

Form **990-T**

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

2018

Department of the Treasury
Internal Revenue Service

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30, 2019

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).

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

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) (03) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see Instructions.) THE OHIO UNIVERSITY FOUNDATION	D Employer identification number (Employees' trust, see Instructions.) 31-6402269
		Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 869	E Unrelated business activity code (See Instructions.) 453220
		City or town, state or province, country, and ZIP or foreign postal code ATHENS, OH 45701	
C Book value of all assets at end of year 566,584,572	F Group exemption number (See Instructions.) ▶		G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust

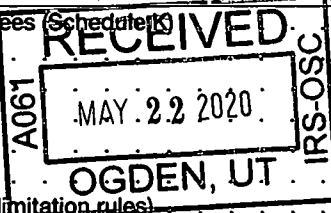
H Enter the number of the organization's unrelated trades or businesses. ▶ 2 Describe the only (or first) unrelated trade or business here ▶ MERCHANDISE SALES. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶ OHIO UNIVERSITY 12-9999999

J The books are in care of ▶ CANDICE CASTO Telephone number ▶ (740) 593-1901

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales	108,363			
b Less returns and allowances	0			
c Balance ▶		1c 108,363		
2 Cost of goods sold (Schedule A, line 7)		2 39,932		
3 Gross profit. Subtract line 2 from line 1c		3 68,431		68,431
4a Capital gain net income (attach Schedule D)		4a 0		0
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b 0		0
c Capital loss deduction for trusts		4c 0		0
5 Income (loss) from a partnership or an S corporation (attach statement)		5 0		0
6 Rent income (Schedule C)		6 0	0	0
7 Unrelated debt-financed income (Schedule E)		7 0	0	0
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8 0	0	0
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9 0	0	0
10 Exploited exempt activity income (Schedule I)		10 0	0	0
11 Advertising income (Schedule J)		11 0	0	0
12 Other income (See instructions; attach schedule)		12 0		0
13 Total. Combine lines 3 through 12		13 68,431	0	68,431

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)				
14 Compensation of officers, directors, and trustees (Schedule K)		14	0	
15 Salaries and wages		15	52,410	
16 Repairs and maintenance		16	0	
17 Bad debts		17	0	
18 Interest (attach schedule) (see instructions)		18	0	
19 Taxes and licenses		19	0	
20 Charitable contributions (See instructions for limitation rules)		20	0	
21 Depreciation (attach Form 4562)		21	0	
22 Less depreciation claimed on Schedule A and elsewhere on return		22a	0	22b 0
23 Depletion		23	0	
24 Contributions to deferred compensation plans		24	0	
25 Employee benefit programs		25	23,734	
26 Excess exempt expenses (Schedule I)		26	0	
27 Excess readership costs (Schedule J)		27	0	
28 Other deductions (attach schedule)		28	37,307	
29 Total deductions. Add lines 14 through 28		29	113,451	
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30	(45,020)	
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31	/1	
32 Unrelated business taxable income. Subtract line 31 from line 30		32	(45,020)	



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For Paperwork Reduction Act Notice, see instructions.

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Form **990-T** (2018)

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Part III Total Unrelated Business Taxable Income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	0
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	0
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	0
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	0

Part IV Tax Computation

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800 (see instructions)	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	0
46	Subtract line 45e from line 44	46	0
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	0
48	Total tax. Add lines 46 and 47 (see instructions)	48	0
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
50a	Payments: A 2017 overpayment credited to 2018	50a	6,500
b	2018 estimated tax payments	50b	0
c	Tax deposited with Form 8868	50c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other 0 Total	50g	0
51	Total payments. Add lines 50a through 50g	51	6,500
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	0
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	6,500
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax 6,500 Refunded	55	0

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		✓
58	Enter the amount of tax-exempt interest received or accrued during the tax year	\$	0

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: *Kim Scifres* Date: 4/22/20 Title: TREASURER

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name KIM SCIFRES	Preparer's signature <i>Kim Scifres</i>	Date 4/14/2020	Check <input type="checkbox"/> if self-employed	PTIN P00319397
	Firm's name CROWE LLP	Firm's EIN 35-0921680		Phone no. (502) 324-3996	
	Firm's address 9600 BROWNSBORO ROAD, SUITE 400, LOUISVILLE, KY 40241-1122				

Schedule A—Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1	104,505	6 Inventory at end of year	6	98,470
2 Purchases	2	33,897	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	39,932
3 Cost of labor	3	0			
4a Additional section 263A costs (attach schedule)	4a	0	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b Other costs (attach schedule)	4b	0			
5 Total. Add lines 1 through 4b	5	138,402			

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property		
(1)		
(2)		
(3)		
(4)		
2. Rent received or accrued		
(a) 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)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0	Total 0
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 0

Schedule E—Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			Enter here and on page 1, Part I, line 7, column (A). 0	Enter here and on page 1, Part I, line 7, column (B). 0
Total dividends-received deductions included in column 8 ▶			0	0

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	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)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	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)				
Totals			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
			0	0

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
		0		0

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.
		0	0			0

Schedule J—Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0	0	0		0

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶	0	0				0
Totals, Part II (lines 1-5) ▶	0	0				0

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			0

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

OMB No. 1545-0687

2018

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30, 20 19.

▶ 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).

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **THE OHIO UNIVERSITY FOUNDATION**
Employer identification number: **31-6402269**

Unrelated business activity code (see instructions) ▶ 523900
Describe the unrelated trade or business ▶ **PASSIVE INVESTMENTS**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales	0		
b	Less returns and allowances	0		
	c Balance ▶	1c		
2	Cost of goods sold (Schedule A, line 7)	0		
3	Gross profit. Subtract line 2 from line 1c	0		0
4a	Capital gain net income (attach Schedule D)	3,949		3,949
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	(275)		(275)
c	Capital loss deduction for trusts	0		0
5	Income (loss) from a partnership or an S corporation (attach statement)	(10,249)		(10,249)
6	Rent income (Schedule C)	0	0	0
7	Unrelated debt-financed income (Schedule E)	0	0	0
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	0	0	0
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	0	0	0
10	Exploited exempt activity income (Schedule I)	0	0	0
11	Advertising income (Schedule J)	0	0	0
12	Other income (See instructions; attach schedule)	0		0
13	Total. Combine lines 3 through 12	(6,575)	0	(6,575)

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)			14	0
15	Salaries and wages			15	0
16	Repairs and maintenance			16	0
17	Bad debts			17	0
18	Interest (attach schedule) (see instructions)			18	0
19	Taxes and licenses			19	577
20	Charitable contributions (See instructions for limitation rules)			20	0
21	Depreciation (attach Form 4562)	21	0		
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	0	22b	0
23	Depletion			23	0
24	Contributions to deferred compensation plans			24	0
25	Employee benefit programs			25	0
26	Excess exempt expenses (Schedule I)			26	0
27	Excess readership costs (Schedule J)			27	0
28	Other deductions (attach schedule)			28	1,833
29	Total deductions. Add lines 14 through 28			29	2,410
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13			30	(8,985)
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			31	0
32	Unrelated business taxable income. Subtract line 31 from line 30			32	(8,985)

Name of Partnership	EIN	UBI
AIM ACTIVITY		
(1) MESIROW FINANCIAL PRIVATE EQUITY PARTNERSHIP FUND IV, L.P.	20-5889427	4,483
(2) OAKTREE REAL ESTATE OPPORTUNITIES FUND IV, L.P.	39-2064299	645
(3) OCM REAL ESTATE OPPORTUNITIES FUND III, L.P.	01-0709496	-517
(4) OHIO INNOVATION FUND, LLC	81-0847118	-15,491
(5) PINEBRIDGE PRIVATE EQUITY PORTFOLIO II, LP	26-0011086	6
(6) SIGULER GUFF DISTRESSED OPPORTUNITIES FUND II, LP	20-2426239	587
(7) SIGULER GUFF DISTRESSED OPPORTUNITIES FUND III, LP	26-1412407	38
Total for Part I, Line 5		-10,249

Description	Amount
AIM ACTIVITY	
(1) ILLINOIS INCOME TAX	327
(2) NEW YORK INCOME TAX	250
Total	577

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2013	18,717,863	2,321			18,715,542	2018
2014	22,818,127	0			22,818,127	2019
2015	23,028,077	0			23,028,077	2020
2016	23,984,144	0			23,984,144	2021
2017	27,105,109	0			27,105,109	2022
2018	23,158,792	0			23,158,792	2023
Totals	138,812,112	2,321	0	0	138,809,791	

Description	Amount
ALUMNI ASSOCIATION BOBCAT STORE	
(1) ADVERTISING	1,091
(2) CREDIT CARD PROCESSING FEES	6,825
(3) POSTAGE	9,881
(4) PRINTING	1,917
(5) REVENUE SHARE TO PARTNERS	5,480
(6) SUPPLIES	6,419
(7) WEBSITE MAINTENANCE	3,119
(8) PROFESSIONAL FEES	2,575
Total	37,307
AIM ACTIVITY	
(9) HIGHSTAR CAPITAL FUND III, LP 205960829	25
(10) MESIROW FINANCIAL PRIVATE EQUITY PARTNERSHIP FUND IV, L.P. 205889427	1,808
Total	1,833

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining
ALUMNI ASSOCIATION BOBCAT STORE					
2018	5,020	0	0	0	5,020
AIM ACTIVITY					
2018	8,985	0	0	0	8,985

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2017	4,082		0	0	4,082	2037
Totals	4,082	0	0	0	4,082	

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

Social security number or taxpayer identification number
31-6402269

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 (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 Column (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.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	LONG-TERM GAIN/LOSS FROM INVESTMENTS			3,949				3,949
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			3,949	0		0	3,949

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.