Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2009

Open to Public Inspection

Internal Revenue Service

A	For the	2009 cal	endar ye	ar, or tax	ear beginni	ng				and er	nding					
В	Check if ap	oplicable:	Please	C Name o	f organization	Southe	rn Utah Wild	erness	Alliance	}		D Employer	identific	ation numb	er	
	Address (change	use IRS label or	Doing B	Business As							94-2936961				
\square	Name ch	ange	print or	Number	and street (or	P.O. box if mai	l is not delivered	to street	address)	Ro	om/suite	E Telephone	number			
	nitial retu	ım	type. See	425 East	100 South							801-486-316	31 _			
\square	Terminate	ed	Specific Instruc-	City or t	town, state or c	ountry, and ZIF	7 + 4		-							
	Amended	i return	tions.	Salt Lake	<u> Citv</u>		\	JT	84 ⁻	111 <u> </u>		G Gross rece	ipts \$		2,83	9,468
	Application	on pending	F N	ame and a	ddress of prir	ncipal officer:	<u></u> -				H(a) is	this a group retu	rn for aff	iliates?	Yes	X No
			Scott G	roene 425	East 100 S	South, Salt I	ake City, UT	84111				e all affiliates inc		Ī	T _{Yes} [No.
$\overline{}$	2V 0V0	mpt status			3) ∢ (inse		4947(a)(1)		527		1 `´	'No," attach a lis		structions)		
_					3) 4 (1130	<u> </u>	14547 (d)(1)	<u> </u>			ł		•	_		
		: > wwv							1			oup exemption r				
		rganization:		rporation	Trust _	Association	Other •	•		L Yea	r of forma	tion: 1983	M S	tate of legal	domicile:	UT
	art I		mmary								-					
	1						st significant									ot
						π of the Co	lorado Platea	<u>u, and</u>	tne mar	iagem	ent of	inese lands ii	n their	naturai st	ate for	
Ě		the bene	aur or an	American	15,						- -					
Ver	1.															
ő	2						tinued its ope							t assets.		4.4
•5 ₩	3						y (Part VI, line						3			
Activities & Governance	4 -						overning bod						5		<u> </u>	<u>11</u> 21
ŧ	5						 y)						6			100
_	7a						t VIII, column						7a			- 100
) b	_					n 990-T, line						7b	····		
	 	1101 0110	Jiatoa De	ioiniooo ta	Napio Illooni		11 000 1, 11110	<u> </u>	<u> </u>		' 	Prior Year	· · · ·	Curr	ent Year	
	8	Contribu	itions an	id grants (Part VIII, lin	ne 1h)	<i></i> .	,				1,687	7,763		1,53	30,683
Ę	9	9 Program service revenue (Part VIII, line 2g)								<u> </u>	0			0		
Revenue	10						, 4, and 7d) .					105	5,964		19	97,559
œ	11	Other re	venue (l	Part VIII, d	column (A),	lines 5, 6d,	8c, 9c, 10c, a	and 11e	e)			88	3,385		1	7,963
	12	Total reve	enue-ad	ld lines 8 th	rough 11 (m	ust equal Par	t VIII, column	(A), line	12)			1,882	2,112		1,7	6,205
	13	Grants a	and simil	ar amoun	ts paid (Par	t IX, columr	n (A), lines 1-	-3)				_	0			0
	14		-		•		(A), line 4) .						0			0
2	15						(Part IX, coli					1,030				
200	16a), line 11e) .					Contract of the second	0			0
Expenses	b b				s (Part IX, c				<u>9</u>		100				_	
	17						11d, 11f-24f)						4,612		_	35,546
	18						rt iX, column				<u> </u>		4,814			1,838
	19	Revenue	e iess ex	(penses. 3	Subtract line	e 18 irom iin	<u>le 12</u>		· · · ·		Posin	ning of Current	7,298	End	of Year	<u>14,367</u>
ets or	20	Total as	sats (Da	rt X line '	16)						Begin		9,933	Elic		0,190
Ass	21						 				_		2,594			3,804
Net Asse Fund Balz	22	Net asse	ets or fu	nd balanc	es Subtrac	t line 21 fror	m line 20 <u>. </u>			•		5,397				6,386
	ırt II		nature							· · · · · ·	•		,,,,,,,			-,
		Unde	or penalties	of perjury, I			this return, inclu									
		and t	belief, it is 1	rue, correct,	and complete.	Declaration of	preparer (other t	han office	er) is base	d on all	informati	on of which prep	arer has	any knowle	ge.	
		M	10	111	\sim \cap	AC Vak	LON		,			1/h	.14 /	$\rightarrow 4$	\cdot	21
Sig	jπ		\mathcal{M}	$\mathcal{U}\mathcal{A}$	$\mathcal{A}^{\perp \prime}$	18801				-			<u>////</u>	01	1	
He	re		Signature	idi J	-//	ام ملين ا		ر م مید	2024	له کا	\ i. c.a	ctor				
		· I ♪ ·		rint name and	LY VV	וכטנאו	<u> </u>	1221	rea	<u>u_1</u>	<u> </u>	COVI				
		Prepa	arer's	A n	<u> </u>	~^^		Date		Τc	heck if	-	Prepar	er's identifyir	ng numbe	er
Pai	d	signa		للملا	Whom!	CHA		1		se	elf-	.□		tructions)		
Pre	parer'	S Eigen	s name (or	1 T				6/2	4/2010	er	nployed	┌ <u>-┡</u> └	L			
Use	e Only		s name (or f-employed		RICK OSB							EIN ▶				
			ess, and Zi		7070 SOU	TH 2300 EA	ST, #210, S/	ALT LA	KE CIT	<u> </u>	<u>84121</u>	Phone no. ▶	(801)	943-4442		
Ма	y the IF	RS discus	ss this re	turn with	the prepare	r shown abo	ove? (see ins	truction	s)					. X	Yes [☐ No

Southern Utah Wilderness Alliance

Pa	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	The mission of the organization is the preservation of the outstanding wilderness at the heart of the Colorado Plateau, and
	the management of these lands in their natural state for the benefit of all Americans.
2	Did the organization undertake any significant program services during the year which were not listed on
2	
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 192,376 including grants of \$ 0) (Revenue \$ 0)
	ENERGY DEVELOPMENT: Researched patterns of public land oil and gas leasing, the legal framework for the issue, the effects
	of energy development on biological and archeological values and the potential gains in supply from developing critical areas.
	Tracked leasing of public lands and determined where sensitive values may be compromised by this leasing.
	Tracked leasing of public laints and determined where sensitive values may be compromised by this leasing.
	Provided this information to public through electronic and paper mediums.

4b	(Code:) (Expenses \$ 137,506 including grants of \$ 0) (Revenue \$ 0)
	RESOURCE MANAGEMENT PLANS (RMP): Arrange public attendance at agency meetings and hearings, analyzed and
	commented on Federal documents, conducted meetings with State and Federal agency staff, consulted with scientists on
	better management of federal resources, examined laws and policies that control these resources and provided
4c	(Code:) (Expenses \$ 897,411 including grants of \$ 0) (Revenue \$ 0)
	WILDERNESS: Arrange public attendance at agency meetings and hearings, distributed prepared bulletins and researched
	wilderness topics. Examined laws and policies that control these resources and provided information gained to the public.
4-1	Other received (Deposits in Cohodula O.)
4d	Other program services. (Describe in Schedule O.)
	/Companie 6 000 (maleuding growth of 6 0 \/ /Daysage 6
4e	(Expenses \$ 238,688 including grants of \$ 0) (Revenue \$ 0) Total program service expenses ► 1,465,981

	990 (2009) Southern Utah Wilderness Alliance 94-293	36961	<u>F</u>	age 3
Par	t IV Checklist of Required Schedules		Т.,	т
	1. the same of the described in the EOA(A)(O) and AOA7(A)(A) (allow these provides foundation (B)(O) and		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1.	ĺ	ĺ
•	complete Schedule A	1 2	X X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	-	+^-	┢
3		3	1	l 🗸
4	candidates for public office? If "Yes," complete Schedule C, Part I	13	+	Х
4	Part II	4	X	
_	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice	-	 ^- -	
5	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		N/A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	٦	┪┈┈╴	INA
0	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	10	+	 ^
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	·	+-	+	+^
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		_v
_	Complete Schedule D, Part III	<u>°</u> -	+	Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	1	1	1
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
40	complete Schedule D, Part IV	9	 	Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	40		
44	quasi-endowments? If "Yes," complete Schedule D, Part V	10	 × -	-
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	مد ا		
_	VII, VIII, IX, or X as applicable	11	X	1 98 965
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
_	Schedule D, Part VI.			
•	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.			
•	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.	·		
•	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.			
	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			
40	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	1		
12		40	i di seriali	
404	Schedule D, Parts XI, XII, and XIII.	12		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No. 1975 Annual Control of the Contr	<u> </u>		
40	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	42		100 Kg
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 -	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	+	X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	المما	ł	
45	business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b	+	X
15		ء ا		
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	. 15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	140	Ì	J
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	+	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	1 4-		
4.0	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	+	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	100		
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18	┼	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.5		
~~	If "Yes," complete Schedule G, Part III		+	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	1	X

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		}	l
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			1
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>_x</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		<u>_x</u>
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		ł	ł
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u>_x</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) 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		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	ł	l	
	prior 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		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or]	
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			ļ
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27	000000000000000000000000000000000000000	_X
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>_x</u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c	_	<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	<u> </u>	<u> x</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		İ	١.,
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	0.4		,
	Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	20		,
22	If "Yes," complete Schedule N, Part II	32		<u> X</u>
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33	┢	<u> </u>
34	Ill, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34	<u> </u>	 ^-
33	Schedule R, Part V, line 2	35	1	x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35	\vdash	 ^-
20	organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		 ^-
JI	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	l	Lx
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	—	 	 ^
30	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	13: Note. All 1 offil 330 filets are required to complete ochedule of			(2009)
		0111		(-vv)

Form 9	90 (2009) Southern Utah Wilderness Alliance	94-2936961	Page	e 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	_		
			Yes N	ło
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1000	1,000	
	U.S. Information Returns. Enter -0- if not applicable	18		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	10 m	0,550	
	gaming (gambling) winnings to prize winners?	. 1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	19.15		
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a	21		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)	19		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	5.46	40.00	
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b	N	/A
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	ļj	<u> </u>	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Χ
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_	l I	
_	Prohibited Tax Shelter Transaction?	<u>5c</u>	IN	/A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		ΙΙ,	
	organization solicit any contributions that were not tax deductible?	6a		<u>X</u>
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or		,	
-	gifts were not tax deductible?	6b	N	/A
7	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			
а	and services provided to the payor?	. 7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		$\frac{\hat{x}}{\hat{x}}$	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10	^	
·	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
•	benefit contract?	7e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	—	_	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	X	
ĥ	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	x	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		100	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	. 8		Χ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Χ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Χ
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:		100	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Part VI Go

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management		 		. ,		
		I	ı	w)mten	Ye	No	
1a	Enter the number of voting members of the governing body	1a		11			
b	Enter the number of voting members that are independent	1b		11		al sage	
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela	ations	nip with	1000			
	any other officer, director, trustee, or key employee?			2		<u> </u>	
3	Did the organization delegate control over management duties customarily performed by or un	nder tl	ne direct			1	
	supervision of officers, directors or trustees, or key employees to a management company or	other	person?	. 3		<u> </u>	
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa	s filed?	. 4		X	
5	Did the organization become aware during the year of a material diversion of the organization	's ass	ets?	. 5		X	
6	Does the organization have members or stockholders?			6		X	
7a	Does the organization have members, stockholders, or other persons who may elect one or m					1	
	of the governing body?			. 7a	.	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other	ner be	rsons?	. 7b		X	
8	Did the organization contemporaneously document the meetings held or written actions under						
•	the year by the following:		aag				
а	The governing body?			. 8a	X		
b	Each committee with authority to act on behalf of the governing body?	• •		<u> </u>			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot			00	' ^		
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O						
<u> </u>	ion B. Policies (This Section B requests information about policies not required by the			. j 9a		<u> </u>	
		e me	irnai				
Reve	enue Code.)				1	T	
40-	Dona the annual action have local shouters because of a self-trace			40	Ye	+	
10a	Does the organization have local chapters, branches, or affiliates?			. 10:	4	<u> </u>	
b	If "Yes," does the organization have written policies and procedures governing the activities o		cnapters,			1	
	affiliates, and branches to ensure their operations are consistent with those of the organizatio			· 10	-	N/A	
11	Has the organization provided a copy of this Form 990 to all members of its governing body b		_				
	form?			. 11	X		
11A					-		
12a	, , ,			. 12	a X	┥—	
b	Are officers, directors or trustees, and key employees required to disclose annually interests t	hat co	uld give				
	rise to conflicts?			. 12	<u> </u>	╀—	
C	Does the organization regularly and consistently monitor and enforce compliance with the pol	-			į		
	describe in Schedule O how this is done				_		
13	Does the organization have a written whistleblower policy?					4	
14	Does the organization have a written document retention and destruction policy?			. 14	. X		
15	Did the process for determining compensation of the following persons include a review and a						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	ation a	and decision	?			
а	The organization's CEO, Executive Director, or top management official			. 15:	a X		
b	Other officers or key employees of the organization			. 15	b X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a	rrange	ement				
	with a taxable entity during the year?			. 16	3	X	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization	to eva	aluate				
	its participation in joint venture arrangements under applicable federal tax law, and taken step	s to s	afeguard			l Militar	
	the organization's exempt status with respect to such arrangements?			16	5	N/A	
Sect	ion C. Disclosure				•		
17	List the states with which a copy of this Form 990 is required to be filed ► See Attached S	tatem	ent				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.		1 1.715	,			
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents of the second seco	nents	conflict of in	terest			
• •	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the b	ooks s	and records o	of the			
	Others		801-486				
	organization: SUVA 425 East 100 South, Salt Lake City, UT 84111		001-400	3/1/1			
	TEO EGSE 100 OUGH, OAR EARS ORY, OT 04111						

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. Use Schedule J-2 if additional space is needed.
- 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. 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 the organization did not compe	nsate any curre	nt off	icer	, dir	ect	or, or	tru	stee.		
(A)	(B)			(C	;)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee o or director			a Key employee	Highest compensated employee	y Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
DARRELL KNUFFKE CHAIR	5.	Х						0	0	0
RICH INGEBRETSEN VICE CHAIR/SECRETARY	5.	х						0	<u> </u>	. 0
RUSTY SCHMIDT TREASURER	5.	х				_		0	0	0
SCOTT GROENE EXECUTIVE OFFICER	40.	X	Ц					78,000	0	8,617
GUY SAPERSTEIN TRUSTEE		x_		Ц				0	0	0
HANSJORG WYSS TRUSTEE	2.	Х						0	0	0
TERRY TEMPEST WILLIAMS TRUSTEE	2.	Х						0	0	0_
CINDY SHOGAN TRUSTEE		Х						0	0	0
JIM BACA TRUSTEE	2.	X						0	_ 0	0
JOHANNA WALD TRUSTEE	2.	X						0	0	0
BILL HEDDEN TRUSTEE	2.	Х						0	0	0
			 -							
										-
										_
	, , , , , , , , , , , , , , , , , , ,									

	(A)	(B)			•	C)		(D)		(E)	(F)
	Name and title	Average hours per week	or director		(cnec Officer	Key employee	a Highest compensated a employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
								į			}
		· -									
										_	
											<u> </u>
							L				
											·
1b	Total	<u></u> <u></u>			<u> </u>		<u> </u>	•	78,000		0 8,617
2	Total number of individuals (including but no reportable compensation from the organization)		e list	ed a	bove 0	e) wł	no red	ceive	ed more than \$1	00,000 in	
3	Did the organization list any former officer, employee on line 1a? <i>If</i> "Yes," complete Sci										Yes No
4	For any individual listed on line 1a, is the su the organization and related organizations gindividual.	reater than \$15									4 X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y										5 X
Şec	tion B. Independent Contractors										
1	Complete this table for your five highest concompensation from the organization.	npensated inde	pend	ent c	ontr	acto	rs tha	at red	ceived more tha	n \$100,000 of	****
	(A) Name and business a	address							(B) Description of ser	vices ((C) Compensation
	None					-		$oxedsymbol{\Box}$			0
								├-			
								\vdash			0
	· · · · · · · · · · · · · · · · · · ·							T			
2	Total number of independent contractors (in more than \$100,000 in compensation from the contractors)			ed to	thos	e lis	ted a		e) who received		tijas (pašjas ja Rejaulinjas laiksta

All other revenue

Total revenue. See instructions.

e Total. Add lines 11a-11d.

0

11,219

1,746,205

94-2936961

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and						
	organizations in the U.S. See Part IV, line 21	0		and the second second			
2	Grants and other assistance to individuals in		·		/心事/唯作法法法		
	the U.S. See Part IV, line 22	0		"福通知即是后 "			
3	Grants and other assistance to governments,						
	organizations, and individuals outside the	İ		and the same of	4.040.65		
	U.S. See Part IV, lines 15 and 16	0		e and the second	A Lance		
4	Benefits paid to or for members	0					
5	Compensation of current officers, directors,	}	i	}			
	trustees, and key employees	78,000	71,627	5,655	718		
6	Compensation not included above, to disqualified						
	persons (as defined under section 4958(f)(1)) and	j					
	persons described in section 4958(c)(3)(B)	0					
7	Other salaries and wages	708,764	<u>650,858</u>	<u>5</u> 1,385	6,521		
8	Pension plan contributions (include section 401(k)						
	and section 403(b) employer contributions)	27,284	25,055	1,978			
9	Other employee benefits	90,188		6,539	829		
10	Payroll taxes	62,056	56,986	4,499	571		
11	Fees for services (non-employees):]		ļ			
а	Management	0					
b	Legal	54,828	54,478	311			
C	Accounting	28,300		<u>2</u> 8,300			
d	Lobbying	0[AA 7 TOO SOOTA AAAA AA	04004C 00000000000000000000000000000000			
е	Professional fundraising services. See Part IV, line 17.	0					
f	Investment management fees	<u></u>			<u>_</u>		
g	Other	13,125	12,052	952	121		
12	Advertising and promotion	15,513	15,513				
13	Office expenses	49,481	41,518	7,593	370		
14	Information technology	6,767	6,214	491	62		
15	Royalties	0					
16	Occupancy	51,463	47,259	3,731			
17	Travel	51,884	49,711		2,173		
18	Payments of travel or entertainment expenses	ĺ					
	for any federal, state, or local public officials	0					
19	Conferences, conventions, and meetings	17,074	15,867	1,071	136		
20	Interest	0		<u> </u>	_		
21	Payments to affiliates	0					
22	Depreciation, depletion, and amortization	64,075	58,841	4,645	589		
23	Insurance	16,506j	<u>15,157</u>	1,197			
24	Other expenses. Itemize expenses not	290 6 7 50056		引用中国国际的	The constant		
	covered above. (Expenses grouped together						
	and labeled miscellaneous may not exceed						
_	5% of total expenses shown on line 25 below.)	46.004		40.004			
a	Bank charges	16,621	70.000	16,621	_ 		
b	Grassroots organizing	72,832	72,832		70.050		
٠ د	Member services	228,594	144,667	5,575	78,352		
d	Repairs and maintenance	13,535	12,430	982	123		
e	Telephone All other expenses Utilities	27,273 7,675	25,048 7,048	1,974 556	<u>251</u> 71		
f or							
25	Total functional expenses. Add lines 1 through 24f	1,701,838	1,465,981	144,055	91,802		
26	Joint costs. Check here ▶ if following	Ì					
	SOP 98-2. Complete this line only if the organization						
	reported in column (B) joint costs from a combined			i i			
	educational campaign and fundraising						
	solicitation			L			
					Form 990 (2009)		

Pa	art X	Balance Sheet				
				(A) Beginning of year		(B) End of year
1	1	Cash—non-interest-bearing		4,969	_1_	3,975
	2	Savings and temporary cash investments	3,894,339	2	1,724,749	
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		<u> </u>	4	8,828
	5	Receivables from current and former officers, directors, t				
		employees, and highest compensated employees. Comp Schedule L			5	
	6	Receivables from other disqualified persons (as defined	na na na na na na na na na na na na na n	7 1	EARTH AND A	
	i	4958(f)(1)) and persons described in section 4958(c)(3)(Part II of Schedule L	0	6		
ets.	7	Notes and loans receivable, net		0	7	0
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or 10a	<u>1,422,585</u>	term englishme, weith	Luk i	A Bright Chicken
		other basis. Complete Part VI of Schedule D				and all the second
	b	Less: accumulated depreciation	331,714	1,152,947	10c	1,090,871
	11	Investments—publicly traded securities		357,678	_	2,661,767
	12	Investments—other securities. See Part IV, line 11		0		0
	13	Investments—program-related. See Part IV, line 11.		0		0
	14	Intangible assets		0		0
	15	Other assets. See Part IV, line 11				0
	16_	Total assets. Add lines 1 through 15 (must equal line 34		5,409,933	_	5,490,190
	17	Accounts payable and accrued expenses		12,594		13,804
	18	Grants payable		<u></u>	18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		0		<u></u>
jes	21	Escrow or custodial account liability. Complete Part IV of			21	
Liabilities	22	Payables to current and former officers, directors, truster	-		100	PVS980007E Section
ī		employees, highest compensated employees, and disqu				ADMAND AND ASSESSMENT
_		persons. Complete Part II of Schedule L				
	23	Secured mortgages and notes payable to unrelated third		0	23	0
	24	Unsecured notes and loans payable to unrelated third pa		0		0
	25 26	Other liabilities. Complete Part X of Schedule D Total liabilities. Add lines 17 through 25		12,594		13,804
	20			12,594	20	13,004
ø		Organizations that follow SFAS 117, check here ►	X and	经营销费 医电子管 医电子		nicarrictions; the constant
ces	'	complete lines 27 through 29, and lines 33 and 34.				
<u> </u>	27	Unrestricted net assets		5,039,661		5,118,708
ã	28	Temporarily restricted net assets		-	28	
밀	29	Permanently restricted net assets	<u></u>	357,678	29	357,678
Net Assets or Fund Balan		Organizations that do not follow SFAS 117, check he and complete lines 30 through 34.	re ▶		u je	
ets	30	Capital stock or trust principal, or current funds	. ,		30	
Š	31	Paid-in or capital surplus, or land, building, or equipment			31	<u> </u>
Ť.	32	Retained earnings, endowment, accumulated income, or			32	
ž	33	Total net assets or fund balances		5,397,339		5,476,386
	34	Total liabilities and net assets/fund balances		5,409,933		5,490,190
				<u> </u>		Form 990 (2009)

Form **990** (2009)

Page	1	2

Form 990 (2009)	Southern Utah W	filderness Alliance

94-2936961 Part XI **Financial Statements and Reporting** Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?. 2a Were the organization's financial statements audited by an independent accountant? 2b If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. N/A

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Inspection

Name	of the	organization							Employe	r identificat	ion number	
	_	Utah Wildern							<u>l</u>		936961	
Par	_			narity Status (All organical						nstruction	ns	
	rgar		•	ation because it is: (Fo		_				`		
1	H			ches, or association o			ed in Sec	uon my	יואאויו אנט)).		
2	片			on 170(b)(1)(A)(ii). (At				470/6\/4\	(A.\/!!!\			
3	님	•	•	ospital service organiz						/L3/43/43	(III)	
4			search organiza me, city, and sta	tion operated in conju ate:	nction wit	ın a nospı	aı descrit	eain se		(D)(1)(A):	(III). Enter the	
5	Ш	_	•	the benefit of a colleg (Complete Part II.)	je or univ	ersity owr	ed or ope	erated by	a governr	nental un	it described	
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	X	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	П			in section 170(b)(1)(-	omplete i	Part II.)					
9	Ħ	-		y receives: (1) more th	-			om contri	butions, m	nembersh	ip fees, and gr	oss
	_	receipts from	n activities relate	d to its exempt function	ons—subj	ect to cert	ain excep	otions, an	d (2) no rr	ore than	33 1/3 % of its	
				nt income and unrelat after June 30, 1975.						ax) from b	ousinesses	
10		An organizat	tion organized a	nd operated exclusive	ly to test t	for public	safety. Se	e sectio	n 509(a)(4).		
11		An organizat	tion organized a	nd operated exclusive	ly for the	benefit of	to perfor	m the fun	ctions of,	or to carr	y out the	
			•	olicly supported organi							•	חכ
			_	at describes the type o		_					·	
	$\overline{}$	a Type		Type II c		• III—Fund	-	_		_	ype III-Other	
ę	Ш	-		y that the organization			_	-	-			_
			section 509(a)(2	on managers and othe	i ulan one	e or more	publicly s	upported	organizai	10112 0620	anded in Section	11
f				- <i></i> a written determinatior	from the	IRS that	it is a Tvo	el Type	II or Type	e III suppi	ortina	
-		-	, check this box									
g		_		the organization accep	pted any g	gift or con	tribution f	rom any o	of the			
		following per		ar indirectly applied	-:46		41		ام محاند محد	i_ (!!)	V	
				or indirectly controls, or verning body of the support							Yes 11g(i)	No
				person described in (i)							11g(ii)	
			-	y of a person describe							11g(iii)	
<u>h</u>		Provide the	following informa	ation about the suppor					T 6.0			
(1)		of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ou notify nization in		ls the tion in col.	(vii) Amount support	OT
	orga	anization		above or IRC section (see instructions))	governing	document?		of your port?		ized in the S.?	ļ	
				(ace manachona)	Yes	No	Yes	No	Yes	No No	1	
		<u></u> .			<u> </u>	<u> </u>	Ĺ <u> </u>		<u> </u>	{		0
			<u> </u>			<u> </u>			_			0
												0
					_							0
												0
			自用等事理点							4.00	<u> </u>	

Schedule A (Form 990 or 990-EZ) 2009 Southern Utah Wilderness Alliance 94-2936961 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (d) 2008 Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2.005.401 2.229.880 1.593.196 1.687.763 1.530.683 9.046.923 Tax revenues levied for the organization's 2 benefit and either paid to or expended on 0 O 0 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 2.005.401 2.229.880 1.593.196 1.687.763 1.530.683 9,046,923 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . 1,112,013 Public support. Subtract line 5 from line 4 7,934,910 Section B. Total Support (c) 2007 (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (d) 2008 (e) 2009 Amounts from line 4 7 2,005,401 2,229,880 1,593,196 1,687,763 1,530,683 9,046,923 8 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar 132,861 171,276 187.019 108.355 49.306 648,817 9 Net income from unrelated business activities, whether or not the business is 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 . . 9,695,740 11 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)). 14 81.84% 15 15 76.00% 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

b 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . >

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . .

Page 3

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Soci	(Complete only if you checked to tion A. Public Support	ne box on line	9 01 Part I.)				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
		(a) 2000	(6) 2000	(6) 2007	(4) 2000	(6) 2003	(i) i otal
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ا					
	include any "unusual grants.")	0	0				0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the						
	organization's tax-exempt purpose	0	0				0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	_ :					_
_	its behalf	0	0		٠		0
5	The value of services or facilities						
	furnished by a governmental unit to the	0	0				0
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	U	U	U		0	<u> </u>
/ a	received from disqualified persons						o
	received from disqualified persons		·				
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from				a sugala garer	erents and	_
	line 6.)		2010/01/19				0
	tion B. Total Support	(-) 000F	(L) 0000	(-) 0007	(-1) 2000	(*) 2000	(D. Tatal
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar	•					_
_	sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						_
_	acquired after June 30, 1975	0	0	0	0	0	0
С 11	Net income from unrelated business	, o	U	U		U	
* "	activities not included in line 10b,		i.				
	whether or not the business is regularly						
	carried on					ĺ	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0	0				0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	0		+	_	_	
14	First five years. If the Form 990 is for the org	ganization's firs	t, second, third	l, fourth, or fifth	ı tax year as a	section 501(c)((3)
	organization, check this box and stop here .						▶ <u> </u>
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2009 (line 8, co	olumn (f) divide	d by line 13, co	olumn (f))		15	0.00%
<u>16</u>	Public support percentage from 2008 Schedu			<u> </u>		16	0.00%
Sec	tion D. Computation of Investment Inco					· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 2009 (line					17	0.00%
18	Investment income percentage from 2008 Sc					18	0.00%
19a							
	not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ 🔝						
þ	33 1/3% support tests-2008. If the organization d						_
	line 18 is not more than 33 1/3%, check this box ar	nd stop here . Th	e organization q	ualifies as a pub	licly supported o	rganization	▶ <u>∐</u>
20	Private foundation. If the organization did no	nt chack a hov	on line 14 10s	or 10h chack	this hav and a	ead instructions	

Schedule A (Form	990 or 990-EZ) 2009	Southern Utah Wilderness Alliance	94-2936961	Page 4
Part IV	Supplemental	Information. Complete this part to provide the explanations required	by Part II, line 1	0;
	Part II line 17a	or 17b; and Part III, line 12. Provide any other additional information.	See instructions	
	Taren, into Tra	or 11 b, and 1 are in, line 12. I lovide any other additional information.	000 111001 00010110	"
			·	
		•••••		
~				

			• • • • • • • • • • • • • • • • • • • •	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• :	section 501(c)(4), (5), or (6) or	ganizations: Complete Part III.			
N	lame of organization			Employe	r identification number
	them Utah Wilderness Allia			\	94-2936961
		he organization is exempt und			organization.
1		the organization's direct and indirect			
2	•				
J	volunteer nours			• • • • • • •	
Pa		he organization is exempt und			
1		excise tax incurred by the organizati			
2	Enter the amount of any	excise tax incurred by organization r	nanagers under s	section 4955 > \$	
3	If the organization incurre	ed a section 4955 tax, did it file Form	4720 for this yea	ır?	🔲 Yes 🔲 No
4a	Was a correction made?				. Yes No
b					
Pa		he organization is exempt und			(c)(3).
1		expended by the filing organization	for section 527 e	xempt function	
	activities			 	
2		filing organization's funds contributed unction activities	•		
3	Total exempt function ex	penditures. Add lines 1 and 2. Enter	here and on Forn	n 1120-POL,	
		·			(
4	Did the filing organization	n file Form 1120-POL for this year?			🔲 Yes 🔲 No
5		ses and employer identification num			
		or each organization listed, enter the			
		butions received that were promptly and or a political action committee (P			
	a separate segregated it	I	AC). II additional	1	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	promptly and directly
					delivered to a separate political organization. If
					none, enter -0-
				0	
				0	(
				_	
				0	
		}		0	,
		 			
		 		٥ .	(
				1	`

0

Р	art II-A Complete if the organiza under section 501(h)).	tion is exempt under section 501(c)(3) and f	filed Form 5768 (el	ection
Α	Check ▶ ☐ if the filing organization	belongs to an affiliated group.		
В	Check ▶ ☐ if the filing organization	checked box A and "limited control" provisions	s apply.	
		bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	12,967	0
b	· ·	a legislative body (direct lobbying)	16,677	0
C		a and 1b)	29,644	0
đ			1,672,194	0
е		d lines 1c and 1d)	1,701,838	0
f	Lobbying nontaxable amount. Enter the	amount from the following table in both		
	columns.	•	235,092	0
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		and the second
	Not over \$500,000	20% of the amount on line 1e.	o o consultantina	as Arcono
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	the County State of the	NAME OF THE OWNERS OF THE OWNER, THE OWNER, THE OWNER, THE OWNER, THE OWNER, THE OWNER, THE OWNER, THE OWNER,
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		Principles of the
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	A Company of the Comp	
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 2	5% of line 1f)	58,773	0
h	Subtract line 1g from line 1a. If zero or I	ess, enter -0	0	0
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0	0	0
j		either line 1h or line 1i, did the organization file For		Yes No
	(Some organizations that r	Year Averaging Period Under Section 501(h) nade a section 501(h) election do not have to co v. See the instructions for lines 2a through 2f on		•
_	Lobbyi	ng Expenditures During 4-Year Averaging Perio	d	

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2a	Lobbying nontaxable amount	253,730	247,178	243,241	235,092	979,24				
b	Lobbying ceiling amount (150% of line 2a, column(e))	e it grand die de teel een Gebeure van die de teel een die de teel die de teel de teel de teel de teel de teel Gebeure die de teel de teel de teel de teel de teel de teel de teel de teel de teel de teel de teel de teel d				1,468,86				
С	Total lobbying expenditures	129,274	31,480	49,567	29,644	239,96				
d	Grassroots nontaxable amount	63,433	61,795	60,810	58,773	244,81				
е	Grassroots ceiling amount (150% of line 2d, column (e))	 Embergage 772.19 All the property of	o and ordered a Software blooms of		ili oʻyasebo yayboql edi Karlang sen aray eladi	367,21				
f	Grassroots lobbying expenditures	62,689	17,401	26,304	12,967	119,36				

Schedule C (Form 990 or 990-EZ) 2009

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	OT file	ed Fo	rm 57€	18	
		(2	a)		(b)	
		Yes	No	Aı	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a b c	Volunteers?			121		
d e f	Mailings to members, legislators, or the public?					
g h i	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV					
j 2a b	Total. Add lines 1c through 1i					0
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 50	11(c)(5) or	sactio	n	
rai	501(c)(6).	, , (C)(), UI	SECTIO	11	
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?	1(c)(5), or	2 3 sectio		No
1 2 a	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year		1 2a			
c b	Carryover from last year		2b 2c			0
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due: If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		3			•
5	Taxable amount of lobbying and political expenditures (see instructions)		5			0
Part	IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5 complete this part for any additional information.			-B, line	1i.	
			••••			
	······································					

5	South	ern Utah Wilderness Alliance				94-29369	
		rm 990 or 990-EZ) 2009	<i>((((((((((</i>		•		Page 4
Part I	V	Supplemental Information	(continuea)		· · · · ·		
		·					
					•••		

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions. OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Sout	nern Utah Wilderness Alliance			94-2936961
Par				ds or Accounts. Complete if
	the organization answered "Yes"	to Form 990, Part IV, line 6	•	-
		(a) Donor advised fund		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year		*	
5	Did the organization inform all donors and o	lonor advisors in writing that th	ne assets held in	donor advised
•	funds are the organization's property, subje	_		
6	Did the organization inform all grantees, do	_	•	
•	used only for charitable purposes and not for			
	purpose conferring impermissible private be			
Dos				
Par				Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (chec <u>k al</u> l	that apply).	
	Preservation of land for public use (e.g	., recreation or pleasure)	Preservation of	an historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	声	L	1 10001 100011 01	a soransa matorio di dotaro
_	Preservation of open space	and a final state of the state		
2	Complete lines 2a through 2d if the organiz	ation neid a qualified conserva	ition contribution	in the form of a conservation
	easement on the last day of the tax year.			
				Held at the End of the Tax Year
а	Total number of conservation easements .			
b	Total acreage restricted by conservation ea			The state of the s
C	Number of conservation easements on a co			
d	Number of conservation easements include	ed in (c) acquired after 8/17/06		2d ·
3	Number of conservation easements modified	ed, transferred, released, extin	guished, or termi	inated by the organization
	during the tax year			
4	Number of states where property subject to	conservation easement is loc	ated ▶	
5	Does the organization have a written policy	regarding the periodic monito	ring, inspection,	handling of
	violations, and enforcement of the conserva-	ation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing	conservation e	asements during the year
	•			
7	Amount of expenses incurred in monitoring	, inspecting, and enforcing cor	servation easen	nents during the year
	▶ \$,
8	Does each conservation easement reported	d on line 2(d) above satisfy the	requirements of	section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	, ,	•	
9	In Part XIV, describe how the organization			
	balance sheet, and include, if applicable, th	-		•
	the organization's accounting for conservat		,	
Par	III Organizations Maintaining Collecti	ions of Art. Historical Treasu	res, or Other S	imilar Assets.
	Complete if the organization answers			
1a	If the organization elected, as permitted une			ement and balance sheet works of
	art, historical treasures, or other similar ass	•		
	service, provide, in Part XIV, the text of the			
b	If the organization elected, as permitted uni-			
	historical treasures, or other similar assets			
	service, provide the following amounts relate			
	(i) Revenues included in Form 990, Part VI	-	_	> \$
	(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held works o	f art historical treasures or of	her similar assot	s for financial gain, provide the
-	following amounts required to be reported to			o loi midriolal galli, provide trie
				. c
a	Revenues included in Form 990, Part VIII, I			
b	Assets included in Form 990, Part X			🕨 💲

Part	Organizations Maintainin	g Collections of	Art, His	torical T	reasures,	or Oth	er Similar As	sets (co	ontinu	ied)
3	Using the organization's acquisition		her reco	rds, check	k any of the	followin	g that are a siç	gnificant		
	use of its collection items (check all	that apply):	. —	ı .						
а	Public exhibition			i	or exchange	progran	ms			
b	Scholarly research		е	Other						
C	Preservation for future generation	ations								
4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.									
5	During the year, did the organizatio assets to be sold to raise funds rath							Ye	s 🗌	No
Part	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, trustee					s or oth	er assets not			
b	included on Form 990, Part X? If "Yes," explain the arrangement in							Y€	s 🗌	No
_		T ditty (i v ditta botti)	5,010 11,0				T /	Amount		
C	Beginning balance					. 1c				
d	Additions during the year									
е	Distributions during the year					-	.,	•		
f	Ending balance									
2a	Did the organization include an amo							T Ye	s X	No
b	If "Yes," explain the arrangement in		. u					ш.,	<u>بن</u> •	
Part			ization a	answered	d "Yes" to F	Form 99	90. Part IV. li	ne 10.		
		(a) Current year		or year	(c) Two years		(d) Three years bac		ur years	back
1a	Beginning of year balance	662,038		982,444	nation, all	4		100	111	-010
b	Contributions						aring the Abril an			
C	Net investment earnings, gains,									
	and losses	178,099		-320,168	Al Zues Co					
d	Grants or scholarships				a landa santa	o i Liek	11,000,000,000		(* (* .	
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses			238	1140 # 1	ar e da di	es de la company de la company de la company de la company de la company de la company de la company de la comp	45 (1) (1)	i ja j	
9	End of year balance	840,137		662,038		14 (1)				
2	Provide the estimated percentage of	of the year end bala	ince held	as:						
а	Board designated or quasi-endown	nent 🕨	57%							
b	Permanent endowment	43%								
C	Term endowment ▶	<u>%</u>								
3a	Are there endowment funds not in t	he possession of the	ne organi	ization tha	at are held a	ınd adm	inistered for th	e .		
	organization by:								Yes	No
	(I) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		<u> </u>
b	If "Yes" to 3a(ii), are the related org							3b		
4	Describe in Part XIV the intended u					-1 V C-	- 40			
Part										
	Description of investment	(a) Cost or oth (investm			st or other (other)	dep	ocumulated preciation	(d) Bo	ok value	
1a	Land		0		416,000				410	6,000
b	Buildings		0		777,559		141,093		630	6,466
C	Leasehold improvements		0		0		0			0
d	Equipment		0	ļ	229,026		190,621		3	8 <u>,405</u>
<u>e</u>	Other		0	<u> </u>	0		0			0
Tota	. Add lines 1a through 1e. (Column	(d) must equal For	m 990, P	art X, colu	umn (B), line	9 10(c).)	. , , ▶		1,09	0,871

			•
72	п	e	-3

Part VII Investments—Other Securities	See Form 990, Part X	. line 12.	Page 3
(a) Description of security or category	(b) Book value	(c) Method of valu	uation:
(including name of security)		Cost or end-of-year m	arket value
Financial derivatives		0	
Closely-held equity interests		0	
Other		0	
		0	 _
		0	
		0 <u> </u>	
		0	
		0	
		0	
		0	
		0	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		O transport of the property of	
Part VIII Investments—Program Relate			
(a) Description of investment type	(b) Book value	(c) Method of valu	uation:
(a) bescription of investment type	(b) book value	Cost or end-of-year m	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
	(0	
		0	
-		0	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		O Harris	
Part IX Other Assets. See Form 990, F			
	a) Description		(b) Book value
	<u></u>		0
	· 		0
	<u> </u>		0
		 .	0
	***		0
			0
			0
			0
			0
Total. (Column (b) must equal Form 990, Part X,	col. (B) line 15.)		Ö
Part X Other Liabilities. See Form 990			
1. (a) Description of liability	(b) Amount	esia de de Carrelo de para la doctaral d	artinary artists of the
Federal income taxes		O self-respondence and another self-respondence	unipresida (Salas cominas e
		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		<u>o</u>	reality and the second
		0 計劃的特別的計劃的過去的	Children (1965)
		<u> </u>	
		O salasi ili ili ili ili ili ili ili ili ili i	og a sport of
	<u> </u>	0 编刊的对话参选证明群	网络生物原物
	<u> </u>	<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<u> </u>	0	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

	ule D (Form 990) 2009			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financi	<u>al Sta</u>	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		1,746,205
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		1,701,838
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		44,367
4	Net unrealized gains (losses) on investments	4		34,680
5	Donated services and use of facilities	5	1	183,537
6	Investment expenses	6		
7	Prior period adjustments	7	1	
8	Other (Describe in Part XIV.)	8	1	
9	Total adjustments (net). Add lines 4 through 8	9	+	218,217
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		262,584
10 Par				202,004
1	Total revenue, gains, and other support per audited financial statements		1	1,965,651
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1,000,001
		,680		
a		,537		
þ		,537		
C	Recoveries of prior year grants			
d	`	229		
е	Add lines 2a through 2d		2e	219,446
3	Subtract line 2e from line 1	. [3	1,746,205
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		All the	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV.)		194	
Ç	Add lines 4a and 4b	. L	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,746,205
Par	Reconciliation of Expenses per Audited Financial Statements With Expen	ses p	er Return	
1	Total expenses and losses per audited financial statements	. L	1	1,886,604
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	,537		
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIV.)	,229	(6) H	
e	Add lines 2a through 2d		2e	184,766
3	Subtract line 2e from line 1		3	1,701,838
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			1,101,000
-			in a	
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	• • • • • • • • • • • • • • • • • • • •		A	0
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.)	• 1	5	1,701,838
Par	XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4; P	art IV, lines 1	b
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d an	d 4b.	Also complete	€
this p	part to provide any additional information.			
Part	V Line 4 - Funds will be used to fund program expenses deemed necessary by the			
gove	ning board.			
Part.	XII Line 2d - Property taxes			
ъ.	Will blood of December Association			
Part.	XIII Line 2d - Property taxes			
	••••••			

94-2936961 Southern Utah Wilderness Alliance Schedule D (Form 990) 2009 Page 5 Part XIV Supplemental Information (continued)

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

• Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Southern Utah Wilderness Alliance 94-2936961 Form 990 Part III Section 4 Line d - OFF ROAD VEHICLE (ORV): Researched the legal framework for the issue, determined public opinions, and performed on the ground surveys regarding ORV use. Educated public on the potential problems raised by ORV use and the possible solutions. Form 990 Part III Section 4 Line d - RS2477 (REVISED STATUE 2477): Researched the legal framework for the issue, determined public opinions, and performed on the ground surveys regarding RS2477 claims. Educated public on the potential problems raised by ORV use and the possible solutions. Form 990 Part VI Section B Line 11A - Draft copies of the 990 are emailed to the finance committee for review & approval. Form 990 Part VI Section B Line 12c - Annual questionaires are circulated to all applicable individuals addressing the noted policies. Form 990 Part VI Section B Line 15b - the issue is discussed and voted upon during the governing board's executive session. Form 990 Part VI Section C Line 19 - Copies of all applicable documents are maintained at the organization's main office.

Southern Utah Wilderness Alliance 94-2936961

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

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