Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

For calendar year 2021 or other tax year beginning 07/01 , 2021, and ending 06/30

	rtment of the Treasury al Revenue Service	▶ Do r	► Go to www.irs.gov/Form990T for instructions and the latest information. not enter SSN numbers on this form as it may be made public if your organization is a 501	(c)(3).	pen to Public Inspection for 501(c)(3) Organizations Only		
Α 🗌	Check box if		Name of organization (Check box if name changed and see instructions.)	D Employe	er identification number		
	address changed.	.	UNIVERSITY OF ILLINOIS FOUNDATION	3	37-6006007		
B Ex	empt under section	under section Number, street, and room or suite no. If a P.O. box, see instructions.		E Group e	xemption number		
~	501(C)(3)			(see inst	ructions)		
_	408(e) 220(e)	.,,,,	City or town, state or province, country, and ZIP or foreign postal code				
	408A 530(a)		URBANA, IL 61801	F Che	eck box if		
	529(a) 529A	C Bool	x value of all assets at end of year	an	amended return.		
G	Check organization	n type	▶ ☑ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust				
H (Check if filing only	y to ▶	☐ Claim credit from Form 8941 ☐ Claim a refund shown on Form 2	2439			
I	Check if a 501(c)(3) orgai	nization filing a consolidated return with a 501(c)(2) titleholding corporation .		▶ 🗌		
J E	Enter the number	of attac	ched Schedules A (Form 990-T)		▶ 4		
K	During the tax yea	ır, was t	he corporation a subsidiary in an affiliated group or a parent-subsidiary controlle		?► ☐ Yes 🗹 No		
li	f "Yes," enter the	name	and identifying number of the parent corporation ▶				
L T	The books are in	care of	► (SEE STATEMENT) Telephone number	> (217) 333-0810		
Pa	rt I Total U	nrelate	ed Business Taxable Income				
1	Total of unrela	ated bu	usiness taxable income computed from all unrelated trades or businesses (s	see			
	instructions)			. 1	6,394,311		
2	Reserved			. 2			
3	Add lines 1 an	id 2 .		. 3	6,394,311		
4	Charitable cor	ntributio	ons (see instructions for limitation rules)	. 4	29,767		
5	Total unrelated	d busin	ess taxable income before net operating losses. Subtract line 4 from line 3 .	. 5	6,364,544		
6	Deduction for	net ope	erating loss. See instructions	. 6	4,332,327		
7	Total of unrela	ated bu	isiness taxable income before specific deduction and section 199A deduction	on.			
	Subtract line 6	from li	ne 5	. 7	2,032,217		
8	Specific dedu	ction (g	enerally \$1,000, but see instructions for exceptions)	. 8	1,000		
9	Trusts. Section	n 199A	deduction. See instructions	. 9	0		
10	Total deducti	ons. Ad	dd lines 8 and 9	. 10	1,000		
11	Unrelated bu	siness	taxable income. Subtract line 10 from line 7. If line 10 is greater than line	· 7,			
	enter zero .			. 11	2,031,217		
Pai	rt II Tax Co	mputa	tion		•		
1	Organization	s taxab	le as corporations. Multiply Part I, line 11 by 21% (0.21)	▶ 1	426,556		
2	Trusts taxabl	e at tr	ust rates. See instructions for tax computation. Income tax on the amount	on			
	Part I, line 11	from:	☐ Tax rate schedule or ☐ Schedule D (Form 1041)	▶ 2			
3	Proxy tax. Se	e instru	ctions	▶ 3	0		
4	Other tax amo	unts. S	ee instructions	. 4	0		
5	Alternative mir	nimum	tax (trusts only)	. 5	0		
6	Tax on nonco	mpliar	at facility income. See instructions	. 6	0		
7	Total. Add line	es 3 thr	ough 6 to line 1 or 2, whichever applies	. 7	426,556		

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11291J

Form **990-T** (2021)

Form 990-T (2021)

Part I		Tax and Payments					-	
1a	Foreig	gn tax credit (corporations attach Form 1	118; trusts attach Form 1116)	1a	0			
b	Other	credits (see instructions)		1b	0			
С	Gene	ral business credit. Attach Form 3800 (se	ee instructions)	1c	0			
d	Credi	t for prior year minimum tax (attach Form	n 8801 or 8827)	1d				
е	Total	credits. Add lines 1a through 1d				1e		0
2		act line 1e from Part II, line 7				2	426	6,556
3	Other	amounts due. Check if from: Form 425	55 🗌 Form 8611 🗌 Form	n 8697 🔲 Fo	rm 8866			
			,			3		0
4		tax. Add lines 2 and 3 (see instructions)						
		on 1294. Enter tax amount here				4	426	6,556
		nt net 965 tax liability paid from Form 96				5		0
	-	ents: A 2020 overpayment credited to 20		6a	585,806			
		estimated tax payments. Check if section	·=·	6b	0			
С		eposited with Form 8868		6c	0			
d		gn organizations: Tax paid or withheld at		6d	0			
е				6e	0			
		t for small employer health insurance pre		6f	0			
		credits, adjustments, and payments:						
			0 Total ▶	6g	0	7	E01	5 006
		payments. Add lines 6a through 6g .			+	7	560	5,806
8 9		ated tax penalty (see instructions). Chec lue. If line 7 is smaller than the total of lir			+	9		0
		payment. If line 7 is larger than the total				10	150	9,250
11		the amount of line 10 you want: Credited to		159,250 F	+	11	100	0
Part I		Statements Regarding Certain Act				••		
		y time during the 2021 calendar year, did		· · · · · · · · · · · · · · · · · · ·		ner authority	, Yes	No
		a financial account (bank, securities, or o						
		N Form 114, Report of Foreign Bank an						
		► BE, BR, CA, CH, CJ, CO, DA, EZ, GR, HU,					V	
		g the tax year, did the organization receive a			ansferor to, a	foreign trust	?	~
	If "Ye	s," see instructions for other forms the o	rganization may have to file.			_		
3	Enter	the amount of tax-exempt interest receive	ved or accrued during the tax	year	▶ \$	205		
4	Enter	available pre-2018 NOL carryovers here	► \$ 4,332,327 . Do not i	nclude any po	ost-2017 NOL	_ carryover		
	show	n on Schedule A (Form 990-T). Don't re	duce the NOL carryover show	wn here by ar	ny deduction	reported or	ן ו	
		, line 6.						
5		2017 NOL carryovers. Enter available B						
	tne ar	mounts shown below by any NOL claime					-	
		Business Activity Co	ode	Available po	st-2017 NOL		-	
	90110			\$		29,095,857	-	
	52000)O		⊅ 		16,721		
				Φ •				
6a	Did th	ne organization change its method of acc	equipting? (see instructions)	φ 			-	~
		is "Yes," has the organization described			 or Form 11		,,	_
		in in Part V						
Part \	7	Supplemental Information						
		explanation required by Part IV, line 6b.	also, provide any other addition	nal informatio	n. See instruc	tions.		
		, , , , , , , , , , , , , , , , , , , ,	,,,,					
	1	penalties of perjury, I declare that I have examined					,	ge and
Sign	belief,	it is true, correct, and complete. Declaration of prepared in the correct of the complete of the correct of the	parer (other than taxpayer) is based on	all information of	which preparer h	as any knowled	dge.	
_		Christine Con	5/12/22			May the IRS di		
Here	🕨	Consume Clary	5/12/23 CFO			with the prepa		
	Sig	gnature of officer	Date Title			(see instruction	ı∍): Ľ Yes	□NO
Paid		Print/Type preparer's name Pro	eparer's signature	Date	Chec	k 🗌 if PT	IN	
Prepa	arer	JULIE SPARKS	July L Spark	05/11/2	2023 self-e	mployed	P012684	01
Use (Firm's name ► ERNST & YOUNG US LLP	U T		Firm's	EIN ► 34	1-656559	6
03E (וווע	Firm's address ▶ 221 EAST 4TH STREET SU	ITE 2900, CINCINNATI, OH 4520	2	Phone	no. (513) 612-140	00

Form **990-T** (2021)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Name of the organization

UNIVERSITY OF ILLINOIS FOUNDATION

B Employer identification number

37-6006007

C Unrelated business activity code (see instructions)

901101

D Sequence: 1 of 4

C Un	related business activity code (see instructions) ▶	9011	101	D Sequence:	1 	of 4
E De	scribe the unrelated trade or business INVESTMENT ACTIVITIE	ES .				
Pai	Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance ▶	1c	(
2	Cost of goods sold (Part III, line 8)	2)		
3 4a	Gross profit. Subtract line 2 from line 1c	3 4a	373,839			373,839
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4a 4b	105,28			105,284
С	Capital loss deduction for trusts	4c	•	0		0
5	Income (loss) from a partnership or an S corporation (attach statement)	5	(6,125,829			(6,125,829)
6	Rent income (Part IV)	6	·	0	0	0
7	Unrelated debt-financed income (Part V)	7		0	0	0
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8	(0	0
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9	(0	0
10	Exploited exempt activity income (Part VIII)	10	(0	0
11	Advertising income (Part IX)	11	()	0	0
12	Other income (see instructions; attach statement)	12	()		0
13	Total. Combine lines 3 through 12	13	(5,646,706)	0	(5,646,706)
Par	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on de	ductions. Dec	ductions	must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	0
3	Repairs and maintenance				3	0
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses		1 1		6	64,052
7	Depreciation (attach Form 4562). See instructions			0		
8	Less depreciation claimed in Part III and elsewhere on return .			0	100	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	0
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	610.007
14	Other deductions (attach statement)				14	610,997 675,049
15 16	Total deductions. Add lines 1 through 14	n. Sub	otract line 15 from	Part I, line 13,	15	· · · · · · · · · · · · · · · · · · ·
17	. ,				16	(6,321,755)
17 18	Deduction for net operating loss. See instructions				17 18	(6,321,755)
10	Onrelated pusitiess taxable income. Subtract line 17 from lin	פו שו			10	(0,321,733)

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 74036O

Schedule A (Form 990-T) 2021

Scheau	le A (Form 990-1) 2021				Page ∠
Part	Cost of Goods Sold Enter me	thod of inventory val	uation ►		
1	Inventory at beginning of year				0
2	Purchases				0
3	Cost of labor				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7 8	Inventory at end of year				0
9	Do the rules of section 263A (with respect to prope				
Pari					- 103 M
1	Description of property (property street address,				
	A	• •	,		
	B 🗌				
	C □				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10% but not more than 50%)				
	ŕ				
b	From real and personal property (if the percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property.				
·	Add lines 2a and 2b, columns A through D				
	- '				
3	Total rents received or accrued. Add line 2c column	ns A through D. Enter	here and on Part I, li	ne 6, column (A) ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D Enter here and o	n Part I line 6 colu	mn (R)	0
			iii arri, iiie o, colu		
Par	,	,			
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	ual-use. See instruct	ions.
	A				
	B				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt -			-	
	financed property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement) .				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
E	to debt - financed property (attach statement) Average adjusted basis of or allocable to debt-				
5	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
6 7	Gross income reportable. Multiply line 2 by line 6	%	%	70	<u>%</u>
'					
8	Total gross income (add line 7, columns A throu	ugh D). Enter here an	nd on Part I, line 7, c	olumn (A) . 🕨 _	0
9	Allocable deductions. Multiply line 3c by line 6				
	,	A Havarrata D. T. I.	and and an D. I.I.	- 7 (D) b	
10	Total allocable deductions. Add line 9, columns	•		le /, column (B) ► _	0
11	Total dividends - received deductions included	d in line 10			0

Sched	dule A (Form 990-T) 2021						Page 3
Pa	rt VI Interest, Annuiti	ies, Royaltie	es, and Rents	s fro	m Controlled Org	anizations (see instru	ctions)
					Exempt Co	entrolled Organizations	
1. Name of controlled organization		2. Employer identification number	3. Net unrela income (los (see instruction	s)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)							
(2)							
(3)							
(4)							
			Nonexemp	ot Co	ntrolled Organization	าร	
	7. Taxable income	inco	t unrelated ome (loss) ostructions)	payments made		10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)							
(2)							
(3)							
(4)							
Tot						Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	-
Pai	t VII Investment Inco	me of a Se	ction 501(c)(7), (9), or (17) Organiza	ation (see instructions)	
	1. Description of income	2. Amou	unt of income		3. Deductions directly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)							
(2)							
(3)							
(4)							
Tot	als	Enter here	nts in column 2. e and on Part I, column (A)				Add amounts in column 5. Enter here and on Part I, line 9, column (B)
		nt Activity I		r Th	an Advertising In	come (see instructions	-
1	Description of exploited		, •		/ 1 0. 1101119 111	TIME (SSS HISTIGOTION	-,
2	Gross unrelated busines		n trade or busi	ness.	Enter here and on P	art I. line 10. column (A)	2
3	Expenses directly conne	Enter here and on Part I,					
4	line 10, column (B) Net income (loss) from	e 2. If a gain, complete	3				
	lines 5 through 7						4
5	Gross income from activ	-					5
6	Expenses attributable to						6
7	Excess exempt expense 4. Enter here and on Particular to the second exempt expense.	7					

Schedule A (Form 990-T) 2021

Schedule A (Form 990-T) 2021 Page **4**

Par	IX Advertising Income						
1	Name(s) of periodical(s). Check box if re	porting t	wo or more periodic	als on a consol	lidated basis.		
	A 🗌						
	В						
	C □						
	D 🗌						
Enter	amounts for each periodical listed above	in the co	rresponding columi	າ.			
	•		Α	В	С	D	
2	Gross advertising income						
а	Add columns A through D. Enter here ar	nd on Pa	rt I, line 11, column	(A)		>	0
3	Direct advertising costs by periodical						_
а	Add columns A through D. Enter here ar	nd on Pa	rt I, line 11, column	(B)		>	0
4	Advertising gain (loss). Subtract line 3 fr 2. For any column in line 4 showing complete lines 5 through 8. For any coline 4 showing a loss or zero, do not colines 5 through 7, and enter zero on line	a gain, lumn in omplete					
5	Readership costs						
6	Circulation income						
7	Excess readership costs. If line 6 is less line 5, subtract line 6 from line 5. If line 5 than line 6, enter zero	is less					
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	as a gain on					
а	Add line 8, columns A through D. Enter Part II, line 13					on	0
Par	t X Compensation of Officers, Dir						_
	1. Name		2. Title		3. Percentage of time devoted to business	4. Compensation attributable to unrelated business	
(1)					%		_
(2)					%		_
(3)					%		_
(4)					%		
(- /					,,,		
Tota	II. Enter here and on Part II, line 1 .				•		0
Par	Supplemental Information (se	e instru	ctions)		I		

SCHEDULE A (Form 990-T)

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10

11

12

statement)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Open to Public Inspection for

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(147,497)

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Department of the Treasury

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service 501(c)(3) Organizations Only B Employer identification number **A** Name of the organization 37-6006007 UNIVERSITY OF ILLINOIS FOUNDATION 4 520000 C Unrelated business activity code (see instructions) ▶ **D** Sequence: **E** Describe the unrelated trade or business ► FINANCIAL INVESTMENT ACTIVITIES Part I **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 0 **c** Balance ▶ 0 Less returns and allowances b 1c Cost of goods sold (Part III, line 8) 0 2 2 0 0 3 Gross profit. Subtract line 2 from line 1c. . . 3 Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions 6,589,807 6,589,807 4a Net gain (loss) (Form 4797) (attach Form 4797). See 0 4b 0

4c

5

6

7

8

9

10

11

12

6.442.310 6.442.310 13 **Total.** Combine lines 3 through 12 13 0 Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

2	Salaries and wages	2	0
3	Repairs and maintenance	3	0
4	Bad debts	4	0
5	Interest (attach statement). See instructions	5	0
6	Taxes and licenses	6	0
7	Depreciation (attach Form 4562). See instructions		
8	Less depreciation claimed in Part III and elsewhere on return 8a 0	8b	0
9	Depletion	9	0
10	Contributions to deferred compensation plans	10	0
11	Employee benefit programs	11	0
12	Excess exempt expenses (Part VIII)	12	0
13	Excess readership costs (Part IX)	13	0
14	Other deductions (attach statement)	14	31,278
15	Total deductions. Add lines 1 through 14	15	31,278
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	6,411,032
17	Deduction for net operating loss. See instructions	17	16,721
18	Unrelated business taxable income. Subtract line 17 from line 16	18	6,394,311

For Paperwork Reduction Act Notice, see instructions.

Capital loss deduction for trusts

Income (loss) from a partnership or an S corporation (attach

Rent income (Part IV)

Interest, annuities, royalties, and rents from a controlled

Investment income of section 501(c)(7), (9), or (17)

organizations (Part VII)

Exploited exempt activity income (Part VIII)

Advertising income (Part IX)

Compensation of officers, directors, and trustees (Part X)

Other income (see instructions; attach statement) . .

Unrelated debt-financed income (Part V)

Cat. No. 74036O

Schedule A (Form 990-T) 2021

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(147.497)

Schedule A (Form 990-T) 2021 Page

ocnedu	ie A (1 01111 990-1) 2021				raye 🕰
Par	Cost of Goods Sold Enter me	thod of inventory val	uation ►		· · · · · · · · · · · · · · · · · · ·
1	Inventory at beginning of year			1	0
2	Purchases				0
3	Cost of labor				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7	Inventory at end of year				0
8	Cost of goods sold. Subtract line 7 from line 6.				0 2
9 Par	Do the rules of section 263A (with respect to property and Real Pr				? Yes V No
1	Description of property (property street address, A B C D D	city, state, ZIP code). Check if a dual-u	se. See instructions.	
_		Α	В	С	D
2 a	Rent received or accrued From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c column	ns A through D. Enter	here and on Part I, li	ne 6, column (A) ▶	0
4	Deductions directly connected with the income				
•	in lines 2(a) and 2(b) (attach statement)				
_					
5	Total deductions. Add line 4 columns A through	D. Enter here and o	n Part I, line 6, colu	mn (B) ► _	0
Par	,				
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	ual-use. See instruc	tions.
	A				
	B				
	D 📙	Α	В	С	D
2	Gross income from or allocable to debt -	A	В	C	U
	financed property				
3	to debt-financed property				
a b	Straight line depreciation (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt - financed property (attach statement)				
5	Average adjusted basis of or allocable to debt- financed property (attach statement)				
6 7	Divide line 4 by line 5	%	%	%	%
8	Total gross income (add line 7, columns A throi	ugh D) Enter here an	d on Part I line 7	column (A) . ►	0
		agii Dj. Liliei liele di	Jan arti, iiiie 7, C		0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns	· ·	ere and on Part I, lir	ne 7, column (B) ►	0
11	Total dividends - received deductions included	d in line 10		•	0

Sched	dule A (Form 990-T) 2021						Page 3
Pa	rt VI Interest, Annuiti	ies, Royaltie	es, and Rents	s fro	m Controlled Org	anizations (see instru	ctions)
					Exempt Co	entrolled Organizations	
1. Name of controlled organization		2. Employer identification number	3. Net unrela income (los (see instruction	s)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)							
(2)							
(3)							
(4)							
			Nonexemp	ot Co	ntrolled Organization	าร	
	7. Taxable income	inco	t unrelated ome (loss) ostructions)	payments made		10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)							
(2)							
(3)							
(4)							
Tot						Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	-
Pai	t VII Investment Inco	me of a Se	ction 501(c)(7), (9), or (17) Organiza	ation (see instructions)	
	1. Description of income	2. Amou	unt of income		3. Deductions directly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)							
(2)							
(3)							
(4)							
Tot	als	Enter here	nts in column 2. e and on Part I, column (A)				Add amounts in column 5. Enter here and on Part I, line 9, column (B)
		nt Activity I		r Th	an Advertising In	come (see instructions	-
1	Description of exploited		, •		/ 1 0. 1101119 111	TIME (SSS HISTIGOTION	-,
2	Gross unrelated busines		n trade or busi	ness.	Enter here and on P	art I. line 10. column (A)	2
3	Expenses directly conne	Enter here and on Part I,					
4	line 10, column (B) Net income (loss) from	e 2. If a gain, complete	3				
	lines 5 through 7						4
5	Gross income from activ	-					5
6	Expenses attributable to						6
7	Excess exempt expense 4. Enter here and on Particular to the second exempt expense.	7					

Schedule A (Form 990-T) 2021

Schedule A (Form 990-T) 2021 Page **4**

Part	X Advertising Income						
1	Name(s) of periodical(s). Check box if re	porting t	wo or more periodic	als on a consol	idated basis.		
	A 🗆		•				
	В 🗌						
	C 🗆						
	D 🗌						
Enter	amounts for each periodical listed above	in the co	rresponding colum	า.			
			Α	В	С	D	
2	Gross advertising income						
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(A)		>	0
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(B)		>	0
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any co- line 4 showing a loss or zero, do not co- lines 5 through 7, and enter zero on line	a gain, lumn in omplete					
5	Readership costs						
6	Circulation income						
7	Excess readership costs. If line 6 is le						
	line 5, subtract line 6 from line 5. If line						
	than line 6, enter zero						
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	gain on					
а	Add line 8, columns A through D. Enter		eater of the line 8a	a, columns tota	l or zero here and	on	
	Part II, line 13						0
Par	X Compensation of Officers, Di	rectors	, and Trustees (s	ee instructions	s)		
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business 	
(1)					%		
(2)					%		
(3)					%		
(4)					%		
	I. Enter here and on Part II, line 1 .				🕨		0
Part	Supplemental Information (se	e instru	ctions)				

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury

▶ Go to www.irs.gov/Form990T for instructions and the latest information. ► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Na	me of the organization ERSITY OF ILLINOIS FOUNDATION	e made p	done il your organ		Employer ide		on number	nly
C Un	related business activity code (see instructions) ▶	32000	0	D S	Sequence:	3	of 4	
E De	scribe the unrelated trade or business PLASTICS PRODUCT M	IANUFAC	CTURING					
Pai			(A) Income		(B) Expense	s	(C) Net	
1a	Gross receipts or sales 0							
b	Less returns and allowances0 c Balance ▶	1c		0				
2	Cost of goods sold (Part III, line 8)	2		0				
3	Gross profit. Subtract line 2 from line 1c	3		0				0
4a	Capital gain net income (attach Sch D (Form 1041 or Form							
	1120)). See instructions	4a		0				0
b	Net gain (loss) (Form 4797) (attach Form 4797). See							_
	instructions	4b		0				
c	Capital loss deduction for trusts	4c		0				
5	Income (loss) from a partnership or an S corporation (attach							
	statement)	5	(5,90	-			(5,9	
6	Rent income (Part IV)	6		0		0		0
7	Unrelated debt-financed income (Part V)	7		0		0		
8	Interest, annuities, royalties, and rents from a controlled							_
•	organization (Part VI)	8		0		0		0
9	Investment income of section 501(c)(7), (9), or (17)					_		_
	organizations (Part VII)	9		0		0		0
10	Exploited exempt activity income (Part VIII)	10		0		0		0
11	Advertising income (Part IX)	11		0		0		0
12	Other income (see instructions; attach statement)	12		0				0
13	Total. Combine lines 3 through 12	13	(5,90	,		0	(5,9	04)
Par	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		mitations on d	educ	tions. Ded	uctions	s must be	
1	Compensation of officers, directors, and trustees (Part X)					1		0
2	Salaries and wages					2		0
3	Repairs and maintenance					3		0
4	Bad debts					4		0
5	Interest (attach statement). See instructions					5		0
6	Taxes and licenses					6		0
7	Depreciation (attach Form 4562). See instructions		7		0			
8	Less depreciation claimed in Part III and elsewhere on return .		8a		0	8b		0
9	Depletion					9		0
10	Contributions to deferred compensation plans					10		0
11	Employee benefit programs					11		0
12	Excess exempt expenses (Part VIII)					12		0
13	Excess readership costs (Part IX)					13		0
14	Other deductions (attach statement)					14	31,	
15	Total deductions. Add lines 1 through 14					15	31,	278
16	Unrelated business income before net operating loss deduction							
	column (C)					16	(37,1	82)
17	Deduction for net operating loss. See instructions					17		0
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16				18	(37,1	82)

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 74036O

Schedule A (Form 990-T) 2021

Scheau	le A (Form 990-1) 2021				Page ∠
Part	Cost of Goods Sold Enter me	thod of inventory val	uation ►		
1	Inventory at beginning of year				0
2	Purchases				0
3	Cost of labor				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7 8	Inventory at end of year				0
9	Do the rules of section 263A (with respect to prope				
Pari					- 103 M
1	Description of property (property street address,				
	A	• •	,		
	B 🗌				
	C □				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10% but not more than 50%)				
	ŕ				
b	From real and personal property (if the percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property.				
·	Add lines 2a and 2b, columns A through D				
	- '				
3	Total rents received or accrued. Add line 2c column	ns A through D. Enter	here and on Part I, li	ne 6, column (A) ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D Enter here and o	n Part I line 6 colu	mn (R)	0
			iii arri, iiie o, colu		
Par	,	,			
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	ual-use. See instruct	ions.
	A				
	B				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt -			-	
	financed property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement) .				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
E	to debt - financed property (attach statement) Average adjusted basis of or allocable to debt-				
5	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
6 7	Gross income reportable. Multiply line 2 by line 6	%	%	70	<u>%</u>
'					
8	Total gross income (add line 7, columns A throu	ugh D). Enter here an	nd on Part I, line 7, c	olumn (A) . 🕨 _	0
9	Allocable deductions. Multiply line 3c by line 6				
	,	A Havarrata D. T. I.	and and an D. I.I.	- 7 (D) b	
10	Total allocable deductions. Add line 9, columns	•		le /, column (B) ► _	0
11	Total dividends - received deductions included	d in line 10			0

Sched	dule A (Form 990-T) 2021						Page 3
Pa	rt VI Interest, Annuiti	ies, Royaltie	es, and Rents	s fro	m Controlled Org	anizations (see instru	ctions)
					Exempt Co	entrolled Organizations	
	Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instruction	s)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)							
(2)							
(3)							
(4)							
			Nonexemp	ot Co	ntrolled Organization	าร	
	7. Taxable income	inco	t unrelated ome (loss) ostructions)	9	. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)							
(2)							
(3)							
(4)							
Tot						Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	-
Pai	t VII Investment Inco	me of a Se	ction 501(c)(7), (9), or (17) Organiza	ation (see instructions)	
	1. Description of income	2. Amou	unt of income		3. Deductions directly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)							
(2)							
(3)							
(4)							
Tot	als	Enter here	nts in column 2. e and on Part I, column (A)				Add amounts in column 5. Enter here and on Part I, line 9, column (B)
		nt Activity I		r Th	an Advertising In	come (see instructions	-
1	Description of exploited		, •		/ 1 0. 1101119 111	TIME (SSS HISTIGOTION	-,
2	Gross unrelated busines		n trade or busi	ness.	Enter here and on P	art I. line 10. column (A)	2
3	Expenses directly conne	ected with pro	duction of unre	elatec	l business income. E	Enter here and on Part I,	
4	line 10, column (B) Net income (loss) from	unrelated trad	de or business	. Sub	tract line 3 from line	e 2. If a gain, complete	3
	lines 5 through 7						4
5	Gross income from activ	-					5
6	Expenses attributable to						6
7	Excess exempt expense 4. Enter here and on Particular to the second exempt expense.						7

Schedule A (Form 990-T) 2021

Schedule A (Form 990-T) 2021 Page **4**

Par	Advertising Income						_
1	Name(s) of periodical(s). Check box if re	eportina t	wo or more periodic	als on a consol	idated basis.		
•	A 🗆	-	•	, alo on a conson	idatod baolo.		
	B 🗆						
	c □						
	D						
Enter	amounts for each periodical listed above	in the co	rresponding columi	າ.			
	·		A	В	С	D	
2	Gross advertising income						
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(A)		>	0
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(B)		>	0
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any co- line 4 showing a loss or zero, do not co- lines 5 through 7, and enter zero on line	a gain, olumn in omplete					
5 6 7	Readership costs	ss than 5 is less					
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	as a gain on					
а	Add line 8, columns A through D. Ent Part II, line 13	_				on 🕨	0
Par	t X Compensation of Officers, Di	rectors	, and Trustees (s	ee instructions	s)		
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business 	
(1)					%		
(2)					%		
(3)					%		
(4)					%		
_							
	I. Enter here and on Part II, line 1 .				▶		0
Part	Supplemental Information (se	e instru	ctions)				

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Name of the organization
UNIVERSITY OF ILLINOIS FOUNDATION

C Unrelated business activity code (see instructions)

B Employer identification number
37-6006007

D Sequence:

4 of

C Un	related business activity code (see instructions) ▶	31000	00	D Sequence:		of 4
E De	scribe the unrelated trade or business DAIRY PRODUCT MANU	<u>JFACT</u> L	JRING			
Pai	Unrelated Trade or Business Income		(A) Income	(B) Expens	es	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance ▶	1c	С			
2	Cost of goods sold (Part III, line 8)	2	C			
3	Gross profit. Subtract line 2 from line 1c	3	С)		(
4a	Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions					
	Net gain (loss) (Form 4797) (attach Form 4797). See	4a	С			
b	instructions	1h	((
•	Capital loss deduction for trusts	4b 4c	(
с 5	Income (loss) from a partnership or an S corporation (attach	40				
•	statement)	5	(754,602			(754,602
6	Rent income (Part IV)	6	(,		0	(. 0 .,002
7	Unrelated debt-financed income (Part V)	7	(0	(
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	C		0	C
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	C		0	C
10	Exploited exempt activity income (Part VIII)	10	С)	0	С
11	Advertising income (Part IX)	11	C		0	C
12	Other income (see instructions; attach statement)	12	C			C
13	Total. Combine lines 3 through 12	13	(754,602))	0	(754,602)
Par	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		imitations on de	ductions. De	ductions	must be
1	Compensation of officers, directors, and trustees (Part X)				1	С
2	Salaries and wages				2	C
3	Repairs and maintenance				3	C
4	Bad debts				4	C
5	Interest (attach statement). See instructions				5	C
6	Taxes and licenses				6	С
7	Depreciation (attach Form 4562). See instructions			0		_
8	Less depreciation claimed in Part III and elsewhere on return .			0	00	C
9	Depletion				9	C
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	C
12	Excess exempt expenses (Part VIII)				12	
13 14	Excess readership costs (Part IX)				13	31,278
15	Other deductions (attach statement)				14 15	31,278
16	Unrelated business income before net operating loss deduction	 n. Subt	tract line 15 from	Part I. line 13	13	31,270
	column (C)				16	(785,880)
17	Deduction for net operating loss. See instructions				17	(700,000)
18	Unrelated business taxable income. Subtract line 17 from lin				18	(785,880)
	Cin clated bacillood taxable internet outline 17 from in	.5 .0	<u> </u>	<u> </u>	5	(: 55,550)

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 74036O

Schedule A (Form 990-T) 2021

Scheau	le A (Form 990-1) 2021				Page ∠
Part	Cost of Goods Sold Enter me	thod of inventory val	uation ►		
1	Inventory at beginning of year				0
2	Purchases				0
3	Cost of labor				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7 8	Inventory at end of year				0
9	Do the rules of section 263A (with respect to prope				
Pari					- 103 M
1	Description of property (property street address,				
	A	• •	,		
	B 🗌				
	C □				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10% but not more than 50%)				
	ŕ				
b	From real and personal property (if the percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property.				
·	Add lines 2a and 2b, columns A through D				
	- '				
3	Total rents received or accrued. Add line 2c column	ns A through D. Enter	here and on Part I, li	ne 6, column (A) ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D Enter here and o	n Part I line 6 colu	mn (R)	0
			iii arri, iiie o, colu		
Par	,	,			
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	ual-use. See instruct	ions.
	A				
	B				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt -			-	
	financed property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement) .				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
_	columns A through D)				
4	Amount of average acquisition debt on or allocable				
E	to debt - financed property (attach statement) Average adjusted basis of or allocable to debt-				
5	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
6 7	Gross income reportable. Multiply line 2 by line 6	%	%	70	<u>%</u>
'					
8	Total gross income (add line 7, columns A throu	ugh D). Enter here an	nd on Part I, line 7, c	olumn (A) . 🕨 _	0
9	Allocable deductions. Multiply line 3c by line 6				
	,	A Havarrata D. T. I.	and and an D. I.I.	- 7 (D) b	
10	Total allocable deductions. Add line 9, columns	•		le /, column (B) ► _	0
11	Total dividends - received deductions included	d in line 10			0

Scried	lule A (Form 990-1) 2021							Page 3
Pai	rt VI Interest, Annuiti	es, Royaltie	es, and Rents	s fro	m Controlled Org	anizations (see instru	ctions	s)
					Exempt Co	ntrolled Organizations		
	Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instruction)	s)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income		Deductions directly connected with come in column 5
(1)								
(2)								
(3)								
(4)								
			Nonexemp	ot Co	ntrolled Organization	ns		
	7. Taxable income	inco	t unrelated me (loss) nstructions)		Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income		Deductions directly connected with come in column 10
(1)								
(2)								
(3)								
(4)								
	als					Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Ente	d columns 6 and 11. or here and on Part I, ine 8, column (B)
Par	t VII Investment Inco	me of a Se	ction 501(c)(7), (9), or (17) Organiza	ation (see instructions))	
	1. Description of income	2. Amou	unt of income		3. Deductions directly connected attach statement)	4. Set-asides (attach statement)		Total deductions and set-asides d columns 3 and 4)
(1)								
(2)								
(3)								
(4)								
- .		Enter here	nts in column 2. e and on Part I, column (A)				Ente	amounts in column 5. er here and on Part I, ine 9, column (B)
	als	P	0	u Tle	on Advortisins III		, 	0
Far	t VIII Exploited Exem		ncome, Othe	rin	an Advertising in	come (see instructions	5)	
1	Description of exploited		a dua da la ultimate		Fotou bous and D	land I line 40 and one:- (A)		
2	Gross unrelated busines						2	
3	Expenses directly conne line 10, column (B)						3	
4	Net income (loss) from lines 5 through 7					• •	4	
5	Gross income from activ						5	
6	Expenses attributable to	-					6	
7	Excess exempt expense 4. Enter here and on Par	es. Subtract li					7	

Schedule A (Form 990-T) 2021

Schedule A (Form 990-T) 2021 Page **4**

Part	X Advertising Income						
1	Name(s) of periodical(s). Check box if re	porting t	wo or more periodic	als on a consol	idated basis.		
	A 🗆		•				
	В 🗌						
	C 🗆						
	D 🗌						
Enter	amounts for each periodical listed above	in the co	rresponding colum	า.			
			Α	В	С	D	
2	Gross advertising income						
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(A)		>	0
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(B)		>	0
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any co- line 4 showing a loss or zero, do not co- lines 5 through 7, and enter zero on line	a gain, lumn in omplete					
5	Readership costs						
6	Circulation income						
7	Excess readership costs. If line 6 is le						
	line 5, subtract line 6 from line 5. If line						
	than line 6, enter zero						
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	gain on					
а	Add line 8, columns A through D. Enter		eater of the line 8a	a, columns tota	l or zero here and	on	
	Part II, line 13						0
Par	X Compensation of Officers, Di	rectors	, and Trustees (s	ee instructions	s)		
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business 	
(1)					%		
(2)					%		
(3)					%		
(4)					%		
	I. Enter here and on Part II, line 1 .				🕨		0
Part	Supplemental Information (se	e instru	ctions)				

Form 990T	Additional Information
Return Reference - Identifier	Explanation
BOOK CARE - NAME AND ADDRESS	CHRISTINE C. DEVOCELLE, 1305 WEST GREEN STREET, URBANA, IL 61801

Form 990T Part I, Line 4

Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2018	2,609		2,609		0	
2019	4,931		4,931		0	
2020	10,599		10,599		0	
2021	11,628		11,628		0	
Totals	29,767	0	29,767	0	0	_

Form 990T Part I, Line 6

Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2016	512,004			512,004	0	2035
2017	3,820,323			3,820,323	0	2036
Totals	4,332,327	0	0	4,332,327	0	

Income (loss) from Partnership and S Corporations

Name of Partnership	Share of gross income	Share of deductions	Gain or loss
INVESTMENT ACTIVITY			
(1) ARCLIGHT ENERGY PARTNERS FUND VI, L.P.	486,587		486,587
(2) BLUE ROAD CAPITAL LP	(208,561)		(208,561)
(3) BLUE ROAD VANGUARD AIV, LP	10,186		10,186
(4) NEW HERITAGE CAPITAL FUND III, L.P.	247,140		247,140
(5) REDWOOD DRAWDOWN DOMESTIC FUND II, L.P.	344,358		344,358
(6) SEGULAH V AB	1,523,093		1,523,093
(7) ZEI FUND VI CO-INVEST DB, LP, C/O EQUITY INTERNATIONAL MANAGEMENT, LLC	(71,493)		(71,493)
(8) MAKENA CAPITAL ASSOCIATES (U.S.), L.P.	498,449		498,449
(9) NORTHWOOD REAL ESTATE PARTNERS LP	22,130		22,130
(10) NW EUROPE (NO.2) LIMITED PARTNERSHIP	12,466		12,466
(11) REDWOOD DOMESTIC FUND, L.P.	(9)		(9)
(12) ROCK SPRINGS CAPITAL FUND LP	(5,634)		(5,634)
(13) CLEARVUE PARTNERS II, L.P. C/O MAPLES CORPORATE SERVICES LIMITED	(855)		(855)
(14) EGI-LDS HOLDINGS, LLC	(288,027)		(288,027)
(15) JUNIPER CAPITAL III, L.P.	(6,721,681)		(6,721,681)
(16) JUNIPER CAPITAL II, L.P.	(3,356,331)		(3,356,331)
(17) BRC VANGUARD CO-INVEST, LP	6,230		6,230
(18) REGENCY COMMERCIAL ASSOCIATES LLC	1,440,623		1,440,623
(19) ROSE GROVE PARTNERS I, LP	32,947		32,947
(20) ZELL EQUITY INTERNATIONAL FUND VI, LP	(97,447)		(97,447)
Total	(6,125,829)	0	(6,125,829)
FINANCE AND INSURANCE			
(1) SUNRIVER FUND, LP	(147,497)		(147,497)
Total	(147,497)	0	(147,497)
PLASTICS PRODUCT MANUFACTURING			
(1) AHOY CAPITAL SPINNAKER FUND, L.P.	(5,904)		(5,904)
Total	(5,904)	0	(5,904)
DAIRY PRODUCT MANUFACTURING			
(1) NEW HERITAGE CAPITAL FUND III SPV, L.P.	(754,602)		(754,602)
Total	(754,602)	0	(754,602)

Schedule A - Part II, Line 6

Taxes and Licenses

Description	Amount
INVESTMENT ACTIVITY	
(1) TAXES AND LICENSES	64,052

Schedule A - Part II, Line 14

Other Deductions

Description	Amount
INVESTMENT ACTIVITY	
(1) SEC 59(E)(2) EXPENDITURE AMORTIZATION FROM PY	579,719
(2) ACCOUNTING FEE	31,278
Total	610,997
FINANCE AND INSURANCE	
(1) ACCOUNTING FEE	31,278
PLASTICS PRODUCT MANUFACTURING	
(1) ACCOUNTING FEE	31,278
DAIRY PRODUCT MANUFACTURING	
(1) ACCOUNTING FEE	31,278

Schedule A - Part II, Line 17

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining
INVESTMENT ACTIVITY	1				
2018	10,839,018				10,839,018
2019	9,915,018				9,915,018
2020	8,341,821				8,341,821
2021	6,321,755				6,321,755
Totals	35,417,612	0	0	0	35,417,612
FINANCE AND INSURA	NCE				
2018	16,721			16,721	0
Totals	16,721	0	0	16,721	0
PLASTICS PRODUCT N	IANUFACTURING				
2021	37,182				37,182
Totals	37,182	0	0	0	37,182
DAIRY PRODUCT MAN	UFACTURING				
2021	785,880				785,880
Totals	785,880	0	0	0	785,880

Capital Gains and Losses

Department of the Treasury Internal Revenue Service

SCHEDULE D

(Form 1120)

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www.irs.gov/Form1120 for instructions and the latest information.

2021

OMB No. 1545-0123

Employer identification number UNIVERSITY OF ILLINOIS FOUNDATION 37-6006007 Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ► Yes No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) (e) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (g) the result with column (g) whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked 0 2 Totals for all transactions reported on Form(s) 8949 0 with **Box B** checked 3 Totals for all transactions reported on Form(s) 8949 0 with Box C checked 2.826.246 0 2,826,246 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 **6** Unused capital loss carryover (attach computation) 6 0) 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 7 2,826,246 Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) (e) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) the result with column (g) column (q) whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with **Box D** checked 0 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 0 10 Totals for all transactions reported on Form(s) 8949 0 with **Box F** checked 4.137.400 0 4,137,400 11 Enter gain from Form 4797, line 7 or 9 11 105.284 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37. 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 Capital gain distributions (see instructions) 14 4,242,684 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 Summary of Parts I and II Part III 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 2,826,246 4,242,684 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns 18 7,068,930 **Note:** If losses exceed gains, see Capital Losses in the instructions.

5/9/2023 10:38:45 PM

Form **8949**

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No. 12A

Name(s) shown on return
UNIVERSITY OF ILLINOIS FOUNDATION

Social security number or taxpayer identification number 37-6006007

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (B) Short-term transactions☑ (C) Short-term transactions	•			sis wasn't report	ed to the If	RS		
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g) enter a code in column (f). See the separate instructions. (f) Code(s) from Amount of		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)	
MANZENIA CARITAI				Instructions	instructions	adjustment	with column (g)	
MAKENA CAPITAL ASSOCIATES (U.S.), L.P.	VARIOUS		4,113			0	4,113	
REDWOOD DOMESTIC FUND, L.P.	VARIOUS		19			0	19	
ROCK SPRINGS CAPITAL FUND LP	VARIOUS		35,063			0	35,063	
SUNRIVER FUND, LP	VARIOUS		2,707,656			0	2,707,656	
ROSE GROVE PARTNERS I, LP	VARIOUS		79,395			0	79,395	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box (al here and incl is checked), lin	ude on your le 2 (if Box B	2,826,246	0		0	2,826,246	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2021) Attachment Sequence No. **12A** Page **2**

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side UNIVERSITY OF ILLINOIS FOUNDATION

Social security number or taxpayer identification number 37-6006007

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- ✓ (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), code in column (f). parate instructions.	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
ARCLIGHT ENERGY PARTNERS FUND VI, L.P.	VARIOUS		29,977			0	29,977	
MAKENA CAPITAL ASSOCIATES (U.S.), L.P.	VARIOUS		170,606			0	170,606	
REDWOOD DOMESTIC FUND, L.P.	VARIOUS		94			0	94	
ROCK SPRINGS CAPITAL FUND LP	VARIOUS		52,635			0	52,635	
SUNRIVER FUND, LP	VARIOUS		3,882,151			0	3,882,151	
ROSE GROVE PARTNERS I, LP	VARIOUS		1,937			0	1,937	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and incl is checked), lir	lude on your ne 9 (if Box E	4,137,400	0		0	4,137,400	

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2021)

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

OMB No. 1545-0184

Department of the Treasury Attachment Sequence No. 27 ► Go to www.irs.gov/Form4797 for instructions and the latest information. Internal Revenue Service Name(s) shown on return Identifying number

UNIVE	ERSITY OF ILLINOIS FOUN	NDATION					37-600	06007
1a	Enter the gross proceeds substitute statement) that						1a	
b	Enter the total amount of MACRS assets				ue to the partial dis	•	1b	
С	Enter the total amount of assets						1c	
Part		ges of Propert	ty Used in a Ti	rade or Busines	s and Involunt	ary Conver	sions	From Other
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or o basis, plu improvement expense of	is s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
ARC	LIGHT ENERGY VI	VARIOUS	VARIOUS	1,783				1,783
BLUE	ROAD CAPITAL LP	VARIOUS	VARIOUS	8,938				8,938
	RD VANGUARD AIV	VARIOUS	VARIOUS	·			6,888	(6,888)
	STATEMENT)							
3	Gain, if any, from Form 46						3	
4	Section 1231 gain from in:		•				4	
5	Section 1231 gain or (loss	•	•				5	
6	Gain, if any, from line 32, f		-				6	
7	Combine lines 2 through 6	6. Enter the gain or	(loss) here and on	the appropriate line	as follows		7	105,284
	Individuals, partners, S of from line 7 on line 11 bel- 1231 losses, or they were Schedule D filed with your	ow and skip lines or recaptured in an e r return and skip lin	8 and 9. If line 7 is arlier year, enter thes ses 8, 9, 11, and 12	s a gain and you die ne gain from line 7 as 2 below.	dn't have any prior	year section		
8	Nonrecaptured net section	n 1231 losses from	prior years. See in	structions			8	
9	Subtract line 8 from line 7 line 9 is more than zero, e capital gain on the Sched	nter the amount fro ule D filed with you	om line 8 on line 12 r return. See instru	enter the common three the common three comm	e gain from line 9 as	a long-term	9	
Part								
10	Ordinary gains and losses	not included on lin	nes 11 through 16 ((include property hel	ld 1 year or less):			
-								
11	Loss, if any, from line 7						11	
12	Gain, if any, from line 7 or						12	
13	Gain, if any, from line 31.						13	0
14	Net gain or (loss) from For						14	
15	Ordinary gain from installr						15	
16	Ordinary gain or (loss) from						16	
17	Combine lines 10 through	•	•				17	0
18	For all except individual rea and b below. For individual	eturns, enter the an	nount from line 17	on the appropriate				
_		•			eart of the loce here	Entor the less		
а	from income-producing pro							
	employee.) Identify as from						18a	
b		(loss) on line 17 e.	xcluding the loss,	if any, on line 18a.	Enter here and on	Schedule 1	18b	

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 13086I

Form **4797** (2021)

Form 4797 (2021) Page **2**

Pai	Gain From Disposition of Property Und (see instructions)	ler Se	ctions 1245, 12	250, 1252, 1	254,	and 1255		
19	(a) Description of section 1245, 1250, 1252, 1254, or 125	5 prope	erty:			(b) Date acq (mo., day, y		(c) Date sold (mo., day, yr.)
Α								
В								
С								
D								
	These columns relate to the properties on lines 19A through 19D). •	Property A	Property	В	Property	· C	Property D
20	Gross sales price (Note: See line 1a before completing.) .	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions .	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions.	26b						
С	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976.	26d						
е	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
а	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage. See instructions	27b						
С	Enter the smaller of line 24 or 27b	27c						
28	If section 1254 property:							
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b						
29	If section 1255 property:							
а	Applicable percentage of payments excluded from income under section 126. See instructions	29a						
	Enter the smaller of line 24 or 29a. See instructions .	29b						
Sun	nmary of Part III Gains. Complete property colun	nns A	through D throug	gh line 29b k	petore	e going to lin	<u>ie 30.</u>	
								0
30	Total gains for all properties. Add property columns A thro	•					30	0
31	Add property columns A through D, lines 25b, 26g, 27c, 2						31	0
32		<u></u>				<u> </u>	32	0
Pai	Recapture Amounts Under Sections 17 (see instructions)	79 and	1 280F(b)(2) Wh	en Busines	ss Us	-		
						(a) Section 179	n	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable	in prior	years		33			
34					34			
35	Recapture amount. Subtract line 34 from line 33. See the i	instruct	ions for where to re	port	35	1	0	0

Form **4797** (2021)

Part I, Line 2

Sales or Exchanges of Property

	(a) Description of property	(b) Date acquired (mo. day. yr.)	(c) Date sold (mo. day. yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sums of (d) and (e)
(1) BRC VANG CO-INVEST	VARIOUS	VARIOUS			7,558	(7,558)
(2) MAKENA CAP ASSO US	VARIOUS	VARIOUS	109,009			109,009

Form **8990**(Rev. May 2020)
Department of the Treasury

Internal Revenue Service

Limitation on Business Interest Expense Under Section 163(i)

► Attach to your tax return.

► Go to www.irs.gov/Form8990 for instructions and the latest information.

OMB No. 1545-0123

Taxpayer name(s) shown on tax return Identification number UNIVERSITY OF ILLINOIS FOUNDATION 37-6006007 If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter: Name of foreign entity ► Employer identification number, if any ▶ Reference ID number ▶ Part I Computation of Allowable Business Interest Expense Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j). Section I - Business Interest Expense Current year business interest expense (not including floor plan 1,818 financing interest expense), before the section 163(j) limitation 1 Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership) 2 8,716 Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h)). Floor plan financing interest expense. See instructions Total business interest expense. Add lines 1 through 4...... 10,534 Section II - Adjusted Taxable Income **Taxable Income** Taxable income. See instructions -750,507 Additions (adjustments to be made if amounts are taken into account on line 6) Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions 7 Any business interest expense not from a pass-through entity. See 8 Amount of any net operating loss deduction under section 172 9 Amount of any qualified business income deduction allowed under 10 10 Deduction allowable for depreciation, amortization, or depletion 11 attributable to a trade or business. See instructions Amount of any loss or deduction items from a pass-through entity. 12 12 7,033,832 13 Other additions. See instructions 13 Total current year partner's excess taxable income (Schedule A, line 14 15 Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c)) 7,033,832 16 Total. Add lines 7 through 15 Reductions (adjustments to be made if amounts are taken into account on line 6) 17 Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions 17 18 Any business interest income not from a pass-through entity. See 18 19 Amount of any income or gain items from a pass-through entity. 7,068,930 20 20 21 (7,068,930) 21 Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-.) Form 8990 (Rev. 5-2020) For Paperwork Reduction Act Notice, see the instructions.

JSA 1X4100 1.000

Sect	ion III - Business Interest Income		
23	Current year business interest income. See instructions 23		
24	Excess business interest income from pass-through entities (total of		
	Schedule A, line 44, column (g), and Schedule B, line 46, column (d))		
25	Total. Add lines 23 and 24	25	0
Sect	ion IV - 163(j) Limitation Calculations		
	Limitation on Business Interest Expense		
26	Multiply adjusted taxable income (line 22) by the applicable		
	percentage. See instructions		
27	Business interest income (line 25)		
28	Floor plan financing interest expense (line 4)		
29	Total. Add lines 26, 27, and 28	29	0
	Allowable Business Interest Expense		
30	Total current year business interest expense deduction. See instructions	30	0
	Carryforward		
31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)	31	10,534
Part			,
	Il is only completed by a partnership that is subject to section 163(j). The partnership items below are a	llocate	ed to the partners
and	are not carried forward by the partnership. See the instructions for more information.		
	Excess Business Interest Expense		
32	Excess business interest expense. Enter amount from line 31	32	10,534
	Excess Taxable Income (If you entered an amount on line 32, skip lines 33 throug	h 37.)	
33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	33	
34	Subtract line 33 from line 26. (If zero or less, enter -0)	34	
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	35	
36	Excess taxable income. Multiply line 35 by line 22	36	
	Excess Business Interest Income	1	
37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or		
٠.	less, enter -0).	37	
Part	S Corporation Pass-Through Items		
	III is only completed by S corporations that are subject to section 163(j). The S corporation items be	elow a	are allocated to the
	eholders. See the instructions for more information.		
	Excess Taxable Income		
38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	38	
39	Subtract line 38 from line 26. (If zero or less, enter -0).	39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	40	
41	Excess taxable income. Multiply line 40 by line 22	41	
	Excess Business Interest Income		
42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or		

Form **8990** (Rev. 5-2020)

JSA

1X4101 1.000

Form 8990 (Rev. 5-2020)	I OBEIC INSI ECTION COLL	Page 3
SCHEDULE A	Summary of Partner's Section 163(i) Excess Items	

An	/ taxpayer that owns an i	nterest in a partnei	rship subject to sec	tion 163(j) should c	complete Schedule	A before completin	ıg Part I.		
			Excess	Business Interest Expen	se	(f) Current year	(g) Current year	(h) Excess business interest expense treated	(i) Current year excess business interest
	(a) Name of partnership	(b) EIN	(c) Current year	(d) Prior year carryforward	(e) Total ((c) plus (d))	excess taxable income	excess business interest income	as paid or accrued (see instructions)	expense carryforward ((e) minus (h))
43	BLUE ROAD CAPITAL LP	46-4196871	1,818	8,716	10,534	0	0	0	10,534
44	Total ▶								

SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

	(a) Name of S corporation	(b) EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
45				
46	Total			

Form **8990** (Rev. 5-2020)

(Rev. December 2020)

Department of the Treasury

Internal Revenue Service

Tax on Base Erbsion Payments of Caxpayers With

For tax year beginning $\frac{07/01}{}$ ► Go to www.irs.gov/Form8991 for instructions and the latest information.

➤ See instructions.

Employer identification number UNIVERSITY OF ILLINOIS FOUNDATION 37-6006007

Applicable Taxpayer Determination

Check box if this form is being filed by a taxpayer with which another taxpayer has been aggregated under Regs. section 1.59A-2(c).... If the above box is checked, attach a statement listing the names and EINs of all separate taxpayers taken into account in the determination of "1 person" under Regs. section 1.59A-2(c).

		(a)	(b)		(c)
		First Preceding Tax Year	Secor Preced Tax Ye	ing	Third Preceding Tax Year
1 a	Gross receipts of the taxpayer. See instructions	922,366,8	13 1,011,02	5,492	618,062,416
b	Gross receipts from partnerships	-9,087,0	-10,40	2,481	-10,590,840
С	Gross receipts of all other persons treated as 1 person pursuant to Regs. section 1.59A-2(c)				
d	Gross receipts. Combine lines 1a through 1c	913,279,783	1,021,428	3,973	607,471,576
е	Gross receipts of first, second, and third preceding tax years. Combine columns		(c) of line		
	1d			1e	2,542,180,332
f	3-year average annual gross receipts. See instructions			1f	847,393,44
g	Is line 1f \$500 million or more? X Yes. Continue to line 2.				
	No. STOP here and attach this form to your tax return.				
2a	Base erosion tax benefit (from Schedule A, line 15, column (a-2))			2a	0
b	Amount of deductions allowed under Chapter 1 of the Internal Revenue Code			2b	768,884
C	Base erosion tax benefits resulting from reductions in insurance premiu				700,004
•	reported on Schedule A, line 8, column (a-2)		0		
d	Base erosion tax benefits resulting from reductions in gross receipts reported				
u	Schedule A, line 10, column (a-2)		0		
е	Add lines 2c and 2d			2e	0
f	Total deductions for amounts paid or accrued for services to which the excep	1 1		20	Ü
•	under Regs. section 1.59A-3(b)(3)(i) applies (from Schedule A, line 5b)		0		
α.	Qualified derivative payments excepted by Regs. section 1.59A-6(b)		0		
y h	Total deductions allowed under sections 172, 245A, and 250 for the tax year	_	0	-	
i	Does the taxpayer elect to waive deductions in accordance with Regulat			-	
ı			0		
	section 1.59A-3(c)(6)(i)? Yes. Complete Schedule B. Enter the amount from line 15 of Schedule B. No. Enter -0	21	0		
j	Deductions for exchange losses from section 988 transactions described	in			
	Regulations section 1.59A-2(e)(3)(ii)(D)		0		
k	Deductions for TLAC securities and foreign TLAC securities described				
	Regulations section 1.59A-2(e)(3)(ii)(E)		0	4	
I	Reinsurance losses incurred and claims payments described in Regulat				
	section 1.59A-2(e)(3)(ii)(F)		0	_	
m	Combine lines 2f through 2l			2m	0
n	Total Deductions. Subtract line 2m from the sum of line 2b and line 2e			2n	0
0	Base Erosion Percentage. Divide line 2a by line 2n			20	0 %
р	Is the taxpayer's base erosion percentage on line 20 3% or higher (2% or higher fidealer)?	or a bank or	securities		
	Yes. Continue to Part II.				
	X No. STOP after completing Part I and Schedule A (and, if necessary, Schedule E	B) and attach	this		
	form to your tax return.				

For Paperwork Reduction Act Notice, see separate instructions.

Form 8991 (Rev. 12-2020)

OMB No. 1545-0123

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Par	t Modified Taxable			
3 a	Taxable income after net	operating loss. See instructions	3a	
b	Base erosion tax benefits	for the tax year from Schedule A, line 15, column (b-2)	3b	
С	Base erosion percentage	of the net operating loss deduction allowed under section 172 for the tax year.		
	See instructions		3с	
d	Modified Taxable Income	See instructions	3d	
Par	rt Ⅲ Regular Tax Liabi	lity Adjusted for Purposes of Computing Base Erosion Minimum Tax Amou	int	
4 a	Regular tax liability		4a	
b			4b	
С		justed for purposes of computing Base Erosion Minimum Tax Amount. Subtract		
	line 4b from line 4a		4c	
Par	t IV Computation of I	Base Erosion Minimum Tax Amount		
5 a	Modified Taxable Income	(from line 3d)	5a	
b			5b	%
С	Base Erosion Minimum Ta	xx. Multiply line 5a by line 5b · · · · · · · · · · · · · · · · · ·	5c	
d	Regular tax liability adju	sted for purposes of computing Base Erosion Minimum Tax Amount (from		
	line 4c)		5d	
е	Base Frosion Minimum T	ax Amount, Subtract line 5d from line 5c. If zero or less, enter -0-	50	

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Sc	hedule A Base Erosion Payments and Base Erosion Ta	ax Benefits (see	e instructions)					
	s the taxpayer elect to use financial statements per Regs. sect cable to a foreign corporation's effectively connected income?	ion 1.59A-3(b)(4)(i) es No	(D) for purpose	s of calculating in	nterest expense	(Check all applicable boxes in columns (c), (d), and (e) below)		
		(a-1)	(a-2)	(b-1)	(b-2)	(c)	(d)	(e)
	Type of Base Erosion Payments	Aggregate Group's Base Erosion Payments	Aggregate Group's Base Erosion Tax Benefits	Taxpayer's Base Erosion Payments	Taxpayer's Base Erosion Tax Benefits	Any 25% Owner of the Taxpayer	Person Related Under Sections 267(b) or 707(b)(1) to the Taxpayer or Any 25% Owner of the Taxpayer	Any Person Related Within the Meaning of Section 482 to the Taxpayer
1	Reserved for future use							
2	Reserved for future use							
3	Purchase or creations of property rights for intangibles (patents, trademarks, etc.).							
4	Rents, royalties, and license fees							
5	a Compensation/consideration paid for services NOT excepted by Regs. section 1.59A-3(b)(3)(i)							
	b Compensation/consideration paid for services excepted by Regs. section 1.59A-3(b)(3)(i)							
6	Interest expense							
7	Payments for the purchase of tangible personal property							
8	Premiums and/or other considerations paid or accrued for insurance and reinsurance as covered by Regs. section 1.59A-3(b) (1)(iii)							

						(Check all applicable boxes in columns (c), (d), and (e) below)		
		(a-1)	(a-2)	(b-1)	(b-2)	(c)	(d)	(e)
	Type of Base Erosion Payments	Aggregate Group's Base Erosion Payments	Aggregate Group's Base Erosion Tax Benefits	Taxpayer's Base Erosion Payments	Taxpayer's Base Erosion Tax Benefits	Any 25% Owner of the Taxpayer	Person Related Under Sections 267(b) or 707(b)(1) to the Taxpayer or Any 25% Owner of the Taxpayer	Any Person Related Within the Meaning of Section 482 to the Taxpayer
9 a	Nonqualified derivative payments							
	Qualified derivative payments excepted by Regs. section 1.59A-6(b) \$							
10	Payments reducing gross receipts made to surrogate foreign corporation							
11	Other payments - specify							
12	Combine lines 3 through 11							
13	Base erosion tax benefits related to payments reported on lines 3							
	through 11, on which tax is imposed by section 871 or 881, with respect to which tax has been withheld under section 1441 or 1442 at 30% statutory withholding tax rate							
14	Portion of base erosion tax benefits reported on lines 3 through							
	11, on which tax is imposed by section 871 or 881, with respect							
	to which tax has been withheld under section 1441 or 1442 at							
	reduced withholding rate pursuant to income tax treaty. Multiply							
	ratio of percentage withheld divided by 30% times tax benefit.							
	See instructions							
15	Total base erosion tax benefits. Subtract the sum of line 13 and							
	line 14 from line 12. Enter the amount from column (a-2) in Part I,							
	line 2a. Enter the amount from column (h-2) in Part II, line 3h				1			

	(a) Description of item or property to which the deduction relates	(b) Date on which, or period in which, the waived deduction was paid or accrued	(c) Provision of Code and regulations, as applicable, that allows the deduction for which this election relates	(d) Line number on the controlled group member tax return where the deduction is reported	(e) Name of foreign related party that is or will be the recipient of the payment that generates the deduction	(f) Taxpayer Identification Number of foreign related party	(g) Country of organization of the foreign related party	(h) Amount of deduction claimed for the tax year with respect to the item or property	(i) Amount of deduction being waived for the ta year with respec to the item or property
1									
2									
3									
4									
5									
6									
7									
8									
9									
0									
1									
2									
3									

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Scl	hedule C Credits Reducing Regular Tax Liability in Computing Base Erosion Minimum Tax Amount	(BEM	TA)
P	art I Credits Allowed Against Regular Tax (see instructions)		
1	Total credits allowed in current year. See instructions	1	
2	Credits for increasing research activities from line 1c of all Parts III of Form 3800		
3	Total allowed credit for increasing research activities for current year. Enter the amount of research		
	credit reported in Form 3800, Part II, line 38. See instructions	3	
4	Enter smaller of Schedule C, Part II, line 11 or Part III, line 16	4	
5	Limitation of applicable section 38 credits. Multiply line 4 by 80% (0.80)	5	
6	Adjustments to allowed credits. Add lines 3 and 5	6	
7	Credits allowed against regular tax in computing BEMTA. Subtract line 6 from line 1. Enter here and		
	on Form 8991, line 4b	7	
P	art II Applicable Section 38 Credits		
	(Only complete Parts II and III if you have allowed applicable section 38 credits.)		
8	Low-income housing credit from lines 1d and 4d of all Parts III of Form 3800 8		
9	Renewable electricity production credit but only to extent of the renewable		
	electricity under section 45(a) from lines 1f and 4e of all Parts III of Form 3800 9		
10	Investment credit but only to extent of energy credit property under section 48		
	from line 4a of all Parts III of Form 3800		
11	Total another applicable decides to distant fear and another applicable distant		
		11	
P	art III BEMTA Determined Without Adjustment for Applicable Section 38 Credits		
12	Base erosion minimum tax (Form 8991, line 5c)	12	
		13	
14	Subtract Schedule C, Part I, line 3, from line 1	14	
15	Regular tax adjusted for credits that offset BEMTA. Subtract line 14 from line 13	15	

16 Base erosion minimum tax determined without adjustment for applicable section 38 credits. Subtract line 15 from line 12; if zero or less, enter -0-