Form <b>990-T</b>	Ex	cempt Organization Bu	siness Income of the section 6033(c)		ր	OMB No 1545-0047
		ndar year 2019 or other tax year beginning			20	୭ଲ10
Department of the Treasur	N Cr cuit	► Go to www.irs.gov/Form990T for				<u> </u>
Internal Revenue Service	Do	not enter SSN numbers on this form as it n	)(3).	Open to Public Inspection for 501(c)(3) Organizations Only		
A Check box if		Name of organization ( Check box if n	ame changed and see instruction	s)		oyer identification number oyees' trust, see instructions )
address chang		THE BOARD OF TRUSTEES	OF THE UNIVERSITY	OF	(Emple	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
B Exempt under section		ILLINOIS				000511
X 501( C 1/3 )	Print	Number, street, and room or suite no. If a P	O box, see instructions	-		000511
	<sup>)(e)</sup> Type	506 G NDTOUR OR 200 N	75 NO MO220			ated business activity code structions )
408A530	)(a) .	506 S WRIGHT ST, 209 H	<del></del>			
529(a)		City or town, state or province, country, and URBANA, IL 61801	I ZIP or foreign postal code		5300	00
C Book value of all asse at end of year		up exemption number (See instructions.			3300	
8596842000		eck organization type X 501(c) c	<del></del>	truct	401(a)	trust Other trust
	1 0 0 111	inization's unrelated trades or businesses				(or first) unrelated
			. If only one,	<del></del>	•	•
		e end of the previous sentence, complete				
trade or business					.,	·· <del>·</del>
		corporation a subsidiary in an affiliated	group or a parent-subsidiary of	ontrolled group?		Yes X No
= =		identifying number of the parent corpora	ition.			
J The books are in	care of ▶TI	ERRY THOMPSON CPA	Telephon	e number 🕨 21	7-244	-8359
Part I Unrelate	d Trade	or Business Income	(A) Income	(B) Expens	ses	(C) Net
1a Gross receipts	or sales					
<b>b</b> Less returns and al	lowances	c Balance ▶ 1c				
-		lule A, line 7) <u>2</u>	-			
		2 from line 1c				
		attach Schedule D) 4a	<u> </u>			
- · ·		Part II, line 17) (attach Form 4797) 4b				
		trusts				-
•		r an S corporation (attach statement)5	4,715,705.	4,381	821	333,884.
		6	4, 11, 103.	4,361	,021.	333,004.
		ncome (Schedule E)				
		ents from a controlled organization (Schedule F) 8	<del>  /</del>			<del></del>
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/			
		ncome (Schedule I)	1			
•	•	ctions, attach schedule)		-		
		ough 12		4,381	,821.	333,884.
Part I Deduct	ions Not	Taken Elsewhere (See instruct				
connec	ted with t	he unrelated business income.)	RECEIVED	,		•
		directors, and trustees (Schedule K).			. 14	
15 Salaries and w	ages		AV 6 3024 . Q			
16 Repairs and m	aintenance		. MAY (L. 9, 2021 )		. 16	
17 Bad debts		/		<b>.</b>	. 17.	
		(see instructions)		]	. 18	
19 Taxes and lice	nses	/ <del></del>			. 19	
		4562)				,
•		on Schedule A and elsewhere on return			21b	
	,	compensation plans				
		s				, ,
		Schedule I)				<del> </del>
		Schedule J)				28,914.
		schedule)				28,914.
		es 14 through 27.				304,970.
/		ole income before net operating loss			4	304,910.
/	-	ng loss arising in tax years beginning or				304,970.
		le income. Subtract line 30 from line 29 Notice, see instructions.	· · · · · · · · · · · · · · · · · · ·		31	Form <b>990-T</b> (2019)

Par	t lii	Total Unrelated Business Taxable In	come				
32	Total o	f unrelated business taxable income compute	ed from all unrelated trades or	businesses (see			
		ons)		1 1	32	747,	241.
33		s paid for disallowed fringes		l l	33	·	
34		ple contributions (see instructions for limitation rules)			34		
35		nrelated business taxable income before pre-			7 -	<del></del>	
33				7 _ 1	35	747,	241.
		the sum of lines 32 and 33			1		
36		on for net operating loss arising in tax		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		747,	2/1
		ons)		1	36		271.
37		unrelated business taxable income before specific		LAN 1	37		000
38	-	deduction (Generally \$1,000, but see line 38 instru			38	<u>_</u>	000.
39/	Unrelate	ed business taxable income. Subtract line 38	from line 37 If line 38 is greated	er than line 37,			_
_	enter the	e smaller of zero or line 37	<u> </u>	<u> </u>	39		0.
Par	t IV	Tax Computation					
40	Ørganiz	ations Taxable as Corporations. Multiply line 39 by	/ 21% (0.21) <b></b>	• ▶	40		
41	Trusts	Taxable at Trust Rates. See instruct	tions for tax computation. , Inc	come tax on			
	the amo	ount on line 39 from Tax rate schedule or	Schedule D (Form 1041)		41		
42	Proxy ta	ax. See instructions			42		
43	•	ive minimum tax (trusts only)			43	•	
. 1		Noncompliant Facility Income. See Instructions .		i			
45					45		
Par	_	dd lines 42, 43, and 44 to line 40 or 41, whichever Tax and Payments	applies	<u></u>	40		
			#seb Ferm 4446\				
		tax credit (corporations attach Form 1118, trusts at					
		redits (see instructions)					
		business credit. Attach Form 3800 (see instructions					
		or prior year minimum tax (attach Form 8801 or 882					
е		edits. Add lines 46a through 46d			_ T		
47		t line 46e from line 45			47		
48	Other tax	tes Check if from Form 4255 Form 8611	Form 8697 Form 8866 Other	er (attach schedule) .	48		
49		x. Add lines 47 and 48 (see instructions)			49		<u> </u>
50		et 965 tax liability paid from Form 965-A or Form 96			50		
51 a	Paymen	ts A 2018 overpayment credited to 2019		5,246.			
b	2019 es	timated tax payments					
С	Tax dep	osited with Form 8868, , , , ,					
d	Foreign	organizations Tax paid or withheld at source (see in	nstructions) 51d				
е	Backup	withholding (see instructions)	51e				
f	Credit fo	or small employer health insurance premiums (attac	h Form 8941) <b>51f</b>				
g		edits, adjustments, and payments Form 2439					
Ŭ		orm 4136 Other	Total ▶ 51g				
52		ayments. Add lines 51a through 51g			52	5,	246.
53		ed tax penalty (see instructions). Check if Form 222			58		
54		. If line 52 is less than the total of lines 49, 50, and			5,4		
55		yment. If line 52 is larger than the total of lines 49,		111	55	5,	246.
5.6		a amount of line 55 you want Credited to 2020 estimate		Refunded ▶	56		
Pai		Statements Regarding Certain Activ			_ <del></del>	<del></del>	
57	_	time during the 2019 calendar year, did the				thority Yes	No
31		financial account (bank, securities, or other)					<del>-</del>
		•					
		Form 114, Report of Foreign Bank and Fin	ancial Accounts it fes," enter tr	ie riaine of the	ioreign C	ountry   X	
		AT, IN, JP, SG, ES	<del> </del>		<del></del>		$\frac{1}{x}$
58		the tax year, did the organization receive a distribut		ransteror to, a forei	gn trust?	· · · · ├──	+^-
	-	see instructions for other forms the organization ma					
<u>59</u>		e amount of tax-exempt interest received or accrue		totomosto	not of Time	nourladas sad :	lugf.
	l tn.	nder penalties of penury. I declare that I have examined this rise, correct, and complete Declaration of preparer (other than taxpaye	etum, including accompanying schedules and s er) is based on all information of which preparer ha	tatements, and to the b s any knowledge	est of my ki	towleage and be	лют, It IS
Sig	n	0. 0		No.	y the IRS	discuss this	retum
Her		M. K.	5/10/2021 VP. CFO, Con	uptroller wil	h the pre	parer shown	below
	Sı	gnature of officer	Date Title	(see	e instructions)		No
D-:		Print/Type preparer's name Pre	eparer's signature Date	Check	ς∐ ıf │	PTIN	
Paic		TARA D'AGOSTINO	1- Dana 05/	07/2021 self-e	mployed _	P0124548	
	oarer	Firm's name ► KPMG LLP				3-5565207	
use	Only	Firm's address ▶ 200 EAST RANDOLPH STRE	ET, STE 5500, CHICAGO, II	60601 Phone	no 312-	-665-1000	)

Form **990-T** (2019)

Enter here and on page 1,

Part I, line 7, column (B).

Enter here and on page 1,

Part I, line 7, column (A).

Total dividends-received deductions included in column 8 . . . . .

37-6000511 Page 4

Schedule F - Interest, Ann	uities, Royaltie:	s, and R	ents I	From Contro	lled O	rganiza	tions (se	e instructi	ons)	
				Controlled Org			•	;		
Name of controlled organization	2. Employer identification numb	eı ı		related income ee instructions)	l	of specifie nts made	d included	f column 4 ti in the contro ion's gross in	olling	6. Deductions directly connected with income in column 5
(1)			_					<u>.</u>		
(2)						·				
(3)										
(4)			•				V 11 1			
Nonexempt Controlled Organiz	zations							1 -		
7. Taxable Income	8. Net unrelated in (loss) (see instruc			<ol><li>Total of specified payments made</li></ol>		ınclu	art of column ded in the co zation's gros	ntrolling		Deductions directly     nected with income in     column 10
(1)					•					
(2)							-			
(3)										
(4)										
Totals					▶ ') Orga	Enter Part	columns 5 a here and on 1, line 8, colu n (see ins	page 1, mn (A)	Ent	dd columns 6 and 11 ter here and on page 1, irt I, line 8, column (B)
1. Description of income	2. Amount of			3. Deduc directly cor	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 ▶ Schedule I-Exploited Exe	Enter here and Part I, line 9, c	olumn (A)	Other			come	see instru	ictions)		Enter here and on page 1, Part I, line 9, column (B)
1. Description of exploited activity	2. Gross unrelated business income from trade or business	connect	ectly ted with stion of lated	If a gain, co	ed tradé (column umn 3) ompute	from a	ss income ctivity that unrelated ss income	6. Expe attributa colum	able to	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 her page 1, line 10,	, Part I,	•			_			Enter here and on page 1, Part II, line 25
Schedule J- Advertising In	ncome (see instr	uctions)								<u> </u>
Part I Income From Per			Cons	olidated Bas	sis					
Name of periodical .	2. Gross advertising income	_	ırect	4. Advert	tising is) (col ol 3) If mpute		rculation come	6. Read cos		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))		-								Form 990-T (2019)

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 1/2 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 ▶						
:	Enter here and on page 1, Part I, line 11, col. (A)	Enter here and on page 1, Part I, line 11, col (B)		~ ~~		Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5) ▶						

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

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

Form 990-T (2019)

# Form 4562

# **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2019

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service Name(s) shown on return

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

Identifying number 37–6000511

Form 4562 (2019)

Business or activity to which this form relates RENTAL ACTIVITIES **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- if mamed filing separately, see instructions 6 (a) Description of property Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . . . 8 9 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . . . . . . . . Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 . . . . Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part | Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 15 Other depreciation (including ACRS) Part | | MACRS Depreciation (Don't include listed property, See instructions.) Section A 427,953 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (g) Depreciation deduction (f) Method (e) Convention (a) Classification of property placed in (business/investment use only - see instructions) service 3-year property 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/I 25 yrs g 25-year property S/L 27.5 yrs MM h Residential rental мм S/L 27 5 yrs. property 39 yrs. MM S/L i Nonresidential real мм S/L property Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L c 30-year 30 yrs MM S/L ММ S/L d 40-year 40 yrs Part IV Summary (See instructions.) Listed property. Enter amount from line 28 . . . . . . . . . . . . . . . . 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 427,953 here and on the appropriate lines of your return. Partnerships and S corporations - see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs...........

For Paperwork Reduction Act Notice, see separate instructions.

Form	4562 (2	2019)											3	/-6000	1511	Page 2
	rt V	Listed Pro	operty (Include ent, recreation, o	e automo	biles, ent.)	certai	n oth	ner ve	hicles	s, certa	in air	craft,	and	proper	rty us	
		Note: For a 24b, column	ny vehicle for wh s (a) through (c) o	hich you ar of Section A,	e using	g the si Section	tandar B, and	d mileag	ge rat Cıfa	te or ded	ducting	lease	expens	e, comp	olete <b>o</b> r	nly 24a
		Section A -	Depreciation and	d Other Info	rmatic	n (Cauti	ion: Se	e the in	struct	ions for li	mits for	passe	enger au	utomobil	es.)	
24a	Do you		e to support the bu					Yes	$\overline{}$	24b If "	_	_			Yes	No
		(a)	(b)	(c)				(e)		<b>(f)</b>	1	g)			T	(i)
•	Type of p	property (list cles first)	Date placed in service	Business/ investment us percentage	Se Cost	( <b>d</b> ) t or other b		asis for depr usiness/invi use only	estment	Recovery period	Met	hod/ ention	Depr	eciation luction	Elected :	section 179 ost
25	Specia	al denreciation	on allowance for	<u> </u>	ted n	roperty	nlaced	l in san	vice d	uring	l		<del> </del>		1	
	the ta	x vear and us	ed more than 50%	% in a qualifi	ed bus	iness us	e See	instruct	vice u tions	uring		. 25				
26			e than 50% in a g				0. 000			<u></u>		. 23	.1		J	
		, 2004	1	·	%					_	Ι		<del>1</del>		$\overline{}$	
	<del></del> -			+	%					-			<del>                                     </del>		+	_
				+	%		_			-	<del>                                     </del>		╁──		<del>                                     </del>	_
27	Drope	rty used 50%	or less in a quali							<u>L</u>	L		1		<u> </u>	
	Tiope	ity used 50 /	or less in a quair	<del></del>		<del></del>				Τ-	0//					
					%			_			S/L -		1		4	
				<del>-</del>	%	_	_				S/L -				4	
				<u> </u>	<u>%</u>	_					S/L -	<del></del>	1		4	
			lumn (h), lines 25												ļ	
29	Add a	mounts in co	lumn (i), line 26. l								<del></del>			. 29	Ь	
Com	nlete ti	his section fo	r vehicles used by					on Use			ar" or r	elated i	nercon	If you r	rouded	vehicle
			swer the questions i												TOVIdea	vernoles
<u> </u>		<u> </u>	·.			<u>,</u> (a)		(b)	Τ,	(c)		d)	T	(e)	т (	<u>f</u> )
						nicle 1		hicle 2	V	ehicle 3		icle 4		nicle 5		icle 6
			estment miles driv													
			ude commuting n		-				<u> </u>						<del> </del>	
			iles driven during						ļ				<del>- </del>		ļ	
32	Total	•	ersonal (nonco	٠,					İ							
															<u> </u>	
			n during the $y$													
	lines 3	0 through 32	2											_,		
34	Was	the vehicle	available for	personal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use du	iring off-duty	hours?,		***********				ļ						<u> </u>	<u></u>
35	Was t	the vehicle	used primarily by	y a more		1										
	than 5	% owner or r	elated person?					1	ļ							
36	ls and	other vehicl	e available for	personal												
	use?.	<u> </u>	<u> </u>													l
		Sec	ction C - Questi	ons for Em	plove	rs Who	Prov	ide Vel	nicles	for Use	by Th	eir En	evolar	es		
Ans	wer the		s to determine if												who a	ren't
mor	e than	5% owners o	r related persons.	. Śee instruc	tions.			3					-,	, <b>,</b>		
			a written policy			ohibite	عاد الد	reanal II	so of	vehicles	inclus	lina co	mmutur	a by	Yes	No
			·····								, includ	ing co	mmuu	ig, by		
38	Do yo	u maintain a	written policy	statement t	hat pr	ohibits	persor	nal use	of ve	hicles. e	 xcept c	ommu	tina. by	v vour		
			e instructions for		•									, ,		
			of vehicles by en					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		01 170 01						
			ore than five ve				obta	ain infor	matio	n from	 VOUR er	nolove	es abo	ut the	-	
			and retain the inf				,				,		oo abo	4		
			quirements conce				demo	netratio	 n usoʻ	See inc	ruction		• • • •			
•••	Note:	If your answ	er to 37, 38, 39, 4	10 or 41 is '	"Yes " (	don't co	molete	Section	n R for	the cove	red vet	o ucles			<u> </u>	l
		Amortizati		10, 01 11 10	100,	30111100	pioto	- 0001101		1110 0010	704 701	110100.				
ıaı		AIIIVI IIZALI	<u> </u>			T	-			_		1-	, 1			
		(a)		(b)			(c)	)		(d)		(e Amorti			(f)	
		Description of	costs	Date amort begins		Am		e amount	ŀ	Code se	ction	perio	od or	Amortiza	ation for th	ns year
42	Λm	ration of ac-	to that harms do	<u> </u>		<u> </u>	t					perce	ntage			
42	Amorti	ization of cos	ts that begins dur	ing your 20	19 tax	year (se	e instr	uctions)	:				Т			
			<u> </u>	ļ		ļ			$\dashv$							
				<u> </u>		1							$\longrightarrow$			
43	Amortı —	zation of cos	ts that began bef	ore your 20	19 tax	year .							43			
44	rotal.	Add amount	s in column (f). S	ee the instru	uctions	for whe	re to r	eport .					44			_
JSA														For	m 456	<b>2</b> (2019)

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

ADMINISTRATIVE SUPPORT

28,914.

PART II - LINE 27 - OTHER DEDUCTIONS

28,914.

RENT INCOME FROM REAL PROPERTY AND PERSONAL PROPERTY LEASED WITH REAL PROPERTY Z ı SCHEDULE C

	C		ATTACHMENT 2
1. DESCRIPTION OF PROPERTY	RENT RECEIVED OR ACCRUED A. FROM PERSONAL PROPERTY PROPERTY	OR ACCRUED B. FROM REAL AND PERSONAL PROPERTY	3. DEDUCTIONS DIRECTLY CONNECTED
UIUC DIA MEMORIAL STADIUM SPECIAL EVENTS	50	;	
UIUC TECHNOLOGY SERVICES RACK SPACE AND FI	FIBER SEGMENT RENTAL	60,511.	. 90,110.
UIC ATHLETIC FACILITY RENTAL		92,528.	59,354.
TITIL WITH TOWER		718,747.	895,761.
OTOC MEDIT TOWNS		75,855.	11,157.
THE CAMPINED TAMES THE DESIGNATION OF THE PRINCE OF THE PR		221,440.	216,220.
OIOC NOSA COMFOIER IIME KENIAL		3,546,624.	3,109,219.
TOTALS		4,715,705.	4,381,821.
TOTAL INCOME (COL. 2A + COL. 2B)		4,715,705.	•

V 19-8.3F

TITIIO	DTA	MUNACDIAI	CHADTIM	CDECTAI	EMENIMO
UIUC	DIA	MEMORIAL	STADIUM	SEPUTAL	C A C IN T O

DEPRECIATION EMPLOYEE BENEFITS INTEREST EXPENSE OTHER OPERATING EXPENSES PAYROLL UTILITIES	11,892. 9,034. 7,088. 32. 59,724. 2,340.
TOTAL	90,110.

UIUC TECHNOLOGY SERVICES RACK SPACE	AND	FIBER	SEGMENT	RENTAL
-------------------------------------	-----	-------	---------	--------

OTHER OPERATING EXPENSES PAYROLL REPAIRS & MAINTENANCE SUPPLIES UTILITIES	16,336. 23,285. 4,942. 706. 14,085.
TOTAL	59,354.

HTC	ATHLETIC	FACILITY	RENTAL.
$O \perp C$		T 110 T D T T T	T/TT1 T13T

ADMINISTRATIVE OVERHEAD DEPRECIATION EMPLOYEE BENEFITS OTHER OPERATING EXPENSES PAYROLL REPAIRS & MAINTENANCE SUPPLIES TELEPHONE UTILITIES		9,830. 49,221. 33,412. 15,225. 179,946. 281,859. 65,228. 5,173. 255,867.
TOTAL	•	895,761.

	ATTACHMENT 6
SCHEDULE C - RENT INCOME DEDUCTIONS	·
UIUC WILL TOWER	
DEPRECIATION PAYROLL PROFESSIONAL AND ARTISTIC SERVICES UTILITIES	7,126. 2,489. 701. 841.
TOTAL	11,157.

ATTACHMENT	7
------------	---

UIC CAMPUS FILMING	
EMPLOYEE BENEFITS EQUIPMENT RENTAL OTHER OPERATING EXPENSES PAYROLL PROFESSIONAL AND ARTISTIC SERVICES REPAIRS & MAINTENANCE SUPPLIES	11,960. 80,654. 64,859. 35,669. 11,500. 10,821. 757.
TOTAL	216,220.

UTUC	NCSA	COMPUTER	TIME	RENTAL
$\circ$				1/11/1/11

DEPRECIATION EMPLOYEE BENEFITS EQUIPMENT RENTAL INSURANCE OTHER OPERATING EXPENSES PAYROLL REPAIRS & MAINTENANCE SUPPLIES	359,713. 72,475. 452,714. 3,003. 150,442. 1,863,680. 34,384. 84,376.
UTILITIES	88,432.
TOTAL	3,109,219.

# SCHEDULE M (Form 990-T)

#### Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury
Internal Revenue Service
Name of the organization

For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending  $\frac{06/3}{}$ 

ding \_\_\_\_\_ , 20 \_\_\_

▶ 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).

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

Employer identification number

37-6000511

Unrelated Business Activity Code (see instructions) ▶ 710000

Describe the unrelated trade or business ▶ RECREATIONAL CENTERS

Pai	t I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net	
1a	Gross receipts or sales 253,009.				
ь	Less returns and allowances c Balance	1c	253,009.		
2	Cost of goods sold (Schedule A, line 7)	2			<u> </u>
3	Gross profit Subtract line 2 from line 1c	3	253,009.		253,009.
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
C	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach			·	
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9		•	
10	Exploited exempt activity income (Schedule I)	l I			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	253,009.		253,009.

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	174,311.
16	Repairs and maintenance	l I	26,122.
17	Bad debts		533.
18	Interest (attach schedule) (see instructions)		206,144.
19	Taxes and licenses	19	512.
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	108,722.
22	Depletion	22	
23	Contributions to deferred compensation plans	23	<del>-</del> -
24	Employee benefit programs		37,982.
25	Excess exempt expenses (Schedule I)		
26	Excess readership costs (Schedule J)		t .
27	Other deductions (attach schedule)		159,186.
28	Total deductions. Add lines 14 through 27		713,512.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-460,503.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29		-460,503.

For Paperwork Reduction Act Notice, see instructions.

# Form 4562

# **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Attachment Sequence No

OMB No 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Identifying number

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS 37-6000511 Business or activity to which this form relates RECREATIONAL CENTERS Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions). 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2, If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- if marned filing separately, see instructions 6 (a) Description of property (b) Cost (business use only) Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service Property subject to section 168(f)(1) election . . . . . . . . . 15 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) 108,722 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction placed in (business/investment use period only - see instructions) 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L мм S/L 27.5 yrs. h Residential rental MM S/L property 27.5 yrs. ММ 39 yrs S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 

For Paperwork Reduction Act Notice, see separate instructions.

Listed property Enter amount from line 28 . . . . . . . .

Part IV Summary (See instructions.

Form 4562 (2019)

108,722

S/L

S/L

S/L

S/L

21

MM

ММ

20a Class life

b 12-year

c 30-year

d 40-year

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

12 yrs.

30 yrs.

C	AFED "	2010)													37	-6000	511	Page 2
_	n 4562 (	Listed				automot r amusem		certai	n oth	er ve	hicles	s, certa	ain air	craft,	and	proper	ty us	ed fo
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24-	<u> </u>					Other Info				-							1 1	l Na
248	Do you		laence		-	(c)	lent use	ciaimeu	<u>'                                    </u>	'es (e)	No	24b If "	T		1		Yes	No
		(a) property (lis cles first)	st	Date	(b) e placed service	Business/ investment us percentage	(d) use Cost or other basis (business/investr		estment	(f) Recovery period	Met	<b>g)</b> hod/ ention	Depre	h) eciation uction	Elected s	(i) section 179 ost		
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						a sole prop											rovided	vehicles
to y	our emp	ployees, fu	rst ansv	ver the	questions ir	Section C to	see if	you mee	t an exc	eption to	comp	leting this	section	for thos	e vehicle:	s.		
							,	(a) nicle 1		(b) nicle 2	,	(c)		d) Icle 4		(e) iicle 5		(f) icle 6
30					miles drivenmuting m	en during iles)	V 61		Vei		Ľ	Vehicle 3 Vehicle			Veii		, venicle o	
31	Total	commuti	ing mil	es driv	en during	the year .			ļ		ļ				<u> </u>			
32	Total miles	other driven .	•	rsonal	(nonco	mmuting)												
33	Total	miles	driven	durin	ig the y													
34			-			personal	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
	use d	uring off-	duty h	ours?.						ļ	ļ		ļ		-	<u> </u>	<u> </u>	1
35	Was	the vehi	icle u	sed pr	imarily by	a more									1			
				•				-	<u> </u>	-	-		ļ		+	<del> </del>	+	
36						personal												
_	use:					ons for Em	nlove	rs Wh	Prov	ide Vel	hicles	s for Us	by Th	eir Fr	nplove	es	<u> </u>	
			stions	to det	termine if	you meet a See instruc	an exc										who a	ren't
						statement t		ohibits	all nei	eonal i	ise of	vehicles	inclu	dina c	nmutir	na hv	Yes	No
31	your e	employee	s?	WIIII	ii policy s			Official	all per			vernoice						
38	Do y	ou maint	tain a	writte	n policy s	statement t	hat pr	ohibits	perso	nal use	of ve	ehicles, e	except	commi	iting, by	y your		
	emplo	yees? S	ee the	ınstru	ctions for	vehicles use	ed by c	orporat	e office	ers, dire	ctors,	or 1% or	more o	wners				ļ <u> </u>
39	Do yo	ou treat a	II use	of vehi	cles by em	iployees as hicles to y	person	al use?										<u> </u>
40																		
44						ormation re						2 500 100						-
41						erning qualif 40, or 41 is												<u> </u>
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1 6	VII	AIIIOIL	izalic	//				_						1	e)			_
		Descri	(a) ption of	costs		(b) Date amore begin		Ar	(c) nortizabl	e amount		(d) Code s		Amor	ization od or entage	Amortiz	(f) ation for t	hıs year
42	Amor	tization o	of cost	s that b	egins dur	ing your 20	19 tax	year (s	ee instr	uctions	): 	<del></del>						
_																		
43	Amor	tization c	of cost	s that t	pegan bef	ore your 20	19 tax	year							43			
44	Total.	. Add an	nounts	in colu	umn (f). So	ee the instr	uctions	tor wh	ere to r	eport .					44			

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

28,167.
1,005.
3,359.
10,755.
9.
12,640.
1,509.
92,104.
9,638.

PART II - LINE 27 - OTHER DEDUCTIONS

159,186.

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

#### Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$ , 2019, and ending  $\frac{06/30}{}$ , 20  $\frac{20}{}$ 

► 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

Name of the organization

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

Employer identification number

37-6000511

Unrelated Business Activity Code (see instructions) ► 720000

Describe the unrelated trade or business ► HOTEL AND CONFERENCE CENTER

Par	t I Unrelated Trade or Business Income	•		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				· ·	
b	Less returns and allowances	Balance 🕨	1c			
2	Cost of goods sold (Schedule A, line 7)		2			}
3	Gross profit Subtract line 2 from line 1c		3			
4a	Capital gain net income (attach Schedule D)		4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form	4797)	4b			
c	Capital loss deduction for trusts		4c			
5	Income (loss) from a partnership or an S corporation	n (attach				
	statement)		5			
6	Rent income (Schedule C)		6			
7	Unrelated debt-financed income (Schedule E)		7			
8	Interest, annuities, royalties, and rents from a control	olled			· · -	,
	organization (Schedule F)		8			
9	Investment income of a section 501(c)(7), (9), or (1)	7)				
	organization (Schedule G)		9			
10	Exploited exempt activity income (Schedule I)		10			
11	Advertising income (Schedule J)		11			
12	Other income (See instructions, attach schedule)	TCH. 11	12	1,285,524.		1,285,524.
13	Total. Combine lines 3 through 12	<u> </u>	13	1,285,524.		1,285,524.

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages		594,694.
16	Repairs and maintenance		6,223.
17	Bad debts	4	-3,397.
18	Interest (attach schedule) (see instructions)		54,526.
19	Taxes and licenses		1,390.
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	42,972.
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	194,723.
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	771,465.
28	Total deductions. Add lines 14 through 27	28	1,662,596.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-377,072.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-377,072.

For Paperwork Reduction Act Notice, see instructions.

# 4562

# Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

Attachment Sequence No.

Identifying number

Department of the Treasury Internal Revenue Service

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

37-6000511 Business or activity to which this form relates HOTEL AND CONFERENCE CENTER **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 ff zero or less, enter -0- if mamed filing separately, see instructions 6 (a) Description of property Listed property. Enter the amount from line 29. Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 · See instructions 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . . . . Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 . . . . Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part | Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 15 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A 42,972 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property placed in (business/investment use service only - see instructions) 3-year property 5-year property c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs g 25-year property 27 5 yrs MM S/L h Residential rental мм S/L 27 5 yrs property S/L 39 yrs. MM i Nonresidential real мм property Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs c 30-year 30 yrs MM S/L мм S/L 40 vrs d 40-year Part IV Summary (See instructions.) 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return Partnerships and S corporations - see instructions

42.972

For	m 4562 (20	19)											3 /	7-6000	)511	Page 2
	art V L	isted Pr	operty (Include	automo	biles, ent.)	certai	n ot	her ve	hicles	s, certa	ain ai	rcraft,	and	prope	rty us	ed fo
	N	lote: For a 4b, column	ny vehicle for whas (a) through (c) o	nich you ar of Section A	e using	g the s Section	tandar B, and	d mileag Section	ge rat Cifa	e or dec pplicable	ducting	lease	expense	e, com <sub>l</sub>	olete o	1ly 24a
		Section A -	Depreciation and	Other Info	rmatio	n (Caut	ion: Se	e the in	structi	ons for I	imits fo	r passe	enger au	tomobil	es.)	
248	a Do you l	nave evidend	e to support the bu	siness/ınvestr	nent use	claimed	٦	Yes	No	24b If "	Yes," ıs	the evide	ence writt	ten?	Yes	No
	(a Type of provehicle	operty (list	(b) Date placed in service	(c) Business/ investment u	**	(d) or other b		(e) asis for depr ousiness/inve	estment	(f) Recovery period	Me	(g) thod/ vention	Depre	(h) eciation uction	Elected	(i) section 179
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	-				%						S/L -				1 '	
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28	Add am	ounts in co	lumn (h), lines 25	through 27	. Enter	here a	nd on I	ine 21, p	age 1			. 28		•		٠.
<u>29</u>	Add am	ounts in co	lumn (i), line 26. E	Enter here a	nd on	line 7, p	age 1	· · · ·			<u>.,</u>			. 29		
				Section	on B -	Inform	ation	on Use	of Ve	hicles						
Con	nplete this	s section fo	r vehicles used by	a sole prop	orietor,	partner,	or oth	er "more	than	5% own	er," or r	related	person.	If you p	rovided	vehicle
to y	our emplo	yees, first an	swer the questions i	n Section C to			t an exc	eption to	compl	eting this	section	for those	e vehicle	s		
						(a) ucle 1		(b) hicle 2	\ \/ <sub>6</sub>	(c) shicle 3		( <b>d)</b> ncle 4		( <b>e)</b> iicle 5		(f) icle 6
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moi	re than 5°	% owners o	or related persons.	See instruc	tions.	ори				2		0 4004	<b>D</b> , 0,,,,	pioyeco	u	
			a written policy :			ohibits	all per	rsonal u	se of	vehicles	includ	dina ca	mmutin	ia by	Yes	No
•	your em	ployees?												.g, 5y		
38	Do you	maıntain	a written policy	statement t	hat pr	ohibits	perso	nal use	of ve	hicles, e	xcept	commu	ting, by	your		
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			e of vehicles by en													
40	-		ore than five ve	•		•	s, obta	ain infor	matio	n from	your er	mploye	es abou	ut the		ĺ
			and retain the inf													
41	Do you i	meet the re	quirements conce	erning qualif	ied aut	omobile	demo	onstratio	n use?	See ins	truction	s			<u> </u>	<u> </u>
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42	Amortiza	ation of cos	ts that begins dur	1		vear (se	e inctr	uctions				percei	nage			
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43	Amortiza	ation of cos	ts that began bef	ore vour 20	19 tax v	vear	-					L	43			
44	Total. A	dd amount	s in column (f). So	ee the instri	uctions	for whe	re to r	eport	• • • •				44			
ISA			- \./					•			<u> </u>	<del></del>	<u></u>	Fo	rm <b>456</b>	<b>2</b> (2019

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

ATTACHMENT 11

SCHEDULE M - OTHER INCOME

UIUC ILLINI UNION HOTEL
UIUC ALLERTON RETREAT CENTER

608,948. 676,576.

TOTAL

1,285,524.

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

ADMINISTRATIVE OVERHEAD	13,124.
CONFERENCE ROOMS AND MEALS	307,094.
COPYING PHOTO AND PRINTING	1,091.
EQUIPMENT RENTAL	20,702.
MAILING SERVICE	194.
OTHER OPERATING EXPENSES	256 <b>,</b> 697.
PROFESSIONAL AND ARTISTIC SERVICES	3,098.
SUPPLIES	52,959.
TELEPHONE	11,623.
UTILITIES	95,245.
ADMINISTRATIVE SUPPORT	9,638.

PART II - LINE 27 - OTHER DEDUCTIONS

771,465.

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

### **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending

▶ 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

Name of the organization

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

**Employer identification number** 37-6000511

Unrelated Business Activity Code (see instructions) ▶ 450000

Describe the unrelated trade or business ▶ BOOKSTORE

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances C Balance	• <b>▶</b> 1c			
2	Cost of goods sold (Schedule A, line 7)	. 2			1
3	Gross profit Subtract line 2 from line 1c	. 3			
4 a	Capital gain net income (attach Schedule D)	. 4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797).	. 4b	·		
c	Capital loss deduction for trusts	. 4c			
5	Income (loss) from a partnership or an S corporation (attac	h 🗌			
	statement)	. 5			
6	Rent income (Schedule C)				
7	Unrelated debt-financed income (Schedule E)	. 7		· - · · · · · · · · · · · · · · · · · ·	
8	Interest, annuities, royalties, and rents from a controlled			·	
	organization (Schedule F)	. 8			
9	Investment income of a section 501(c)(7), (9), or (17)		·	<del>.</del>	
	organization (Schedule G)	. 9			
10	Exploited exempt activity income (Schedule I)	. 10			
11	Advertising income (Schedule J)	. 11			
12	Other income (See instructions, attach schedule) ATCH.	4 12	4,148.		4,148.
13	Total. Combine lines 3 through 12	. 13	4,148.		4,148.

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages		1,951.
16	Repairs and maintenance	1	3.
17	Bad debts		
18	Interest (attach schedule) (see instructions)		573.
19	Taxes and licenses		
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	107.
22	Depletion	22	
23	Contributions to deferred compensation plans		
24	Employee benefit programs	24	370.
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	9,473.
28	Total deductions. Add lines 14 through 27	28	12,477.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-8,329.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	-8,329.

For Paperwork Reduction Act Notice, see instructions.

# Form 4562

Department of the Treasury

# **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2019

Attachment Sequence No 179

Identifying number

Internal Revenue Service (99)
Name(s) shown on return

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS
Business or activity to which this form relates

37-6000511

В	OOKSTORE							
Pa	rt I Election To Expense C Note: If you have any lis				olete Part I.			
1	Maximum amount (see instructions).						1	
2	Total cost of section 179 property pl	aced in service (see in	structions)			[	2	
3	Threshold cost of section 179 prope	rty before reduction i	n limitation (see instruc	tions)		L	3	
<b>4</b> <b>5</b>	Reduction in limitation Subtract line Dollar limitation for tax year Subtract line 4 fror separately, see instructions	3 from line 2. If zero on line 1 if zero or less, enter	or less, enter -0- -0- If married filing				5	
6	(a) Description			(business use on				
								,
7	Listed property Enter the amount fro	om line 29						
8	Total elected cost of section 179 pro	perty. Add amounts i	n column (c), lines 6 ar	nd 7			8	
9	Tentative deduction Enter the smaller	er of line 5 or line 8 .				L	9	
10	Carryover of disallowed deduction fr						10	
11	Business income limitation Enter th						11	
12	Section 179 expense deduction Add	l lines 9 and 10, but o	don't enter more than l	line 11 <u></u>	<del></del>	'	12	
13	Carryover of disallowed deduction to			<u>,</u> ▶ 1:	3			
Note	e: Don't use Part II or Part III below fo							
Рa	rt II Special Depreciation A	Mowance and Ot	her Depreciation	(Don't includ	e listed proper	ty. See i	instruction	ons.)
14	Special depreciation allowance for	or qualified property	y (other than listed	d property) p	laced in servi	ce		
	during the tax year See instructions					· · ·  _	14	
	Property subject to section 168(f)(1)		15					
16	Other depreciation (including ACRS)		<del> </del>		<u> </u>		16	
Рa	rt III MACRS Depreciation (	Don't include listed	· · · · · · · · · · · · · · · · · · ·	uctions.)				
			Section A				T	107
17 18	MACRS deductions for assets place If you are electing to group any					$\cdots \vdash$	17	107.
	asset accounts, check here	· · · · · · · · · · · · · · · · · · ·	-					
			During 2019 Tax Y			reciatio	n Syster	m
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment uponly - see instructions	se neriod	(e) Convention	(f) Meth	od (g)	Depreciation deduction
19a	3-year property							
b	5-year property							
С	7-year property							
d	10-year property							
е	15-year property							
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs	ММ	S/L		
	property			27.5 yrs	мм	S/L	-	
i	Nonresidential real			39 yrs	MM	S/L	-+	
	property				MM	S/L		
	Section C - Assets F	Placed in Service D	Ouring 2019 Tax Ye	ar Using the	Alternative De		ion Syst	:em
	Class life				ļ	S/L		
	o 12-year			12 yrs.		S/L		
	: 30-year	<u> </u>		30 yrs.	MM	S/L		
_	40-year	<u>.L</u>		40 yrs.	ММ	S/L		
Рa	rt IV Summary (See instruct	ions.)				Т		
21	Listed property. Enter amount from li					''''⊢	21	
22 23	Total. Add amounts from line 12, here and on the appropriate lines of y For assets shown above and plac portion of the basis attributable to se	our return Partnersh	ps and S corporations	- see instruction	ons		22	107
Ear	Paperwork Reduction Act Notice, se			4				Form <b>4562</b> (2019)

For	m 4562 (2019)												37	7-6000	511	Page
_		perty (Include	automob	oiles.	certair	n oth	er v	ehicl	es.	certa	in air	craft.	and	proper	tv us	Page . ed fo
	entertainme	ent, recreation, o	r amuseme	ent.)										•	•	
	Note: For a	ny vehicle for wh	ich you are	using	g the st	andard	mile	age r	ate	or ded	ducting	lease	expens	e, comp	olete o	nly 24a
_		s (a) through (c) of Depreciation and											ngor o	ıtamahil		<del></del>
24:	a Do you have evidence						es	No		4b If "					Yes	No
_	(a)	(b)	(c)	T		Τ.	(e)		_ <u>_</u>	(f)	1	g)		(h)	Т	(i)
	Type of property (list	Date placed	Business/	Cost	(d) or other ba		sis for de			Recovery	1	:hod/		eciation	1	('') section 17:
	vehicles first)	in service	investment us percentage	e Cosi	or other ba	1515   (bu	ısıness/ir use oı		nt	period		ention		uction	(	cost
25	Special depreciation	on allowance for	qualified lis	ted pr	operty	olaced	in se	rvice	du	rina						
	the tax year and us	ed more than 50%	in a qualifie	ed bus	iness us	e. See	instru	ctions	s.			. 25				
26	Property used mor	e than 50% in a q	ualified busin	ess us	se								•			
_			,	%												
				%												
				%							<u> </u>					
27	Property used 50%	or less in a qualif		<del></del>									,			
_	_			%					$\perp$		S/L -		. <del> </del>		1	
_				%					-	-	S/L -		<u> </u>		4	
	A -1 -1			%					ㅗ		S/L -	<del></del>			-	
28 29														1		
25	Add amounts in col	iumm (1), lime 20. E									• • • •	• • • •		.   29	<u> </u>	
Cor	mplete this section for	r vehicles used by			Informa						or" or r	olated	norcen	If you s	rovidod	vobiele
	our employees, first ans														rovided	venicie
		<u> </u>			(a)		b)	T		(c)		d)	T -	(e)		(f)
30	Total business/inve	etmont miles driv	on during		iicle 1	•	ıcle 2		Vehicle 3		Vehicle 4			nicle 5	Vehicle 6	
30	the year (don't incli															
31									-							
32	-	ersonal (nonco			1		_									
	miles driven	•	T. 1								l					
33	Total miles drive															
	lines 30 through 32	2	[													
34	Was the vehicle	available for	personal	Yes	No	Yes	No	Y	es	No	Yes	No	Yes	No	Yes	No
	use during off-duty	hours?												ļ		
35	Was the vehicle of															
	than 5% owner or re	· ·				_		-								<u> </u>
36	Is another vehicle															
	<u>use?</u>						<u> </u>				<u> </u>	L	<u> </u>			
		ction C - Questio														
	swer these question re than 5% owners o				eption to	o com	pleting	Sec	ction	n B for	vehicles	s used	by em	ployees	who a	ren't
	· ·		· ·												Yes	No
37	Do you maintain a your employees?														163	110
38	Do you maintain a		tatement th	at pr	ohibits i	oerson	 al use	of	 vehi	 icles e		ommu	tina by	v vour		<del> </del>
	employees? See th															
39		of vehicles by em	ployees as p	person	al use?		.,									
40	Do you provide m	ore than five vel	nicles to yo	our en	nployees	, obta	in info	ormai	tion	from	your er	nploye	es abo	ut the		
	use of the vehicles,	and retain the info	ormation rec	eived?	?											
41						demo	nstrati	on us	e? :	See inst	truction	s				
	Note: If your answe		0, or 41 is "	Yes," o	don't cor	nplete	Section	on B f	or t	he cove	ered vet	nicles.				
Pa	rt VI Amortizati	on										,				
	(2)		(b)			(0)				(4)		(€			<b>(f)</b>	
	(a) Description of	costs	Date amorti		Am	(c) ortizable	amoun	t		(d) Code se		Amorti		Amortiza	יי) ation for t	hıs year
-	A		begins									perce				•
42	Amortization of cos	ts that begins duri	ng your 201	9 tax	year (se	e instru	uctions	5)				ı	- 1			
	·				ļ							ļ		_		
42	Amagadi—adlasi id	40.46.04.5			<u> </u>		-					<u> </u>	<del>                                     </del>			
43		ts that began before in column (f). So	ore your 201	9 tax	year	ro to							43	-	-	
44	Total. Add amount	s in column (t). Se	e me instru	CUONS	ior whe	ie to re	ροπ						44			_

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

ATTACHMENT 14

SCHEDULE M - OTHER INCOME

UIC BOOKSTORE

4,148.

TOTAL

4,148.

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

ADMINISTRATIVE EXPENSES	387.
EQUIPMENT RENTAL	23.
INSURANCE	9.
OTHER OPERATING EXPENSES	4,178.
SUPPLIES	24.
TELEPHONE	20.
TRAVEL	13.
ADMINISTRATIVE SUPPORT	4,819.

PART II - LINE 27 - OTHER DEDUCTIONS

9,473.

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

#### **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending

► 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

Name of the organization

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

Employer identification number

37-6000511

Unrelated Business Activity Code (see instructions) ▶ 520000 Describe the unrelated trade or business ► INVESTMENT ACTIVITIES

Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net	
1 a	Gross receipts or sales		,	· -		
b	Less returns and allowances C Balance	1c				
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit. Subtract line 2 from line 1c	3			· •	
4a	Capital gain net income (attach Schedule D)	4a	15,579.		15,579.	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	-14,526.		-14,526.	
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach				·	
	statement) ATCH 17	5	-84,171.		-84,171.	
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7			<del>- v</del>	
8	Interest, annuities, royalties, and rents from a controlled				-	
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12				
13	Total. Combine lines 3 through 12	13	-83,118.		-83,118.	

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages		61,868.
16	Repairs and maintenance		
17	Bad debts		
18	Interest (attach schedule) (see instructions)		
19	Taxes and licenses	_	
20	Depreciation (attach Form 4562)	_	<del>-</del>
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	21,239.
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	
28	Total deductions. Add lines 14 through 27	28	83,107.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-166,225.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income_Subtract line 30 from line 29	31	-166,225.

For Paperwork Reduction Act Notice, see Instructions.

#### **SCHEDULE D** (Form 1120)

Department of the Treasury

**Capital Gains and Losses** 

OMB No 1545-0123

► 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.

Interna	Revenue Service	► Go to www.irs.gov	//Form1120 for instruction	ons and the latest infor	mation.			
	THE BOARD OF	TRUSTEES OF THE UNIV	ERSITY OF			Employer identification number 37-6000511		
		spose of any investment(s) in a	qualified opportunit	v fund during the ta	x vear?	<b>•</b>	Yes X No	
		8949 and see its instructions fo				SS.		
Part		n Capital Gains and Losses			, oc. gam, cc.			
	See instructions for hou the lines below.	w to figure the amounts to enter on er to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from For 8949, Part I, lin	m(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine	
	whole dollars	rm transactions reported on Form	(Suics price)		column (g)		the result with column (g)	
	1099-B for which ba which you have no a if you choose to repo	djustments (see instructions) However, and go to line 11st and for djustments (see instructions) However, and go to line 1b						
1b		tions reported on Form(s) 8949						
2		tions reported on Form(s) 8949						
				<del></del>	-			
3		tions reported on Form(s) 8949		22,025.		- <b>-</b>	-22,025.	
4	Short-term capital	I gain from installment sales from F	Form 6252, line 26 or 37	7		4	1	
•								
5	Short-term capital	l gain or (loss) from like-kind exchar	nges from Form 8824		• • • • • • •	. 5		
6	Unused capital los	ss carryover (attach computation)				. 6	( )	
		pital gain or (loss). Combine lines 1				. 7	-22,025.	
Part	<del>_</del>	n Capital Gains and Losses	(See instructions.)	<del></del>	(g) Adjustments	to cain	(h) Gain or (loss)	
	the lines below	sier to complete if you round off cents to	(d) Proceeds	(e) Cost	or loss from For 8949, Part II, III	m(s)	Subtract column (e) from column (d) and combine	
	whole dollars	not to complete it you round on come to	(sales pnce)	(or other basis)	column (g)		the result with column (g)	
8a	1099-B for which ba which you have no a if you choose to repo	m transactions reported on Form isis was reported to the IRS and for idjustments (see instructions). However, or all these transactions on Form 8949, and go to line 8b.						
8b		tions reported on Form(s) 8949						
					_			
9		tions reported on Form(s) 8949						
10	Totals for all transact	tions reported on Form(s) 8949		-				
			37,604.			-,	37,604.	
11	Enter gain from F	form 4797, line 7 or 9				. 11		
12	Long-term capital	gain from installment sales from F	orm 6252, line 26 or 37	, 		. 12		
13	Long-term capital	gain or (loss) from like-kind exchan	ges from Form 8824			. 13		
14	Capital gaın dıstri	butions (see instructions)				. 14		
15		oital gain or (loss) Combine lines 8	a through 14 in column	h		15	37,604.	
Part	Summary	of Parts I and II		<del></del> ·			T	
16	Enter excess of n	et short-term capital gain (line 7) o	ver net long-term capita	l loss (line 15)		. 16		
17	Net capital dain	Enter excess of net long-term capit	al gain (line 15) over ne	et short-term capital lo	ss (line 7)	17	15,579.	
18		17. Enter here and on Form 1120,				18	15,579.	
	Note: If losses exc	ceed gains, see Capital Losses in the	e instructions					

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2019

# Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return THE BOARD OF TRUSTEES OF THE UNIVERSITY Social security number or taxpayer identification number 37-6000511 TLLINOTS

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 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 reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment if any to gain or loss

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	or Proceeds Section (sales price)	(e) Cost or other basis See the Note below	Adjustment, if a If you enter an a enter a coo See the sepa	(h) Gain or (loss). Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of (Мо , day, ут)	(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)
FROM SCH K-1S	VAR	VAR		22,025.			-22,025.
	1						
2 Totals. Add the amounts in column negative amounts) Enter each tot Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box C a	al here and inc e is checked), lin	lude on your e 2 (if Box B		22,025			-22,025

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 (2019)

Form 6343 (2013)	Attachment Sedantic 121 1 age
Name(s) shown on roturn. Name and SSN or taxpayer identification no not required if shown on other side	Social security number or taxpayer identification number
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS	37-6000511

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.

O) 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

X (F) Long-term transactions not reported to you on Form 1099-B

	·						
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo , day, yr )	(d) Proceeds (sales pnce) (see instructions)	(e) Cost or other basis See the <b>Not</b> e below and see Column (e) in the separate instructions	Adjustment, if a If you enter an a enter a co See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example 100 sh XYZ Co)	(Mo , day, yr )				(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
FROM SCH K-1S	VAR	VAR	37,604.				37,604
						<del>-</del> .	
					<u></u>		
<del>.</del>							
2 Totals. Add the amounts in column	s (d) (o) (a) and	(b) (subtract					
negative amounts) Enter each tot Schedule D, line 8b (if Box D abov above is checked), or line 10 (if B	al here and incl re is checked), line	ude on your e 9 (if Box E	37,604.				37,604

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 (2019)

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

#### **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending  $\frac{}{}$ 

06/30 .20 20

► 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).

**Employer identification number** 

Name of the organization

37-6000511

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

Unrelated Business Activity Code (see instructions) ▶ 520000 Describe the unrelated trade or business ► S-CORP INVESTMENT - PRAIRELAND ENERGY

1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7),	2			
3	Gross profit Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement) ATCH 18	5	121,206.	•	121,206
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			, , , , , , , , , , , , , , , , , , ,
0	Exploited exempt activity income (Schedule I)	10			•
1	Advertising income (Schedule J)	11			
2	Other income (See instructions, attach schedule)	12			
3	Total. Combine lines 3 through 12	13	121,206.		121,206

Compensation of officers, directors, and trustees (Schedule K)	14	
1		
Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
Depletion	22	
		-
		<del>-</del>
		<u> </u>
·		
	29	121,206.
	30	
·		121,206.
	Salaries and wages Repairs and maintenance Bad debts. Interest (attach schedule) (see instructions).  Taxes and licenses Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere on return Depletion. Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J). Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions).	Less depreciation claimed on Schedule A and elsewhere on return

For Paperwork Reduction Act Notice, see instructions.

37-6000511

ATTACHMENT 18

S-CORP INVESTMENT - PRAIRELAND ENERGY

SCHEDULE M - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

S-CORPORATION INVESTMENTS

121,206.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

121,206.

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

### **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

06/30 20

► 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).

Employer identification number

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

37-6000511

Unrelated Business Activity Code (see instructions) ▶ 810000

Describe the unrelated trade or business ▶ PARKING

Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales	$T^{\dagger}$			
b	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)				
7	Unrelated debt-financed income (Schedule E)				
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)			<del></del>	
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)				
11	Advertising income (Schedule J)				
12	Other income (See instructions, attach schedule) ATCH. 19		826,793.		826,793.
13	Total. Combine lines 3 through 12		826,793.		826,793.

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

	On the state of th		Ī
14	Compensation of officers, directors, and trustees (Schedule K)		170 214
15	Salaries and wages	15	170,314.
16	Repairs and maintenance	16	_
17	Bad debts	17	558.
18	Interest (attach schedule) (see instructions)		125,896.
19	Taxes and licenses	19	•
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	49,112.
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	29,477.
25	Excess exempt expenses (Schedule 1)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	610,181.
28	Total deductions. Add lines 14 through 27	28	985,538.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-158,745.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-158,745.

For Paperwork Reduction Act Notice, see instructions.

# Form 4562

# **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

Attachment Sequence No 179

ldentifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS Business or activity to which this form relates

37-6000511

P <i>P</i>	ARKING						
Par	t I Election To Expense C Note: If you have any lis			you comp	olete Part I.		
1	Maximum amount (see instructions).					1	
2	Total cost of section 179 property pl	aced in service (see ir	nstructions)			2	
	Threshold cost of section 179 prope						
4 5	Reduction in limitation. Subtract line Dollar limitation for tax year. Subtract line 4 from separately, see instructions	3 from line 2. If zero on line 1 If zero or less, enter	or less, enter -0-			5	
6	(a) Description			isiness use onl			-
							1
							1
7	Listed property. Enter the amount fro	om line 29	l	7		-	†
	Total elected cost of section 179 pro					8	
	Tentative deduction Enter the smaller						
10	Carryover of disallowed deduction fr	om line 13 of your 20	18 Form 4562			10	-
	Business income limitation. Enter th						<del>-</del>
	Section 179 expense deduction Add						
	Carryover of disallowed deduction to					!*.	
	: Don't use Part II or Part III below for	• • • • • • • • • • • • • • • • • • • •		<u> </u>	<u> </u>		
	t    Special Depreciation A		•	on't include	listed proper	ty See ins	tructions \
	Special depreciation allowance for	··· **********************************				<del></del>	T
	during the tax year. See instructions.						
	Property subject to section 168(f)(1) Other depreciation (including ACRS)						
Par	Other depreciation (including ACRS) rt    MACRS Depreciation (I	Don't include listed	property See instruc	tions )	<del></del>	16	
Гаі	INACKS Depreciation (	Don't include listed	Section A	dons.)			
	MAGDO de					4.7	49,112.
	MACRS deductions for assets place						33,112.
	If you are electing to group any a	•			- ,		
	asset accounts, check here		During 2019 Tax Yea			reciption S	Svetom
	Section B - Assets	(b) Month and year	(c) Basis for depreciation	1	General Dep	Teclation	bystem
40.	(a) Classification of property	placed in service	(business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
	3-year property						
	5-year property					<u> </u>	
	7-year property						<del></del>
	10-year property	ļ				<u> </u>	
	15-year property						
f :	20-year property						
g :	25-year property			25 yrs.		S/L	
h l	Residential rental			27.5 yrs.	мм	S/L	
	property			27.5 yrs.	ММ	S/L	
i I	Nonresidential real			39 yrs.	ММ	S/L	
	property			<u> </u>	MM	S/L	
	Section C - Assets F	Placed in Service D	ouring 2019 Tax Year	Using the	Alternative De	preciation	System
20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
_ c :	30-year			30 yrs	ММ	S/L	
	40-year			40 yrs	ММ	S/L	
Par	t IV Summary (See instruct	ions.)					
21 l	Listed property Enter amount from In	ne 28			<del></del>	21	
22	Total. Add amounts from line 12,	lines 14 through 1	7, fines 19 and 20 in	column (g),	and line 21. E	nter	
23	here and on the appropriate lines of y For assets shown above and plac portion of the basis attributable to se	rour return. Partnershi ed in service during ection 2634 costs	ps and S corporations -s the current year, ent	ee instruction		22	49,112.
For P	Paperwork Reduction Act Notice, se 9x2300 2 000 5149RF 1353	e separate instruction	v 19-8.2F	<u> 1 - 1 - 9</u>	-1		Form <b>4562</b> (2019)

Fore	n 4562 (	2019)													37	-6000	511	Page 2
	rt V		operty (Include	automobi	les.	certaiı	1 0	the	r vel	hicle	s, ce	rtai	n air	craft.	and	prope	rty us	ed fo
u e			ent, recreation, o								-,			,			•	
		Note: For a	ny vehicle for wh is (a) through (c) of	ich you are	using	the st	tanda Ban	ard	mileag	ge ra Cifa	te or d	ledi	ucting	lease	expense	e, comp	olete or	ly 24a
			Depreciation and										nits for	pass	enger au	ıtomobil	es.)	
24a	Do voi		e to support the bus					Ye		No					ence writ		Yes	No
		(a)	(b)	(c)					(e)		(f)			g)	Т —	(h)	T	<u></u> i)
	Type of	property (list	Date placed	Business/	Cost	( <b>d)</b> or other b	asıs		s for depr		Recove	эгу		hod/	Depr	eciation	Elected s	ection 179
	vehi	cles first)	in service	investment use percentage		o. oo. o		(DUS	use only		perio	d	Conv	ention	ded	uction	C.	ost
25	Speci	al depreciation	on allowance for	qualified list	ed pro	operty	place	ed i	in serv	vice c	luring					-		
	the ta	x year and us	sed more than 50%	in a qualifie	d busi	ness us	e. S	ee ir	nstruct	ions				. 25	<u> </u>			
26	Prope	erty used mor	e than 50% in a qu	ualified busine	ess us	e:											,	
				%	<u> </u>													
				%													ļ	
			<u></u>	%	1												<u> </u>	
<u>27</u>	Prope	erty used 50%	6 or less in a qualifi								_							
				%	+						_	_	S/L -				4	
				- %									S/L -	_			4	
			ļ <u> </u>	%	1								S/L -		ļ		٠,	
			lumn (h), lines 25	-													,	
<u>29</u>	Add a	mounts in co	lumn (i), line 26. E					_							· · · · ·	. 29		
				Section														
			or vehicles used by swerthe questions in														provided	venicies
to y	our emp	pioyees, mst an	swer the questions in	T Section C to			I			T							Τ,	f)
						a) Icle 1	١,	<b>(b</b> Vehic	-	v	(c) 'ehicle 3			d) ıcle 4		( <b>e)</b> nicle 5	1 '	r) Icle 6
30			estment miles driv									ŀ						
	_	-	lude commuting m				-			+		$\dashv$					<del> </del>	
31		_	niles driven during									$\dashv$					+	
32	Total	•	•	mmuting)														
•							-			$\vdash$		$\dashv$			+			<del></del>
33			en during the y															
24		-	2 e available for		Yes	No	Ye		No	Ye	s No	,	Yes	No	Yes	No	Yes	No
34			hours?	P0.00.10.	103			-		1.0.	-				+:00		1:55	
25			used primarily by				1			$\vdash$	+				-		1	
33			related person?	·														
26			le available for	l l			<b>†</b> –			<del> </del>	+					<del> </del>	1	-
30			e available 101	,														
	use:,		ction C - Questic		Nove	re Who	Pr	ovid	da Val	hicle	s for U	معا	hy Th	eir Fı	nnlove	 PC	·	
Δno	swar th		is to determine if	•	•								-				who a	ren't
			or related persons.			eption i		Jiiip	nemig	0000		<b>.</b>	, ci iioic.	J 4500	z by ciii	pioyecc		
37			a written policy s			ahihite	all r	are	onal u	SA 0	f vehic	عما	includ	ding c	ommutii	na hv	Yes	No
31												163,	includ	ing c		ig, by		
38	Do y	ou maintain	a written policy s	statement th	at pr	ohibits	pers	sona	al use	of v	ehicles,	e	cept o	comm	uting, b	y your		
	emplo	yees? See th	ne instructions for	vehicles used	by c	orporat	e offi	icer	s, direc	ctors,	or 1%	or r	nore o	wners				
39			e of vehicles by em															
40	Do y	ou provide n	nore than five ve	hicles to yo	ur em	nployee	s, o	btai	n infoi	rmati	on fror	n y	our er	nploye	es abo	ut the		
			, and retain the info															
41			equirements conce															
			er to 37, 38, 39, 4	0, or 41 is "	Yes," c	don't co	mple	ete (	Section	n B fo	r the c	ove	red vel	nicles.				
Pa	rt VI	<b>Amortizat</b>	ion															
		(-)		(b)				(0)				(4 <b>)</b>			(e)		(f)	
		(a) Description (	of costs	Date amortiz	ation	An	nortiza	(c) able :	amount		Code	( <b>d</b> ) e sec	ction		tization lod or	Amortiz	(f) ation for t	his year
				begins										1 1	entage			
42	Amor	tization of co	sts that begins dur	ing your 201	9 tax	year (se	e in:	stru	ctions)	)·			_			_		
													_				_	
				<u> </u>									_		$\rightarrow$			
			sts that began befo												. 43			
44	Total.	. Add amoun	ts in column (f). Si	ee the instru	ctions	tor whe	ere te	o re	port .		<u></u>				. 44			

ATTACHMENT	20
<del></del>	
	125,896.

SCHEDULE M - INTEREST DEDUCTION

INTEREST EXPENSE

TOTAL

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

ADMINISTRATIVE OVERHEAD EOUIPMENT EXPENSES	60,532. 8,895.
FACILITY OPERATIONS AND MAINTENANCE	447,591.
INSURANCE	12,887.
OTHER OPERATING EXPENSES	35,424.
PRINTING AND MAILING	1,555.
RENTAL EXPENSES	7,624.
SUPPLIES	6,934.
TELEPHONE	17,769.
UTILITIES	6,151.
ADMINISTRATIVE SUPPORT	4,819.

PART II - LINE 27 - OTHER DEDUCTIONS

610,181.

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

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

06/30 ,20 20

OMB No 1545-0047

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).

Name of the organization

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

**Employer identification number** 

37-6000511

Unrelated Business Activity Code (see instructions) ▶ 540000 Describe the unrelated trade or business ► ADVERTISING

Pai	tI Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales					
b	Less returns and allowances C B	Balance 🕨	1c			
2	Cost of goods sold (Schedule A, line 7)	[	2			
3	Gross profit. Subtract line 2 from line 1c	[	3			
4a	Capital gain net income (attach Schedule D)	[	4a			
ь	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4	1797)	4b	-		
С	Capital loss deduction for trusts		4c	·		
5	Income (loss) from a partnership or an S corporation	(attach	į –	·		
	statement)		5			
6	Rent income (Schedule C)	r	6.	•		
7	Unrelated debt-financed income (Schedule E)		7			
8	Interest, annuities, royalties, and rents from a control	led				
	organization (Schedule F)		8			
9	Investment income of a section 501(c)(7), (9), or (17)	ı				
•	organization (Schedule G)		9			
10	Exploited exempt activity income (Schedule I)		10			
11	Advertising income (Schedule J) ATCH .2.2		11	9,900.	183.	9,717.
12	Other income (See instructions, attach schedule) AT	1	12	708,954.		708,954.
13	Total. Combine lines 3 through 12	ì	13	718,854.	183.	718,671.

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

	• • • • • • • • • • • • • • • • • • • •		
14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	ı	279,131.
16		l	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions),	18	
19	Taxes and licenses		
20	Depreciation (attach Form 4562)	'-	
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	18.
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	118,457.
28	Total deductions. Add lines 14 through 27	28	397,606.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	321,065.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29	31	321,065.

For Paperwork Reduction Act Notice, see Instructions.

Schedule M (Form 990-T) 2019

# Form **4562**

Department of the Treasury Internal Revenue Service

# **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

Attachment Sequence No 179

Identifying number

Name(s) shown on return

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

37-6000511

	ess or activity to which this form relates							
	VERTISING							
Part	Election To Expense C Note: If you have any list				e you com	olete Part I.		
1 N	Maximum amount (see instructions).						1	
2 1	otal cost of section 179 property pl	aced in service (see ii	nstructions)				2	
	hreshold cost of section 179 prope							
4 F 5 D	Reduction in limitation. Subtract line loilar limitation for tax year. Subtract line 4 fror eparately, see instructions.	3 from line 2. If zero	or less, enter -l -0- If married filing	D			4	
s	eparately, see instructions		<u></u>	-	usiness use on	1		
	(a) Description	ОГРІОРЕНУ		(b) Cost (bi	usiness use on	(C) Elect	ed cost	+
			<del></del> .		<del></del>			+
7 L	isted property. Enter the amount fro	om line 29		L	7	<del></del>		1
	otal elected cost of section 179 pro						8	· ·
	entative deduction Enter the smalle							
10 (	Carryover of disallowed deduction fr	om line 13 of your 20	18 Form 4562	· · · · ·			10	
	Business income limitation. Enter th							
	Section 179 expense deduction. Add							
13 C	Carryover of disallowed deduction to	2020. Add lines 9 a	nd 10, less line	12	<b>▶</b> 13			
	Don't use Part II or Part III below fo							,
Part	Special Depreciation A	Allowance and Of	her Depred	iation (D	on't include	e listed proper	ty. See inst	tructions.)
14 S	special depreciation allowance for	or qualified propert	y (other tha	n listed	property) p	aced in servi	e	
d	uring the tax year. See instructions						14	
15 F	roperty subject to section 168(f)(1)	election					15	
16 C	Other depreciation (including ACRS)	<u>,</u>				<u> </u>	16	
Part	MACRS Depreciation (I	Don't include listed	property. S	ee instruc	tions.)			
				tion A				,
	ACRS deductions for assets place							18
	you are electing to group any						<u>al</u>	
<u>a</u>	sset accounts, check here							
	Section B - Assets	(b) Month and year				e General Dep	reclation S	ystem
	(a) Classification of property	placed in service	(business/inv only - see in	estment use		(e) Convention	(f) Method	(g) Depreciation deduction
	3-year property							
	5-year property				<b>_</b>			
***************************************	7-year property		-		ļ			
	0-year property							
	5-year property						ļ	
***************************************	0-year property 5-year property				25		6//	
			-		25 yrs 27 5 yrs	MM	S/L S/L	
	lesidential rental roperty		-		27 5 yrs.	MM	S/L	
			ļ		39 yrs	MM	S/L	
	onresidential real roperty		<b></b>		33 yıs	MM	S/L	
P	Section C - Assets P	laced in Service [	Juring 2019	Tay Year	Using the		I	System
20a C	lass life	Taced III Get vice L	Jurning 2013	Idx Ital	Using the I	Alternative De	S/L	J
	2-year				12 yrs.		S/L	
	0-year				30 yrs.	мм	S/L	
	0-year				40 yrs.	MM	S/L	· -
	V Summary (See instructi	ons.)	1		1			·
	isted property Enter amount from lin	<del>_</del> '				-	21	
	otal. Add amounts from line 12,		7. lines 19 a	nd 20 in a	column (a)	and line 21 E	· · · —	
h-	ere and on the appropriate lines of v	our return. Partnersh	ps and S corp	orations - s	ee instructio			18
23 F	or assets shown above and place ortion of the basis attributable to se	ed in service during ction 263A costs	the current	year, ent	er the 23			

_	4500	2040)												37	-6000	511	D 1
	1 4562 ( rt V	Listed			automob		certai	n oth	er ve	hicles	, certa	ain air	craft,	and	proper	ty use	Page 2 ed fo
		Note: F	or any veh	icle for wh	r amuseme ich you are f Section A,	using	the st	tandard	i mileag	ge rate	e or dec	ducting	lease	expense	, comp	olete <b>o</b> r	ıly 24a
					Other Info								passe	nger au	tomobil	es.)	
24a	До уо				iness/investm				es		24b If "					Yes	No
		(a)		(b)	(c)		(d)		(e)		(f)	(	g)	(	h)	(	(i)
		property (lis cles first)		te placed service	Business/ investment us percentage	Cost	(d) or other b		sis for depr isiness/inve use only	estment	Recovery period		hod/ rention		ciation uction		section 179 ost
25					qualified lis							<u>.</u>	. 25				
26	Prope	erty used	more than	50% in a qı	ualified busin	ess us	e:					,					
					<del></del>	%	_					ļ				ļ	
					ļ	%				}		-				-	
27	Prone	arty usad	50% or les	s in a qualif	l ied business	<u> </u>						1					
	гторе	erty useu	30 /8 01 163	3 III a qualii		% dse						S/L -		T			
				<del></del>		%					<del></del>	S/L -		<b></b>		1	
					<del>                                      </del>	%						S/L -					
28	Add a	amounts i	n column (h	n), lines 25	through 27.	Enter	here ar	nd on li	ne 21, p	page 1.			. 28			]	
29	Add a	amounts i	n column (i	), line 26. E	nter here a	nd on	line 7, p	age 1.							. 29		
					Sectio												
					a sole prop Section C to											rovided	vehicle
- Y	oui eiii	pioyees, iii	St all SWEL till	- questions ii	1 Section C to		a)	r :	b)	l	(c)	1 .	d)		e)	T (	(f)
30			/investmen				icle 1		icle 2	Ve	hicle 3	1 -	ıcle 4		icle 5	Vehicle 6	
31			ng miles dri		Г							1 -					
	Total	other	persona	l (nonco	mmuting)				-								
33	Total	miles o	driven dur gh 32	ing the y	ear. Add												
34			hicle avai			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was	the vehi	cle used p	rimarily by	/ a more											<u> </u>	
			or related	•			<u> </u>		+	-	-			<del>                                     </del>		<del> </del>	├──
36			ehicle ava		·												
	use:,		Section (		ons for Em	nlove	rs Who	Prov	ide Vel	hicles	for Us	hv Th	eir Fn	nlove			Щ.
			stions to de	etermine if	you meet a See instruct	an exc										who a	ren't
				*	statement ti		ohibits	all per	sonal u	ise of	vehicles	inclu	dina co	mmutir	na by	Yes	No
	your e	employee	s?														
38	-		ain a writte	en policy :	statement t	hat pr	ohibits	persor	nal use	of vel	hicles, e	except	commu	ting, by	your		
	-	-			vehicles use	-			rs, dire	ctors, c	or 1% or	more o	wners				<b>_</b>
					ployees as p												<del> </del>
					hicles to your ormation rea		_										
41	Do vo	n nie veni	ne requirem	ents conce	ormation rec erning qualifi	ed au	: Iomobile	· · · ·	onstration	n use?	See ins	truction	 IS	• • • •	• • • •		<del>  -</del>
•					0, or 41 is '												
Pa		Amorti			<del></del>			<u> </u>									
	_	Decem	(a)		(b) Date amorti	zation		(c)			(d)		Amort	zation	Amadia	(f)	bio vione
			tion of costs		begins	; 	An	normzable	e amount		Code se			od or ntage	Ailloruz	ation for t	ns year
42	Amor	tization o	f costs that	begins dur	ing your 20	19 tax	year (se	e instr	uctions	):							
							ļ						ļ				
40	Λ ·			h	<u></u>	10 +	<u></u>						.l	1			
43 44	Total.	uzation o . Add am	i costs that iounts in co	began bet lumn (f). S	ore your 20 ee the instru	i e tax ictions	year for who	ere to re	eport		 			43			

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SCHEDULE M - SCHEDULE J ADVERTISING INCOME REPORTED ON A SEPARATE BASIS

	2	æ				7
	GROSS	DIRECT	4	Ŋ	9	EXCESS
7	ADVERTISING	ADVERTISING	ADVERTISING	CIRCULATION	READERSHIP	READERSHIP
NAME OF PERIODICAL	INCOME	COSTS	GAIN OR LOSS	INCOME	COSTS	COSTS
ILLINOIS ISSUES	. 906 , 6	183.				-
	9,900.	183.	9,717.			
	9,900.	183.				

V 19-8.3F

#### SCHEDULE M - OTHER INCOME

UIUC CAMPUS REC SPONSORSHIPS UIUC WILLARD AIRPORT ADVERTISING UIUC STATE FARM CENTER ADVERTISING UIC ATHLETIC SPONSORSHIPS VETMED CONFERENCE SPONSORSHIPS UIUC ACES TAX SCHOOL UIUC DIA SPONSORSHIP UIS SANGAMON AUDITORIUM SPONSORSHIPS UIUC WILL UNDERWRITING WILL AG EVENT SPONSORSHIPS CEE CONFERENCE SPONSORSHIPS UIUC ICT INDUSTRY TESTING		24,112. 10,285. 3,270. 18,100. 1,820. 11,662. 566,138. 50,198. 7,358. 400. 5,071. 10,540.
	TOTAL	708,954.

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

ADMINISTRATIVE EXPENSES	207.
CONFERENCE ROOMS AND MEALS	355.
COPYING PHOTO AND PRINTING	711.
OTHER OPERATING EXPENSES	52,222.
SUPPLIES	1,684.
TELEPHONE	151.
TRAVEL	479.
ADMINISTRATIVE SUPPORT	62,648.

PART II - LINE 27 - OTHER DEDUCTIONS

118,457.

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

### **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\,\underline{\phantom{a}07/01}\,$  , 2019, and ending  $\,\underline{\phantom{a}}$ 06/30 , 20 20

▶ 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).

Name of the organization

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS Unrelated Business Activity Code (see instructions) ▶ 560000

Employer identification number

37-6000511

	Describe the unrelated trade or business ► ALUMNI TRAVI	EL T	OUR		·
Part I Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10		- "	
11	Advertising income (Schedule J)	11	· ·		
12	Other income (See instructions, attach schedule) ATCH, 25	12	38,299.	-	38,299.
13	Total. Combine lines 3 through 12	13	38,299.		38,299.

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	ľ	10,259.
16	Repairs and maintenance		
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	31,152.
28	Total deductions. Add lines 14 through 27	28	41,411.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	_29	<del>-3,</del> 112.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-3,112.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TRAVEL ADMINISTRATIVE SUPPORT

26,333. 4,819.

PART II - LINE 27 - OTHER DEDUCTIONS

31,152.

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

### Unrelated Business Taxable Income from an Unrelated Trade or Business

1 20

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending  $\frac{06/30}{}$  , 20  $\frac{20}{}$ 

► 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

Name of the organization

THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

Employer identification number

37-6000511

Unrelated Business Activity Code (see instructions) ► 520000

Describe the unrelated trade or business ► S-CORPORATION INVESTMENT - RETMAP INC.

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net	
1 a	Gross receipts or sales		-		,
b	Less returns and allowances c Balance	1c			1
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3		<del> </del>	
4a	Capital gain net income (attach Schedule D)				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	-		
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement) ATCH 27	5	-6,711.		-6,711.
6	Rent income (Schedule C)				
7	Unrelated debt-financed income (Schedule E),	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			***************************************
12	Other income (See instructions, attach schedule)				
13	Total. Combine lines 3 through 12	13	-6,711.		-6,711.

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages		
16	Repairs and maintenance		
17	Bad debts		
18 ·	Interest (attach schedule) (see instructions),		
19	Taxes and licenses		
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	
28	Total deductions. Add lines 14 through 27	28	
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-6,711.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-6,711.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

37-6000511

ATTACHMENT 27

RETMAP INC.

SCHEDULE M - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

S-CORPORATION INVESTMENT

-6,711.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

-6,711.