- Form	₁ 990-T	E	xempt Organizatio	on Bus	sines'≩ Income der section 6033	Tax Retur		OMB No 1545-0687
. 5111		For cale	ndar year 2018 or other tax year i				<u> </u>	୬ ⋒ 1 0
Dans	rtment of the Treasury	roi cale	► Go to www.irs.gov/Form				" <u></u> -	<u> </u>
	al Revenue Service	_ D o	not enter SSN numbers on this f)(3)	Open to Public Inspection for 501(c)(3) Organizations Only
A [Check box if				me changed and see instructi		D Emplo	yer identification number
	address changed						(Emplo)	rees aust, see instructions)
_	empt under section	D.::4	UNIVERSITY OF ILI				20 4	0.000
X	10011 - 17 - 17	Print or	Number, street, and room or suite	∍no IfaPO	box, see instructions].		006007
-	408(e) 220(e)	Туре	1305 WEST GREEN S	emptitum emptitum				ited business activity code tructions)
: ├─	408A530(a)		City or town, state or province, of		7IP or foreign postal code			
C Bo	529(a)	·	URBANA, IL 61801	ountry, and a	EIF of foreign postal code		52599	00
at	end of year	F Gro	oup exemption number (See ins	structions)	>			
	ok value of all assets end of year 2539518233.		eck organization type X			(c) trust	401(a) t	rust Other tru
3 1 E	inter the number of		anization's unrelated trades or bu					(or first) unrelated
· tr	ade or business her	_					•	than one, describe the
fi	rst in the blank spa	ce at the	e end of the previous sentence	, complete	Parts I and II, complete a	Schedule M for eac	h addition	al ·
	ade or business, the							
			corporation a subsidiary in an			controlled group?		▶ Yes X I
			Identifying number of the parer			one number	<u> </u>	
<u>J []</u>			HRISTINE C. DEVOCEI or Business Income	11151	(A) Income	one number >		(C) Net
	Gross receipts or s		or Duamesa income		(A) monie	TOTAL SILE	19 mm	(C) Net
اها به b	Less returns and allowa		c Balan	ice 1c		The state of the		性型型系统
- 2			Jule A, line 7)	· -		\$44 BEC		1 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
3			2 from line 1c			3.大型指甲·伊藤 4.10	77E'	
4 a			attach Schedule D)		701,548			701,54
b			Part II, line 17) (attach Form 4797)			The state of the Blot		
c	Capital loss dedu	ction for t	trusts	· ·) —		Table 1		
5			or an S corporation (attach statement), .		-10,590,840	Z ATCH'32		-10,590,84
6						 		
7			ncome (Schedule E)			 		
8			ents from a controlled organization (Sched		 			
9			01(c)(7), (9), or (17) organization (Schedu			 		
10 11			dule J)	••		 		
12			ctions, attach schedule)			الماسينية أمام الماسية مع والماسية	. ', 5", 44	
13			ough 12		-9,889,292		<u>-</u>	-9,889,292
 -			Taken Elsewhere (See				xcept fo	
			t be directly connected w					
14	Compensation of	officers,	directors, and trustees (Schedu	ıle K)			. 14	
15								
16								
17								
18			(see instructions)					14 044
19							1 —	14,04
20		•	See instructions for limitation ru				20	
21 22			4562)					
22 23	•						22b . 23	
	Contributions to d	eferred	compensation plans	Jar. K	TVFO	· · · · · · · · · · · ·		
24	Employee benefit	programe	S	al lines bet line	7.0	· · · · · · · · · · · ·		
		penses (S	Schedule I)			· · · · · · · · · · · · · · · · · · ·		
25	Excess exempt ex	\ 1		APRI		· · · · · · · · · · · · · · · · · · ·	í ———	
24 25 26 27	Employee benefit Excess exempt ex Excess readership	costs (S	chedule J)				· -	050 300
25 26	Other deductions	(attach s	schedule)			ATCH. 4.	2B	952,398
25 26 27	Other deductions	(attach s	schedule)		· · · · · · · · · · · · · · · · · · ·	АТСН. 4. 	3	
25 26 27 28	Other deductions Total deductions. Unrelated busines	(attach s Add line ss taxab	es 14 through 28.	GDE ating loss	Q. U.T deduction Subtract line	29 from line 1	29 3 30	966,447 -10,855,739
25 26 27 28 29	Other deductions Total deductions. Unrelated busines	(attach s Add line ss taxab	es 14 through 28	GDE ating loss	Q. U.T deduction Subtract line	29 from line 1	29 3 30	952,398 966,447 -10,855,739 -10,855,739

UNIVERSITY OF ILLINOIS FOUNDATION

Form	990-T (2018)		Page 2
	Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	•	
	instructions)	. 33	-10,855,739.
34	Amounts paid for disallowed fringes	. 34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)		
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sun		
••	of lines 33 and 34	36 ایم	-10,855,739.
37		37	1,000.
	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	* *	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36 enter the smaller of zero or line 36		-10,855,739.
		1 325	-10,033,739.
	Tax Computation	. 1 4 5	T
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)		
40	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax or	- 1 1	
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	► 40	<u> </u>
41	Proxy tax. See instructions		
42	Alternative minimum tax (trusts only)		
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	. 44	
	Tax and Payments		
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a		
	Other credits (see instructions)		
С	General business credit Attach Form 3800 (see instructions)		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	7	
-	Total credits. Add lines 45a through 45d	. 45e	
46	Subtract line 45e from line 44		
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)		
48	Total tax. Add lines 46 and 47 (see instructions)		0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 2		
	Payments A 2017 overpayment credited to 2018		
	2018 estimated tax payments	H	
	Tax deposited with Form 8868		
	Foreign organizations Tax paid or withheld at source (see instructions)		İ
_	Backup withholding (see instructions)	\dashv	
f	Credit for small employer health insurance premiums (attach Form 8941)		
g	Other credits, adjustments, and payments Form 2439		
	Form 4136 Other Total ▶ 50g		500 030
51	Total payments. Add lines 50a through 50g		590,030.
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	_ 52	
53		▶ 53	500 000
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	▶ 54	590,030.
<u> 55 o</u>	Enter the amount of line 54 you want Credited to 2019 estimated tax ▶590, 030. Refunded		
	Statements Regarding Certain Activities and Other Information (see Instruction)	ons)	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature	or other	r authority Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	may ha	ve to file
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	e foreig	n country
	here ▶SEE ATTACHMENT 5		
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fo	reign trus	st? X
	If "Yes," see instructions for other forms the organization may have to file	Ū	
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the	e best of	my knowledge and belief, it is
Sign	true, carrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		100 1
Her			IRS discuss this return preparer shown below
			tions)? X Yes No
_			PTIN
Paid	1 Katharing Kutaka as 3/26/2020	leck L	" 501006601
Pre	parer	If-employe	24 6565506
	Prints name Parkers & 100MG 0.5. Edit	m's EIN ▶ ੨	12-879-2000
	Firm's address ► 155 N. WACKER DRIVE, CHICAGO, IL 60606	one no 3	12-019-2000

Form 990-T (2018)

Form 990-T (2018)

Total dividends-received_deductions_included in_column 8

▶

Page 4

Schedule F—Interest, Annu	inces, Royantes				ntrolled Or			atic	898) פווכ	instructio	ภาร)		
1 Name of controlled organization	2 Employer identification numb		3. Net	unrela	4. Total of specific payments made			5. Part of column 4 that is included in the controlling organization's gross income			6. Deduction connected to the column	with income	
(1)													
(2)						ļ							
(3)													
(4)						l						<u> </u>	
Nonexempt Controlled Organiz		-	1				40	Dar	of column	0 that is	4	1 Deductions	directly
7. Taxable Income	8. Net unrelated in (loss) (see instruct				otal of specifications of specifications of specific terms of the		inc	lude	d in the con ation's gross	ntrolling		nected with column 1	income in
(1)			 										
(2)			+										
(3)			-										
(4)	<u> </u>						<u> </u>	44.0	olumns 5 a	nd 10	_	dd aslumas C	and 44
Totals	<u> </u>				·····	▶	En	ter h	ere and on line 8, colur	page 1,	En	dd columns 6 ter here and o irt I, line 8, col	n page 1,
Schedule G-Investment In	come of a Sec	tion 5	01(c	(7),	(9), or (17		nizati	on	(see inst	ructions)			
1 Description of income	2. Amount of	income			3. Deductive con directly con (attach sci	nnected				t-asides schedule)		5 Total de and set-asion plus c	des (col 3
(1)													
(2)]		
(3)													
(4)													
Totals ▶ Schedule I-Exploited Exe	Enter here and Part I, line 9, o	olumn (A))	r Th	an Advert	ieina In		. ra.	oo instru	ctions)	•	Enter here an Part I, line 9,	
Ochedule I - Exploited Exe		come,	Ouic	51 T 1 10				c (3	ee msuu			1	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	d conn prod un	3 Expenses directly connected with production of unrelated isiness income		If a gain, compute		5. Gross income from activity that is not unrelated business income		vity that related	6. Expenses attributable to column 5		exp (columi column mor	ss exempt enses n 6 minus 5, but not e than mn 4)
(1)												-	
(2)													
(3)													
(4)						-		-					
Totals ▶	Enter here and on page 1, Part I, line 10, col (A)	page	here an e 1, Par I0, col	H,						, ,		on p	here and age 1, , line 26
Schedule J-Advertising Ir	icome (see instri	uctions)		ı							ı	
Income From Per				nsoli	dated Ba	sis							
	I	VII										T	
1 Name of penodical	2. Gross advertising income		Direct tising co		4 Adver gain or (los 2 minus c a gain, co cols 5 thr	ss) (col ol 3) If mpute	5.	Circ	ulation ime	6. Read cosi	•	costs (minus co not m	s readership column 6 dumn 5, but ore than mn 4)
(1)													
(2)												7	
(3)		-										7	
(4)						•					-	7	
Totals (carry to Part II, line (5))													
													A T

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 penodical	2 Gross advertising income	3 Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)		-				
(3)						
(4)						
Totals from Part I			STATE OF THE STATE OF	经。中国的政策	学说学习学	
Totals, Part II (lines 1-5) ▶	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 27

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)		%	
otal, Enter here and on page 1, Part II, line 14			

Form 990-T (2018)

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

INVESTMENT IN VARIOUS PARTNERSHIPS

(10,590,840)

TOTAL TO FORM 990-T, PAGE 1, LINE 5

	ATTACHMENT 2
FORM 990T - PART I - LINE 5 - INCOME (LOSS) FROM PARTNERSHIPS	NEW THOOME
DADTHED CUTD NAME	NET INCOME
PARTNERSHIP NAME	OR (LOSS)
ABRY PARTNERS VI, LP 26-1643026	(16,972)
ARCLIGHT ENERGY PARTNERS FUND VI, L.P. 61-1736207	(834,963)
BAIN CAPITAL X PA FUND, L.P. 33-1185614	3,090
BLACKSTONE REAL ESTATE PARTNERS VI.TE.2 L.P. 20-8081716	8,473
BLACKSTONE REAL ESTATE PARTNERS VI.TE.2-NQ L.P26-1129052	(356)
BLACKSTONE RGIS CAPITAL PARTNERS V L.P20-8866363	(4,793)
BLUE ROAD CAPITAL LP 46-4196871	(635,096)
BLUE ROAD VANGUARD AIV, LP 98-1257483	(409,959)
BRC VANGUARD CO-INVEST, LP 30-0956670	(408,424)
CHELMSFORD WIND DOWN L.P. 27-2025902	(2,935)
FORTRESS INVESTMENT FUND V FUND A L.P. 98-0534591	(25, 987)
JUNIPER CAPITAL II, L.P. 36-4797749	(7,008,637)
JUNIPER CAPITAL III, L.P. 82-285037	(688,985)
MAKENA CAPITAL ASSOCIATES U.S., L.P. 20-4310816	(919,971)
NORTHWOOD REAL ESTATE PARTNERS AIV DC-AZ LP 83-3084751	(2,105)
NORTHWOOD REAL ESTATE PARTNERS LP 26-0417147	15,255
NW EUROPE NO.2 LIMITED PARTNERSHIP_98-0703034	28,095
PERMIAN FUND LP_26-2747936	(151)
PROVIDENCE EQUITY PARTNERS VI LP_20-5898480	884
REDWOOD DRAWDOWN DOMESTIC FUND II, L.P. 81-5442952	951
REGENCY COMMERCIAL ASSOCIATES LLC_35-2004596	438,552
ROCK SPRINGS CAPITAL FUND LP_90-1009219	210
ROSE GROVE PARTNERS I, LP 20-5609969	24,878
SUNRIVER FUND, LP_37-1790589	(16,721)
TA XI DO AIV, L.P. 46-5728474	6,668
TA XI ECM AIV, L.P27-4015229	267
TA XI FLS AIV, L.P38-3971457	(1,286)
TA XI FS-B FEEDER, L.P. 45-2793765	4,893
TA XI NS-A FEEDER, L.P. 30-0867819	(3,063)
TA XI PC AIV, L.P. 37-1656550	4,373
TA XI SMM AIV, L.P. 45-1652989	(1,138)
TPG BLUEGRASS V AIV 2, LP 20-4914588	(52)
TPG V VE-AIV 2, LP 27-1363255	(2,890)
TPG VI CAYFIR AIV II, LP 27-5035585	1,629
TPG VI DE AIV II, LP 27-3553169	17,405
TPG VI VE-AIV 2, LP_27-1366685	(2,138)
VIA Seed Technology Partners Explorer Fund LP 47-5603762	4,214
VIA Seed Technology Partners II LP_80-0961538	512
VIA Seed Technology Partners Platform Fund LP_47-5591775	1,839
WALTON STREET REAL ESTATE FUND V, L.P. 20-3719884	(6,082)
WESTBROOK REAL ESTATE FUND VII, L.P. 20-5372857	(711)
ZELL EQUITY INTERNATIONAL FUND VI, LP_98-1220286	(159,613)

ATTACHMENT 4

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

SEC 59(E)(2) EXPENDITURE AMORTIZATION PY ASSETS ACCOUNTING FEE

766,073. 186,325.

PART II - LINE 28 - OTHER DEDUCTIONS

952,398.

ATTACHMENT 5

FORM 990T - PART VI- LINE 56 - FOREIGN COUNTRIES WHICH FILER HAS INTEREST IN BANK ACCOUNT

BRAZIL

CANADA

CHINA

COLOMBIA

CROATIA

CZECH REPUBLIC

DENMARK

FRANCE

GREECE

HUNGARY

IRELAND

ISRAEL

JAPAN

MALAYSIA

MEXICO

POLAND

RUSSIA

SOUTH KOREA

TURKEY

UNITED KINGDOM

UNIVERSITY OF ILLINOIS FOUNDATION

EIN:37-6006007

Tax year ended: 6/30/2019

ATTACHMENT 6

NET OPERATING LOSS SCHEDULE

YEAR ENDING	AMOUNT GENERATED	AMOUNT USED IN PREVIOUS YEAR	AMOUNT USED IN CURRENT YEAR	NOL CARRYFORWARD	EXPERATION DATE
6/30/2017	512,004	-	-	512,004	6/30/2036
6/30/2018	3,820,323 *	-	-	3,820,323	6/30/2037
6/30/2019	10,848,323	<u>-</u>	-	10,848,323	N/A
TOTAL	14,668,646	-	-	14,668,646	_

^{*}Amount was adjusted from what was filed on the 2017 Form 990-T by \$22,193 due to the repeal of IRC Section 512(a)(7)

UNIVERSITY OF ILLINOIS FOUNDATION

EIN:37-6006007

Tax year ended: 6/30/2019

ATTACHMENT 7

Charitable Contribution Carryforward Schedule

		AMOUNT	AMOUNT		
		USED IN	USED IN		
	AMOUNT	PREVIOUS	CURRENT		EXPERATION
YEAR ENDING	GENERATED	YEAR	YEAR	CARRYFORWARD	DATE
6/30/2019	2,609			2,609	12/31/2022
TOTAL	2,609			2,609	

SCHEDULE D (Form 1120)

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

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.

UNI	VERSITY OF ILLINOIS FOUNDATION					37-6006007
	Short-Term Capital Gains and Losses	(See instructions.)	 		
	See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from For 8949, Part I, lin column (g)	m(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b			55,61111 (g)		(3)
16	Totals for all transactions reported on Form(s) 8949 with Box A checked		-			
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	42,255.				42,255.
4	Short-term capital gain from installment sales from	Form 6252, line 26 or 3	7		4_	
5	Short-term capital gain or (loss) from like-kind excha	nges from Form 8824			5_	
6	Unused capital loss carryover (attach computation)		• • • • • • • • • • • • • • • • • • • •		6_	(-)
7	Net short-term capital gain or (loss) Combine lines	1a through 6 in column	h		. 7	42,255.
	Long-Term Capital Gains and Losses	(See instructions.)				
	See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from For 8949, Part II, lir column (g)	m(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.			(9)		
8 b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949			 		
	with Box F checked	904.		<u> </u>	·	904.
11	Enter gain from Form 4797, line 7 or 9				11	658,389.
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 37	7		12	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13	
14	Capital gain distributions (see instructions)				14	
15	Net long-term capital gain or (loss) Combine lines 8 Summary of Parts I and II	a through 14 in column	h		15	659,293.
16	Enter excess of net short-term capital gain (line 7) o	ver net long-term capita	il loss (line 15)		16	42,255.
17	Net capital gain. Enter excess of net long-term capit	=			17	659,293.
18	Add lines 16 and 17 Enter here and on Form 1120	•	proper line on other re	turns	18	701,548.
	Note: If losses exceed gains, see Capital losses in the	a instructions				

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

Schedule D (Form 1120) 2018

Form 8949

Sales and Other Dispositions of Capital Assets

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

OMB No 1545-0074

Attachment Sequence No 12A

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.

Social security number or taxpayer identification number

Name(s) shown on return UNIVERSITY OF ILLINOIS FOUNDATION

37-6006007

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

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, por one or more of the boxes, com	page 1, for e	ach applicab	le box If you ha	ve more short-	term transac		- •
(A) Short-term transactions re (B) Short-term transactions re X (C) Short-term transactions re	eported on F	orm(s) 1099-	B showing basis	•	•	e Note above)	- <u>-</u>
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	Cost or other basis See the Note below	If you enter an a enter a co	any, to gain or loss amount in column (g), de in column (f) irate instructions.	(h) Gain or (loss) Subtract column (
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed of (Mo, day, yr)	(sales pnce) (see instructions)	and see Column (e) In the separate Instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) at combine the resu with column (g)
ROCK SPRINGS CAPITAL FUND LP_90-1			591.		-		59
PA XT FCM ATV 1 P 27-4015229			15				ļ ,

TA XI FS-B FEEDER, L.P._45-279376 -1 MAKENA CAPITAL ASSOCIATES U.S., L -218 -218 REDWOOD DRAWDOWN DOMESTIC FUND II 37,586. 37,586 ROSE GROVE PARTNERS I, LP_20-5609 2,595 2,595. ARCLIGHT ENERGY PARTNERS FUND VI 1,687 1,687. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract

negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)

42,255 42,255.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2018)

adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

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

Name(s) shown on return	Nam	e and SSN or taxpa	yer identification no not required if shown on other side
UNIVERSITY	OF	ILLINOIS	FOUNDATION

Social security number or taxpayer identification number

37-6006007

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

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.

n	OL	e of the boxes, complete as many forms with the same box checked as you need
٢		(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
ľ		(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 10	x	(F) Long-term	transactions no	t reported to vo	u on Form 1099-
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(a) Description of property	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of (Mo , day, yr)	(d) Proceeds (sales pnce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)					(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
TA XI ECM AIV, L P _27-4015229		i i	32				32
TA XI FS-B FEEDER, L P _45-279376			-1,310				-1,310.
TA XI SMM AIV, L P _45-1652989			2				2.
TPG VI DE AIV II, LP_27-3553169			-182				-182
BAIN CAPITAL X PA FUND, L P _33-1			14,128.				14,128
MAKENA CAPITAL ASSOCIATES U S , L			-11,888				-11,888
ROSE GROVE PARTNERS I, LP_20-5609			122	,			122
			-				
2 Totals Add the amounts in columns of negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	here and incli is checked), line	ude on your 9 (if Box E	904				904.

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 (2018)

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