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0.	0.
19	Conferences, conventions, and meetings .	11,457.	8,659.	2,798.	0.
20	Interest	0	0.	0.	0
21	Payments to affiliates	0.	0.	0.	0
22	Depreciation, depletion, and amortization .	3,351.	1,675.	1,676.	<u>0.</u>
23	Insurance	2,207.	1,213.	773.	221.
24	Other expenses. Itemize expenses not covered		ĺ		
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	•	***			
a	Program expenses	239,251.	239,251.	0.	0.
ь					<del></del>
q C				<del></del>	
d	All other expanses	25.000	<del></del>		
е 25	All other expenses  Total functional expenses. Add lines 1 through 24e	25,882.	13,827.	11,247.	808.
26	Joint costs. Complete this line only if the	1,190,228.	823,755.	235,426.	131,047.
20	organization reported in column (B) joint costs	<b>!</b>	1	1	
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	{	<b>†</b>		
	fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	}	1		

32

Zet 33 32

33

2,377,259.

2,492,429. Form **990** (2016)

2,156,349.

2,280,450.

Form 990 (2016) Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash-non-interest-bearing . 1 29,310. 20,082. 2 Savings and temporary cash investments . . . 2 1,223,026 1,380,038. Pledges and grants receivable, net . 3 3 806,165. 872.752. 4 Accounts receivable, net . . . 4 . . . . . . . . 0 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . 0. 0. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 0. Assets 0. 7 Notes and loans receivable, net . . . 7 0 0. 8 Inventories for sale or use . . . . . . 8 0 0. Prepaid expenses and deferred charges . o 9 0 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 39,667 Less: accumulated depreciation . 10b 10c 29,466 13,552. 10,201. 11 11 Investments—publicly traded securities 0 207,009 12 12 Investments—other securities. See Part IV, line 11 . . . 207,009 13 Investments - program-related. See Part IV, line 11. 13 0 0. 14 14 Other assets. See Part IV, line 11 . . . . . . 15 15 1,388 2,347. Total assets. Add lines 1 through 15 (must equal line 34) 16 2,280,450. 16 2,492,429 Accounts payable and accrued expenses . . . 17 90,231. 17 97,044. 18 Grants payable 18 33,870 18,126. 19 Deferred revenue 19 0 0 20 Tax-exempt bond liabilities . . . . . . . . . 0.1 20 <u>0.</u> 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 0. 0. Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . 22 0 0. Secured mortgages and notes payable to unrelated third parties . . . 23 23 0. 0. Unsecured notes and loans payable to unrelated third parties . . . 24 24 0. 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D . 25 0 0. Total liabilities. Add lines 17 through 25 26 26 124,101 115,170 Organizations that follow SFAS 117 (ASC 958), check here ▶ 📝 and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 1,447,767. 1,375,642. 28 28 573,698 722,483. 29 29 207,009. 207,009. Organizations that do not follow SFAS 117 (ASC 958), check here > \(\sigma\) and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds . . . . Assets 31 Paid-in or capital surplus, or land, building, or equipment fund . . . . 31

Retained earnings, endowment, accumulated income, or other funds.

Total liabilities and net assets/fund balances . . . . .

~	4	•
Page	7	•

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)		1,38	0,776.
2	Total expenses (must equal Part IX, column (A), line 25)		1,19	0,228.
3	Revenue less expenses. Subtract line 2 from line 1		19	0,548.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		2,15	6,349.
5	Net unrealized gains (losses) on investments		3	0,362.
6	Donated services and use of facilities			0
7	Investment expenses			0.
8	Prior period adjustments			0.
9	Other changes in net assets or fund balances (explain in Schedule O)			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		2,37	7,259.
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII	· · · ·		<u>, IJ</u>
_	According to the description of the first control of the control o		Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other	<del></del>		
	If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O	ın		
20	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	-	
<b>2</b> a	If "Yes," check a box below to indicate whether the financial statements for the year were compiled of		╂	/
	reviewed on a separate basis, consolidated basis, or both.	٠		
	Separate basis Consolidated basis Both consolidated and separate basis	j		]
b	Were the organization's financial statements audited by an independent accountant?	2b	1	ļ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on		+*-	<del> </del>
	separate basis, consolidated basis, or both:	_		
	☑ 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 oversign	ht -	-	
_	of the audit, review, or compilation of its financial statements and selection of an independent accountant		1	1
	If the organization changed either its oversight process or selection process during the tax year, explain		+	
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ın		
	the Single Audit Act and OMB Circular A-133?	. 3a	1	[
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo th	ne		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	1	1
		Fo	rm <b>990</b>	(2016)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

2016

Department of the Treasury

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

nternal Revenue Service ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number 87-0307076 **UTAH HUMANITIES COUNCIL** Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives. (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . . . . g Provide the following information about the supported organization(s). (iv) is the organization (i) Name of supported organization (ii) FIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing document? (described on lines 1-10 support (see other support (see above (see instructions)) instructions) instructions) (A) (B) (C) (D) (E)

Part							
	(Complete only if you checked th	ie box on line	5, 7, or 8 of	Part I or if the	e organizatioi	n failed to qua	alify under
<u></u>	Part III If the organization fails to	quality unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support	(0) 2012	(h) 0010	(-) 0014	(4) 0015	(a) 001C	10 T-1-1
Calen	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
•	membership fees received. (Do not						
	include any "unusual grants")	1,242,188.	942,200	1,147,643	1,155,882	1,379,940	E 067 0E2
2	Tax revenues levied for the	1,242,100.	542,200	1,147,043	1,133,882	1,379,940	5,867,853
_	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			ı			
	organization without charge		·	 			
4	Total. Add lines 1 through 3	1,242,188.	942,200.	1,147,643.	1,155,882.	1,379,940.	5,867,853.
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly	l					
	supported organization) included on line 1 that exceeds 2% of the amount	l					
	shown on line 11, column (f)	ĺ			i		
6	Public support. Subtract line 5 from line 4				<del></del>		5,867,853.
Secti	on B. Total Support	·		لل	<del></del>	l	0,007,000.
Caler	idar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1,242,188.	942,200.	1,147,643.	1,155,882.	1,379,940.	5,867,853.
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
_	sources	2,414.	811.	896.	3,134.	836	8,091.
9	Net income from unrelated business activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or				<del></del> -		
	loss from the sale of capital assets						
	(Explain in Part VI)						
11	Total support. Add lines 7 through 10						5,875,944
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the		i's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop he			· · · · ·	<u> </u>	<u> </u>	· <b>&gt;</b> []
	on C. Computation of Public Suppor						
14	Public support percentage for 2016 (line	• • • • • • • • • • • • • • • • • • • •	•	. ,,,		14	99.86 %
15	Public support percentage from 2015 Sch					15	99.84 %
16a	331/3% support test—2016. If the organi box and stop here. The organization qua						
b	331/3% support test—2015. If the organi						
	this box and <b>stop here</b> . The organization						
17a	10%-facts-and-circumstances test – 20		•	•			_
,,,	10% or more, and if the organization me						
	Part VI how the organization meets the "						
	organization						▶ 🗆
b	10%-facts-and-circumstances test — 2	015. If the orga	anization did n	ot check a bo	x on line 13, 1	6a, 16b, or 17a	a, and line
	15 is 10% or more, and if the organiza	ation meets th	e "facts-and-d	circumstances'	' test, check t	this box and s	top here.
	Explain in Part VI how the organization r				=	=	a publicly
40	supported organization						🟲 🗆
18	<b>Private foundation.</b> If the organization di instructions						
							🚩 📗

	e A (Form 990 or 990-EZ) 2016	tions Dosor	ibad in Casti	500(a)(0)			Page 3
Part	Support Schedule for Organiza (Complete only if you checked th					t to qualificu	ndor Bort II
	If the organization fails to qualify						nder Fant II.
Secti	on A. Public Support	under the te	sts listed beit	ow, piease co	omplete Fait	··· <i>)</i>	<del></del>
	dar year (or fiscal year beginning in) ▶	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2012	(6) 2010	(0) 2014	(4) 2010	(6) 20.0	() (otal
	received. (Do not include any "unusual grants.")			1			}
2	Gross receipts from admissions, merchandise				<del>   </del>	7/	
	sold or services performed, or facilities furnished in any activity that is related to the					//	{
	organization's tax-exempt purpose				}	j.	
3	Gross receipts from activities that are not an					7	1
	unrelated trade or business under section 513				1	Í	
4	Tax revenues levied for the				7		1
	organization's benefit and either paid		1		1		ļ
	to or expended on its behalf				1		
5	The value of services or facilities				1/		
	furnished by a governmental unit to the				1		1
	organization without charge	<u> </u>				<u></u>	<u> </u>
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3				[ '		
	received from disqualified persons .						ļ
b	Amounts included on lines 2 and 3		Į	,/	1		
	received from other than disqualified		ļ	/			
	persons that exceed the greater of \$5,000	ı	ł	/			
	or 1% of the amount on line 13 for the year		<del></del>	ļ, '	ļ	<b> </b>	<del> </del>
C	Add lines 7a and 7b	<del></del>	<del> </del>	<del>/</del>	<del> </del>		<b>ֈ</b>
8	Public support. (Subtract line 7c from line 6.)		j			}	
Secti	on B. Total Support	L	L	L	L	L	<u> </u>
	idar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013 /	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6		/				1
10a	Gross income from interest, dividends,		/				1
	payments received on securities loans, rents,		/				Ì
	royalties and income from similar sources .		/		<u> </u>		1
b	Unrelated business taxable income (less		7				
	section 511 taxes) from businesses		/		]		
	acquired after June 30, 1975		ļ		ļ		
С	Add lines 10a and 10b		<u> </u>		ļ		
11	Net income from unrelated business					ļ	
	activities not included in line 10b, whether	1	}		1		
	or not the business is regularly carried on		ļ		<del> </del>		ļ
12	Other income Do not include gain or		}			ļ	
	loss from the sale of capital assets (Explain in Part VI.)			}	1		}
40	• •	<del></del>	<del> </del>	<del></del>	<del> </del>		<del> </del>
13	Total support. (Add lines 9, 10c, 11, and 12.)		1			1	}
4.4	and 12.)		ala firat assau	al Alaimat Carrest	6,645, 400, 40		F01(=)(0)
14	organization, check this box and stop he	-					, , , ,
Soot	ion C. Computation of Public Suppor			<del></del>	<del></del>	<del></del>	· · · • L
15	Public support percentage for 2016 (line			3 column (fl)		15	%
16	Public support percentage for 2016 (line of Public support percentage from 2015 Sci					16	% %
	ion D. Computation of Investment In			<del>: ··· : ··</del>	<del>-:-:-:</del>	1101	
17	Investment income percentage for 2016 (			v line 13 colu	mn (f)\	17	%
18	Investment income percentage from 2015					18	
19a	331/3% support tests—2016. If the organ						
	17 is not more than 331/8%, check this box						

b 331/3% support tests-2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

### Part IV Supporting Organizations

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	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 <b>Part VI</b> 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	40 4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control?  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.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined in 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 <b>Part VI</b> .	9c		
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 10b below.	10a		
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.)	10b		

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 in (b) and (c)					
	below, the governing body of a supported organization?	11a				
	A family member of a person described in (a) above?	11b				
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c				
Secti	on B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or		Ì			
	controlled the organization's activities. If the organization had more than one supported organization,		1			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1				
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	<u></u>				
•		1	<b> </b> -	<u> </u>		
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated,	1	1			
	supervised, or controlled the supporting organization.					
Sacti	on C. Type II Supporting Organizations	2	L	L		
36011	on o. Type it supporting organizations		Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	Γ	163	140		
-	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control		ì			
	or management of the supporting organization was vested in the same persons that controlled or managed		1			
	the supported organization(s).	1				
Secti	on D. All Type III Supporting Organizations		L	Ь		
			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	'	1			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the	L				
	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 <b>Part VI</b> how					
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		ļ		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		}	1		
	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					
Sacti	ion E. Type III Functionally Integrated Supporting Organizations	3	L	l		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	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 government entity (	see in:	struct	ions).		
2	Activities Test. Answer (a) and (b) 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 in (a) 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	}		1		
	reasons for the organization's position that its supported organization(s) would have engaged in these			l		
	activities but for the organization's involvement	2b				
3	Parent of Supported Organizations. Answer (a) and (b) below.					
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>		L		
	trustees of each of the supported organizations? Provide details in Part VI.	3a				
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		l	l		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b				

Schedule A (Form 990 or 990-EZ) 2016			Page l		
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	jani	zations			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	tru iizat	st on Nov. 20, 1970 (explicted sections)	lain in Part VI). See		
Section A - Adjusted Net Income (A) Prior Year					
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				
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 (optional)		
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	10				
d Total (add lines 1a, 1b, and 1c)	1d				
e Discount claimed for blockage or other factors (explain in detail in Part VI):					
2 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 1-1/2% 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 035.	6				
7 Recoveries of prior-year distributions	7				
8 Minimum Asset Amount (add line 7 to line 6)	8				
Section C - Distributable Amount					
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2 Enter 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-functionally integrated Type III supporting organization (see instructions).

Part	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish e	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
_ 5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in <b>Part VI</b> ). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b			!	
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g_	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i_	Carryover from 2011 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7:			
a	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2016 distributable amount		·—·	
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:	·		
a	<u></u>			
<u> </u>	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
е_	Excess from 2016			

Part VI	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.)
**	
	······································
-,	

### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047 2016

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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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-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

Tax) (s	see separate instructions), th	nen			
	ection 501(c)(4), (5), or (6) orga of organization	anizations Complete Part III		Employerida	ntification number
				Employer ide	
	HUMANITIES COUNCIL  I-A Complete if the	e organization is exempt unde	r soction 501/a	Norio a costion 527	87-0307076
1	Provide a description of	the organization's direct and inc	direct political ca	maging activities in Par	t IV (see instructions for
•	definition of "political car		uncot pontical ca	impaign activities in I ai	t iv. (see instructions for
2		y expenditures (see instructions) .		•	\$
3		cal campaign activities (see instruc			\$
		e organization is exempt unde			
1		excise tax incurred by the organiza	<del></del>	<del></del>	\$ 0.
2		excise tax incurred by organization			\$ 0.
3	If the organization incurre	ed a section 4955 tax, did it file For	m 4720 for this ye	ear?	. Yes 🗸 No
4a	Was a correction made?				. 🗌 Yes 📝 No
þ					
Part		e organization is exempt und			1(c)(3).
1		ly expended by the filing organiz		· · · · · · · · · · · · · · · · · · ·	
^	activities				
2		filing organization's funds contributies	•		•
3	•	expenditures Add lines 1 and 2.			
3	•				<b>.</b>
4		n file Form 1120-POL for this year?			Yes No
5		ses and employer identification nur			
5		ents. For each organization listed,			
		ontributions received that were proj			
		fund or a political action committed			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(u) Hanto	10) / 100:1000	(0) 2.114	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization if
					none, enter -0-
(1)					
		<del></del>			<del> </del>
(2)					
	. <del></del>			<del> </del>	<del> </del>
(3)					
		<del> </del>	<del></del>	<del> </del>	<del> </del>
(4)		ļ			
		<del> </del>		<del> </del>	<del> </del>
(5)		}			
	<del> </del>			<del> </del>	<del>                                     </del>
(6)		T		ľ	· ·

Pa	rt II-A	Complete if the organization section 501(h)).	n is exempt u	ınder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under		
A	Check ▶ ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
В	Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply.								
			bying Expendit			(a) Filing	(b) Affiliated		
		(The term "expenditures" m	)	organization's totals	group totals				
1	a Total lo	obbying expenditures to influence	ing)						
	<b>b</b> Total lo	obbying expenditures to influence	g)						
	c Total lo	obbying expenditures (add lines	la and 1b) .						
		exempt purpose expenditures							
		xempt purpose expenditures (ad		•			<del></del>		
	f Lobbyi columi	ng nontaxable amount. Enter	the amount fr	om the following	table in both				
	If the ar	mount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:				
	Not ove	r \$500,000	20% of the an	nount on line 1e					
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000				
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000				
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000				
		7,000,000	\$1,000,000	<del></del>					
	<b>g</b> Grassr	oots nontaxable amount (enter 2	5% of line 1f)						
	h Subtra	ct line 1g from line 1a. If zero or	ess, enter -0-			ļ			
		ct line 1f from line 1c If zero or li				L			
	•	e is an amount other than zero ng section 4911 tax for this year	_	1h or line 1, dic	_		Yes No		
	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)								
		Lobbyin	g Expenditures	During 4-Year A	veraging Period				
	Cale	endar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	( <b>d)</b> 2016	(e) Total		
	a Lobby	ing nontaxable amount							
	-	ing ceiling amount of line 2a, column (e))							
	c Total l	obbying expenditures							
	d Grassi	roots nontaxable amount							
		oots ceiling amount of line 2d, column (e))							
	f Grassi	roots lobbying expenditures				1			

Schedule C (Form 990 or 990-EZ) 2016

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768	
For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(	a)		(b)
descr	iption of the lobbying activity.	Yes	No	Aı	mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local	+			<del></del>
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		1		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		1		
c	Media advertisements?		7		
d	Mailings to members, legislators, or the public?		1		
е	Publications, or published or broadcast statements?		<b>V</b>		
f	Grants to other organizations for lobbying purposes?		1		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<b>✓</b>			3,354
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		1		
į.	Other activities?	1			3,000
J	Total. Add lines 1c through 1i		1		6,354
2a b	If "Yes," enter the amount of any tax incurred under section 4912		-		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<b> </b>			
Part		;)(5),	or se	ction	
	501(c)(6).				
					Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<b></b>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•		2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				LL
Part	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," C				lina 2 is
	answered "Yes."	) ( ( ( )	ran	. III-A,	III 6 0, 15
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of			
а	Current year		2a	1	
ь	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	yıng		l	
_	and political expenditure next year?	• •	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	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 gro		N. D.	<del>-                                      </del>	
	on instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup iis	t); Pai	τ II-A, I	ines i ano
PART	II-B, LINE 1, LOBBYING ACTIVITIES:				
UTAH	HUMANITIES PAID SOME BOARD AND STAFF TRAVEL EXPENSES AS WELL AS ANNUAL DUES TO THE	FEDE	RATIO	ON OF S	STATE
	***************************************				
HUMA	NITIES COUNCILS.				

Schedule C (For	rm 990 or 990-EZ) 2016	Page <b>4</b>
Part IV	Supplemental Information (continued)	
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	•••••••••••••••••••••••••••••••••••••••	
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### SCHEDULE D (Form 990)

Department of the Treasury

**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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number **UTAH HUMANITIES COUNCIL** 87-0307076 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year . . . . 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . 4 Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . ☐ Yes ☐ No 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 (e.g., 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 Total number of conservation easements . . . . . 2a Total acreage restricted by conservation easements . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . . . . . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (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. b If the organization elected, as permitted under SFAS 116 (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. (i) Revenue included on Form 990, Part VIII, line 1 . . . . . . . . . . . . . . . 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 SFAS 116 (ASC 958) relating to these items:

Revenue included on Form 990, Part VIII, line 1 . . . . . **b** Assets included in Form 990, Part X \_ . \_ . \_ . \_ . \_ . \_ .

Part	Use Organizations Maintaining (	Collections of A	art, Historic	al Treasures	, or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and oth	ner records, o	check any of th	e follov	ving that are a	significant use of its
а	☐ Public exhibition		d 🔲 L	oan or exchan	ge progi	rams	
b	☐ Scholarly research		e 🗌 🤆	Other	- <b>-</b>		***************************************
С	☐ Preservation for future generations						
4	Provide a description of the organization XIII.	on's collections a	nd explain h	ow they further	the org	anızatıon's exe	mpt purpose in Part
5	During the year, did the organization sassets to be sold to raise funds rather to	than to be maintai					lar 🗌 Yes 🔲 No
Part					<u> </u>		
	Complete if the organization 990, Part X, line 21.						
1a	Is the organization an agent, trustee, included on Form 990, Part X?						
b	If "Yes," explain the arrangement in Pa	rt XIII and comple	te the follow	ng table <sup>,</sup>		<del>, , , , , , , , , , , , , , , , , , , </del>	Amount
С	Beginning balance				10	<del> </del>	
d	Additions during the year				1d	+	
e	Distributions during the year .				1e	<del></del>	
f					1f	<del></del>	<del></del>
2a	Did the organization include an amoun	t on Form 990, Pa	rt X, line 21,	for escrow or c	ustodial	account liabilit	v? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa						
	t V Endowment Funds.						
	Complete if the organization	answered "Yes"	on Form 99	90, Part IV, lin	e 10		
		(a) Current year	(b) Prior yea	r (c) Two yea	rs back	(d) Three years bac	ck (e) Four years back
1a	Beginning of year balance	207,009.	207,	009. 2	07,009	207,00	9 207,009
b	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance	207,009.	207,	009. 2	07,009.	207,00	9. 207,009
2	Provide the estimated percentage of the	e current year en	d balance (lın	e 1g, column (a	a)) held a	as	
а	Board designated or quasi-endowmen	t <b>&gt;</b>	%				
b		00%					
С	Temporarily restricted endowment ▶	%					
	The percentages on lines 2a, 2b, and 2	c snoula equal 10					
3a	Are there endowment funds not in the	possession of the	e organizatio	n that are held	and ad	ministered for t	he
	organization by.						Yes No
	(i) unrelated organizations						3a(i) ✓
	(ii) related organizations						3a(ii) ✓
þ	If "Yes" on line 3a(ii), are the related or					<i>.</i>	3b
4	Describe in Part XIII the intended uses		n's endowme	ent funds.			
Pari	VI Land, Buildings, and Equip						
	Complete if the organization						
	Description of property	(a) Cost or oth		Cost or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land						
b	Buildings				ļ		
c	Leasehold improvements						
đ	Equipment			39,667.	<u> </u>	29,466.	10,201.
e	Other				L		
Total.	. Add lines 1a through 1e. (Column (d) m	ust equal Form 99	90, Part X, co	lumn (B), line 10	Oc.) .	>	10,201.

Part VII	Investments – Other Securitie Complete if the organization and		rm gan	Part IV line	a 11h See For	m 990 Part X line 12
	(a) Description of security or categor (including name of security)			Book value	(c) M	ethod of valuation nd-of-year market value
(1) Financia	I derivatives		† ···-			
(2) Closely-l	held equity interests					
• • • • • • • • • • • • • • • • • • • •	ECURITIES AND OTHER INVESTMENTS			207,009	COST	
(A)		·				
(B)						<u></u> -
(C)		·				
(D) (E)			· <del>                                       </del>			<del></del>
(F)						
<del>\` /</del> (G)			<del>                                     </del>		<del></del>	<del></del>
<del>\'</del> / (H)			<del></del>		<u> </u>	
	(b) must equal Form 990, Part X, col (B) line 12) ▶		+	207,009.		
Part VIII	Investments - Program Relate	ed.	<del>'</del>		<del></del>	
	Complete if the organization an		rm 990	), Part IV, line	e 11c. See For	m 990, Part X, line 13.
	(a) Description of investment		(b)	Book value	, , ,	fethod of valuation nd-of-year market value
(1)						
(2)						
_(3)						
_(4)			<del> </del>	- <del></del>		
(5)			<del>                                      </del>			
_(6)		<del>_</del>	<del>-</del>	<del></del>		<del></del>
<u>(7)</u>		_ <del>_</del>	<del> </del>			
<u>(8)</u> (9)	<del></del>		<del>                                     </del>			
Part IX	Other Assets.  Complete if the organization an	swered "Yes" on Fo	orm 990	), Part IV, lin	e 11d. See For	m 990, Part X, line 15.
_(1)						
_(2)						
_(3)						
_(4)						
_(5)						
(6)						<del></del>
(8)		<del>-</del>			<del></del>	<del></del>
(9)						<del>-</del>
Total. (Coli	umn (b) must equal Form 990, Part X,	col (B) line 15 )		<del></del>	🕨	-
				<del></del>	<del></del>	
	Other Liabilities.	ewered "Vee" on Ec	rm 990	). Part IV. lin	e 11e or 11f. S	ee Form 990, Part X,
Part X	Complete if the organization an line 25.	swered res offic	,,,,,,	,		
	Complete if the organization an	(b) Book value				
Part X  1. (1) Federal	Complete if the organization an line 25.					
Part X  1. (1) Federal (2)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3) (4)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3) (4)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3) (4) (5) (6)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3) (4) (5) (6) (7)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3) (4) (5) (6) (7) (8)	Complete if the organization an line 25.  (a) Description of liability					
1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization an line 25.  (a) Description of liability	(b) Book value				

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue   Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	oer Returr	ı <b>.</b>
1	Total revenue, gains, and other support per audited financial statements	. 11	1,262,353
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	· <del>  ·  </del>	1,202,333
а		362	
b	Donated services and use of facilities	0.	
С	Recoveries of prior year grants	0.	
d	Other (Describe in Part XIII.)	457.	
е	Add lines 2a through 2d	. 2e	384,819
3	Subtract line 2e from line 1	. 3	877,534
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	0	
b	Other (Describe in Part XIII.)	242	
C		. 4c	503,242.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,380,776.
Part		s per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	1,190,228
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	0.
3	Subtract line 2e from line 1	. 3	1,190,228.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
р	Other (Describe in Part XIII )		
C	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	1,190,228.
2; Par PART	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b ant XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition XI, LINE 2d - OTHER	al information	on
REPR	ESENTS NET ASSETS RELEASED FROM RESTRICTIONS.		
PART	XI, LINE 4b - OTHER		
TEMP	ORARILY RESTRICTED CONTRIBUTIONS	•	\$503,242.
REPR	ESENTS TEMPORARILY RESTRICTED CONTRIBUTIONS.		***************************************
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			• • • • • • • • • • • • • • • • • • • •

Schedule D (Foi	orm 990) 2016	Page <b>5</b>
Part XIII	Supplemental Information (continued)	
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		***************************************
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### SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

#### 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.

2016

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

UTAH HUMANITIES COUNCIL (UH)	87-0307076			
FORM 990, PART VI, SECTION B, LINE 11: THE UHC AUDIT AND INVESTMENT COMMITTEE HAS THE	OPPORTUNITY TO REVIEW FORM 990			
AND REPORTS TO THE FULL BOARD OF DIRECTORS ANY ITEMS THEY RECOMMEND FOR DISCUSSION.				
FORM 990, PART VI, SECTION B, LINE 12C: UH REGULARLY AND CONSISTENTLY MONITORS AND I	ENFORCES COMPLIANCE WITH			
THE CONFLICT OF INTEREST POLICY. BOARD MEMBERS SIGN A PLEDGE TO ABIDE BY THE POLICE	Y, AND CONFLICTS ARE IDENTIFIED			
PRIOR TO EVERY GRANT REVIEW SESSION AND ANY INVESTMENT DECISIONS				
FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR RECOMMENDS STAFF COM	PENSATION AMOUNTS TO THE			
EXECUTIVE COMMITTEE ANNUALLY, AS PART OF THE PROPOSED BUDGET PRESENTAION, AND PI	ROVIDES COMPARABILITY DATA			
ANNUALLY FROM THEIR NATIONAL MEMEBERSHIP ASSOCIATION AND, AS AVAILABLE, FROM THE	UTAH NONPROFITS ASSOCIATION.			
THE EXECUTIVE COMMITTEE'S DECISIONS ARE SUMMARIZED IN MEETING MINUTES.				
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS AVAILABLE ON WWW.UTAHHUMANITIES.OF	RG			
FORM 990, PART 1, LINE 5:				
THE ORGANIZATION HAS A REGULAR STAFF OF 9 INDIVIDUALS; HOWEVER, W-2s ARE PROVIDED 1	O ADDITIONAL INDIVIDUALS			
WHO WORK ON TEMPORARY BASIS AS NEEDED TO SUPPORT THE ACTIVITIES AND PROGRAMS OF	THE ORGANIZATION.			

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
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	***************************************
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