,		
/	C&E	
	943)
/	243	_

2939305802200

ОМВ	No	1545-0047

43/		,	Exempt Organizatio	n Rusiness	Inc	ome Tax Re	turn		OMB No 1545-0047
Form	90-T	•	and proxy ta				, tu i i i		
			• • •				-00	ļ	2019
		For cale	ndar year 2019 or other tax year be					· ·	
•	nt of the Treasury evenue Service	▶ Do i	► Go to www.irs.gov/Form9 not enter SSN numbers on this for					Ope	n to Public Inspection for (c)(3) Organizations Only
. I C	eck box if	7 50.	Name of organization (•••	r identification number
	dress changed t under section	ł	THE MCKNIGHT FOUNDATION	•	uno 300	. mandonons ,			es' trust, see instructions)
	(C)(O3)	Print	Number, street, and room or suite n		nstruction	ons		4	11-0754835
408		Type	710 S 2ND ST STE 400				ī		business activity code
☐ 408	_	lighe	City or town, state or province, coul	ntry, and ZIP or foreig	n posta	l code		(See instr	uctions)
529	(a)		MINNEAPOLIS, MN 55401-229	0					523000
C Book v	alue of all assets of year	F Gr	oup exemption number (See	instructions.) ▶					
	2,552,879,588	G Cr	neck organization type 🕨 🔽	501(c) corporati	on 🗸	☐ 501(c) trust		401(a) tru	st 🔲 Other trust
H Ente	er the number	of the c	organization's unrelated trades	s or businesses.		1 Do	escribe	the only (or first) unrelated
			PARTNERSHIP INVESTMENT						
			at the end of the previous se	ntence, complete	Parts	s I and II, comple	te a Scl	hedule M	for each additional
			omplete Parts III-V.						
	-		e corporation a subsidiary in an			nt-subsidiary contro	olled gro	up? .	► ☐ Yes ☑ No
			and identifying number of the	parent corporation	on. 📐				
			► THERESE CASEY			Telephone r			(612) 333-4220
			e or Business Income			(A) Income	(B) E	xpenses	(C) Net
	Gross receipts			a Dolomoo N		_			
	Less returns a			c Balance ►	1c 2	0			
	-		Schedule A, line 7)		3	0	-		
	•		ne (attach Schedule D)		4a	1,603,385	 	/	1,603,385
			4797, Part II, line 17) (attach f		4b	1,003,303	_		1,000,000
	Capital loss de		• •		4c	0	 _/		0
	•		a partnership or an S corp		<u> </u>				<u> </u>
	statement) ´.				5	2,833,621			2,833,621
6	Rent income (Schedu	ıle C)		6	0			0 0
			ced income (Schedule E) .		7	0			0 0
			s, and rents from a controlled organiz	zation (Schedule F)	8/	0			0 0
9	Investment incon	ne of a so	ection 501(c)(7), (9), or (17) organiza	ation (Schedule G)	9	0			0 0
10	Exploited exer	npt act	ıvıty ıncome (Schedule I)	/	10	0			0 0
11 .	Advertising inc	come (S	Schedule J)	/	11	0	_		0 0
12	Other income	(See ins	structions; attach schedule) .	/	12	0			0
	Total. Combin			<u>./</u>	13	4,437,006			0 4,437,006
Part I			Taken Elsewhere (See inst		tation	s on deductions.	(Dedu	ctions mi	ust be directly
			he unrelated business incon					1	
	•		cers, directors, and trustees (. 14	-
	Salaries and w	_	/	RECE	IVE			. 15	
	Repairs and m Bad debts .	amiena			•	. \overline{\infty}		16	
			lule) (see instructions)	S NOV 2	3 20	20 3		18	
	Taxes and lice		idie) (see instructions)	(A)	·			. 19	
			Form 4562)	OGDI	=N	UT 20		0	0,001
			med on Schedule A and else	where on return	<u>-14,</u>	. 21a		0 211	0
	Depletion							. 22	
	Contributions	to defe	rred compensation plans .					23	
			grams					. 24	30,952
			nses (Schedule I)		:			. 25	
26	Excess reader	ship co	sts (Schedule J)	/ .				. 26	0
27	Other/deduction	ons (atta	ach schedule)	()	130	. //		. 27	
	/		ld lines 14 through 27	711	$\mathcal{M}^{\rightarrow}$	\forall λ λ λ λ		. 28	3,040,679
			xable income before net ope						1,396,327
			perating loss arising in tax y				2018_(see	
,							. (.	1 30	
			xable income. Subtract line 3				<u> </u>	1 34	
Ear Dan	enwork Reduct	ion Act	Notice see instructions		Cot	No. 11201 I		-	Form 990-T (2019)

The McKnight Foundation 41-0754835

Form 990	0-1 (2019)		Page Z
Part I			
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	1 1	
	instructions)	3 2	1,396,327
33	Amounts paid for disallowed fringes	33	
	Charitable contributions (see instructions for limitation rules)	34	139,633
35	Total unrelated business taxable income before pre-2018 NOIs and specific deduction. Subtract line	`	
	34 from the sum of lines 32 and 33	35	1,256,694
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)	2 \$6	0
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35		1,256,694
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	' 	
	enter the smaller of zero or line 37	1 39	1,255,694
Part I			
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	263,696
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		
	the amount on line 39 from. Tax rate schedule or Schedule D (Form 1041)	41	
42	Proxy tax. See instructions	42	_
	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	263,696
	V Tax and Payments	- j- '-	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 11,96	4	
	Other credits (see instructions)	7	
	General business credit. Attach Form 3800 (see instructions)	2	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	7.3.	
е	Total credits. Add lines 46a through 46d	46e	13,336
47	Subtract line 46e from line 45	47	250,360
	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	3 48	0
49	Total tax. Add lines 47 and 48 (see instructions)		250,360
	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		
	Payments: A 2018 overpayment credited to 2019	5	
	•	0	
	Tax deposited with Form 8868	7	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	7	
е		3	
f	Credit for small employer health insurance premiums (attach Form 8941) . 51f		
g	Other credits, adjustments, and payments: Form 2439		
	☐ Form 4136 ☐ Other ☐ 0 Total 51g	0 _,	
52	Total payments. Add lines 51a through 51g	52	383,568
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	0
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	0
、55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid . \\O \rightarrow	55	133,208
56	Enter the amount of line 55 you want	56	0
Part \	Statements Regarding Certain Activities and Other Information (see instructions)	<u> </u>	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or ot	her authori	ty Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma	y have to fi	ıle
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the for	eign count	ry
	here >		
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ign trust? .	✓
	If "Yes," see instructions for other forms the organization may have to file.		
59	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$	2,43	1 1
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the bestrue, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	t of my knowle	edge and belief, it is
Sign	True, correct, and complete declaration of preparer former main taxpayer) is based on an information of which preparer has any knowledge		discuss this return
Here	VP OF FINANCE & OPERATIONS		parer shown below ons)?
	(Signature of officer) (Date) Title	,	·
Paid		eck 🔲 if	PTIN
Prepa	NICOLE BENCIK CANAL FOLLOW 11/12/2020 self	-employed	P00756195
•	Firm's name CROWE LLP Firm	n's EIN ►	35-0921680
Use (Firm's address > 225 VVEST VVACKER DRIVE, SUITE 2000, CHICAGO, IL 00000-1224 Pho		12) 899-7000
McKnia	ht Foundation 2 11/4/2020 10:5	4:57 AM Fo	rm 990-T (2019)

	90-1 (2019)				_						Page 3
Sche	dule A-Cost of Goods S	old. En	ter method of in	nvent	ory va	aluation ►					
1	Inventory at beginning of year	ar	1	0	6	Inventory a	at end of year	6			0
2	Purchases	. [_	2	0	7	Cost of g	oods sold. Subtract line	١.			
3	Cost of labor		3	0		6 from line	5. Enter here and in Part		j		
4a	Additional section 263A co	osts				I, line 2		7			0
	(attach schedule)	. 4	4a	0	8	Do the ru	les of section 263A (with	resp	ect to	Yes	No
b	Other costs (attach schedule	e) [4	4b	0			roduced or acquired for re				
5	Total. Add lines 1 through 4		5	0			anization?				✓
Sche	dule C-Rent Income (Fro	om Re	al Property and	i Per	sonal	Property	Leased With Real Prop	erty)			
(see	instructions)										
1. Desc	ription of property						-"				
(1)										'	
(2)			·-								
(3)											
(4)											_
	2. R	ent receiv	ed or accrued								
	om personal property (if the percentage personal property is more than 10% be more than 50%)		(b) From real ar percentage of rent 50% or if the rent	for pers	onal pr	operty exceeds	3(a) Deductions directly c in columns 2(a) and 2				ne
(1)											
(2)											
(3)										-	
(4)											
Total		0	Total				0				
	al income. Add totals of columns	c 2(a) and					(b) Total deductions. Enter here and on page 1,				
	nd on page 1, Part I, line 6, colum		• E(b) E(te)				0 Part I, line 6, column (B) ▶				0
	dule E-Unrelated Debt-F		ed Income (see	ınstru	ctions	5)	<u> </u>				
			•	2 . G	iross inc	come from or	3. Deductions directly conn			able to	0
	 Description of debt-finar 	nced prop	erty		able to	debt-financed	debt-finance (a) Straight line depreciation		Other ded	uction	
					pro	perty	(attach schedule)		attach sch		•
(1)					_				-		
(2)						·					
(3)											
(4)											
	Amount of average acquisition debt on or llocable to debt-financed roperty (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property th schedule)		4 dı	olumn vided olumn 5	7. Gross income reportable (column 2 × column 6)		llocable de n 6 × total 3(a) and 3	of colu	
(1)						%					
(2)						%					
(3)						%					
(4)						%					
							Enter here and on page 1, Part I, line 7, column (A)		nere and o		•
Totals			•			•	0				0
Total o	lividends-received deductions	ncluded	ın column 8			<u> </u>	. •				0

Schedule F-Interest, Ann	uities, Royalties,				janizations (se	e instruc	ctions)		
		Exempt	Controlled	d Organizations					
Name of controlled organization	2. Employer dentification number		lated income instructions)	4. Total of specified payments made	5. Part of colum included in the corganization's gro	controlling	conn	eductions directly ected with income in column 5	
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organia	zations			•	·-		•		
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column included in the coorganization's gro	controlling	conne	reductions directly cted with income in column 10	
(1)							 	 	
(2)			_						
(3)							1		
(4)									
				_	Add columns 5 Enter here and c Part I, line 8, co	on page 1, olumn (A)	Enter h Part I,	columns 6 and 11 nere and on page 1, line 8, column (B)	
Totals .	neems of a Coat	ion EO1/	a)/7) /0)	. P	zotion (see usel))	0	
Schedule G-Investment i	income of a Sect	ion su i (Deductions				otal deductions	
1. Description of income	2. Amount o	fincome	dire	ctly connected ach schedule)	4. Set-aside (attach schedi		and set-asides (col 3 plus col 4)		
(1)									
(2)									
(3)								-	
(4)			_				F		
	Enter here and Part I, line 9, o		,					re and on page 1, ne 9, column (B).	
Totals	>		<u> </u>					0	
Schedule I - Exploited Exe	empt Activity Inc	ome, Oth	ner Than	Advertising Ir	icome (see inst	ructions	5)	1	
1. Description of exploited activi	2. Gross unrelated business inco from trade of business	me conn prod ur ur	Expenses directly sected with duction of hrelated ess income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attribu	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)									
(2)									
(3)							· ·		
(4)									
	Enter here and page 1, Part line 10, col (/	I, page	here and on e 1, Part I, I0, col (B)					Enter here and on page 1, Part II, line 25	
Totals .	•	_0	0	<u> </u>				0	
Schedule J-Advertising I	<u> </u>								
Part I Income From P	eriodicals Repor	ted on a	Consoli	ή		1			
1. Name of periodical	2. Gross advertising income		. Direct tising costs	4. Advertising gain or (loss) (cot 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	1	dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)						ļ			
(2)								ļ !	
(3)						<u> </u>		ļ	
(4)				ļ				ļ ļ	
Totals (carry to Part II, line (5))		0	0	0					
rotais (carry to Fart II, line (5))					1	·	F	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.)

A Advertising 7 Excess readership

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

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)		%	
Total. Enter here and on page 1, Part II, line 14		>	0

Form **990-T** (2019)

SCHEDULE D (Form 1120)

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC,

2019

OMB No 1545-0123

Department of the Treasure Internal Revenue Service

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.

Employer identification number 41-0754835 THE MCKNIGHT FOUNDATION Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ► ☐ Yes ☑ No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss Short-Term Capital Gains and Losses (See instructions.) (h) Gain or (loss) See instructions for how to figure the amounts to enter on (g) Adjustments to gain (e) the lines below. Subtract column (e) from or loss from Form(s) Proceeds Cost column (d) and combine 8949. Part I. line 2. This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (g) whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 0 with Box A checked Totals for all transactions reported on Form(s) 8949 0 with Box B checked Totals for all transactions reported on Form(s) 8949 0 0 9.742 with Box C checked 9.742 4 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 6 Unused capital loss carryover (attach computation) 6 0) 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 7 9,742 Long-Term Capital Gains and Losses (See instructions. (h) Gain or (loss) See instructions for how to figure the amounts to enter on (a) Adjustments to gain (e) the lines below. or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (a) whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949. leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 0 Totals for all transactions reported on Form(s) 8949 0 with Box E checked Totals for all transactions reported on Form(s) 8949 1,444,967 0 O 1,444,967 with Box F checked 148,676 11 11 Enter gain from Form 4797, line 7 or 9 12 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 14 14 Capital gain distributions (see instructions) . . 1,593,643 15 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h Part III Summary of Parts I and II

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

Note: If losses exceed gains, see Capital Losses in the instructions.

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)

17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)

18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns.

Cat No 11460M

Schedule D (Form 1120) 2019

16

17

18

9.742

1,593,643

1,603,385

Department of the Treasury

Sales and Other Dispositions of Capital Assets

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

Attachment

OMB No 1545-0074

Internal Revenue Service Name(s) shown on return

THE MCKNIGHT FOUNDATION

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

12A Sequence No

Social security number or taxpayer identification number 41-0754835

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 Part I 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 If you enter an amount in column (g), (e) enter a code in column (f) Gain or (loss). (c) (d) Cost or other basis (a) (b) See the separate instructions. Proceeds See the Note below Date sold or Subtract column (e) Description of property Date acquired disposed of (sales price) and see Column (e) from column (d) and (Example 100 sh XYZ Co) (Mo, day, yr) (f) (Mo . dav. vr (see instructions) in the separate (q) combine the result Code(s) from instructions Amount of with column (g) instructions adjustment FROM SCHEDULE K-1 (FORM 1065) **VARIOUS VARIOUS** 8.267 8.267 FROM FORM 6781 **VARIOUS VARIOUS** 1,475 1,475 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

9.742

9 742

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) ▶

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

Social security number or taxpayer identification number 41-0754835

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

Part II

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

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

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

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

1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Not e below and see <i>Column (e)</i> in the separate instructions	See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
CAPITAL GAIN FROM SALE OF PTP INTERESTS/UNITS	VARIOUS	VARIOUS	842			adjustment	842
FROM SCHEDULE K-1 (FORM 1065)	VARIOUS	VARIOUS	1,441,913				1,441,913
FROM FORM 6781	VARIOUS	VARIOUS	2,212				2,212
					:		
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and incl is checked), lin	ude on your le 9 (if Box E	1,444,967	0		0	1,444,967

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)

General Business Credit

▶ Go to www.irs.gov/Form3800 for instructions and the latest information.

OMB No 1545-0895

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Attachment Sequence No 22

Identifying number

THE	MCKNIGHT FOUNDATION	41-075	4835
Par	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TM	T)	
	(See instructions and complete Part(s) III before Parts I and II.)	•	
1	General business credit from line 2 of all Parts III with box A checked	. 1	0
2	Passive activity credits from line 2 of all Parts III with box B checked 2	191	
3	Enter the applicable passive activity credits allowed for 2019. See instructions	. 3	1,191
4	Carryforward of general business credit to 2019. Enter the amount from line 2 of Part III with box checked. See instructions for statement to attach		0
5	Carryback of general business credit from 2020. Enter the amount from line 2 of Part III with box		
	checked. See instructions		0
6	Add lines 1, 3, 4, and 5	. 6	1,191
Part			
7	Regular tax before credits:		
8	 Individuals. Enter the sum of the amounts from Form 1040 or 1040-SR, line 12a, and Schedule 2 (Form 1040 or 1040-SR), line 2, or the sum of the amounts from Form 1040-NR, lines 42 and 44	. 8	263,696
9	Add lines 7 and 8	. 9	263,696
10a	Foreign tax credit	964	
b	Certain allowable credits (see instructions)	_	
	Add lines 10a and 10b	. 10c	11,964
			_
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line	16 11	251,732
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0 12 251,	732	
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See	683	
14	Tentative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 9		
	• Corporations. Enter -0	0	
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52		
15	Enter the greater of line 13 or line 14	. 15	56,683
16	Subtract line 15 from line 11. If zero or less, enter -0-		195,049
17	Enter the smaller of line 6 or line 16	. 17	1,191
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, reorganization.	or	
For Pa	perwork Reduction Act Notice, see separate instructions. Cat No 12392F	F	orm 3800 (2019)

Par	II Allowable Credit (continued)		
Note	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on i	ine 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	0
19	Enter the greater of line 13 or line 18	19	56,683
20	Subtract line 19 from line 11. If zero or less, enter -0	20	195,049
21	Subtract line 17 from line 20. If zero or less, enter -0	21	193,858
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	0
23	Passive activity credit from line 3 of all Parts III with box B checked 23 0		
24	Enter the applicable passive activity credit allowed for 2019. See instructions	24	
25	Add lines 22 and 24	25	0
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11 If zero or less, enter -0	27	195,049
28	Add lines 17 and 26	28	1,191
29	Subtract line 28 from line 27. If zero or less, enter -0	29	193,858
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	0
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 181		
33	Enter the applicable passive activity credits allowed for 2019. See instructions	33	181
34	Carryforward of business credit to 2019. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	0
35	Carryback of business credit from 2020. Enter the amount from line 5 of Part III with box D checked. See instructions	35	0
36	Add lines 30, 33, 34, and 35	36	181
37	Enter the smaller of line 29 or line 36	37	181
38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. Individuals Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51 Corporations. Form 1120, Schedule J, Part I, line 5c Estates and trusts. Form 1041, Schedule G, line 2b	38	1,372

For	m 380	0 (2019)				Page
Nar	ne(s) s	hown on return		Identifyi	ng numb	er
		KNIGHT FOUNDATION			41-07	754835
P	art II	General Business Credits or Eligible Small Business Credits (see ins	tructi	ons)		
Co	mple	te a separate Part III for each box checked below. See instructions.				
Α		General Business Credit From a Non-Passive Activity E Reserved				
В	V	General Business Credit From a Passive Activity F Reserved				
С		General Business Credit Carryforwards G 🔲 Eligible Small Busin	ness C	Credit Carryfoi	wards	
D		General Business Credit Carrybacks H 🔲 Reserved				
ı	If yo	u are filing more than one Part III with box A or B checked, complete and attach first an	additio	onal Part III con	mbining	amounts from
	all P	arts III with box A or B checked. Check here if this is the consolidated Part III				▶ 🗹
		(a) Description of credit		(b)		(c)
No	te: Or	n any line where the credit is from more than one source, a separate Part III is needed for each		If claiming the of from a pass-thr		Enter the appropriate
		ough entity.		entity, enter the	e EIN	amount
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			(
	b	Reserved	1b			
	С	Increasing research activities (Form 6765)	1c			1,189
	d	Low-income housing (Form 8586, Part I only)	1d			2
	е	Disabled access (Form 8826) (see instructions for limitation)	1e			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			(
	g	Indian employment (Form 8845)	1g			(
	h	Orphan drug (Form 8820)	1h			
	i	New markets (Form 8874)	1i		<u> </u>	
	i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		- +	
	, k	Employer-provided child care facilities and services (Form 8882) (see instructions	-''			
	Λ.	for limitation)	1k			(
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11		- +	
	m	Low sulfur diesel fuel production (Form 8896)	1m	-		
	n	Distilled spirits (Form 8906)	1n			
		Nonconventional source fuel (carryforward only)	10			
	0					
	p	Energy efficient home (Form 8908)	1p			
	q	Energy efficient appliance (carryforward only)	1q			<u>`</u>
	r	Alternative motor vehicle (Form 8910)	1r			
	S	Alternative fuel vehicle refueling property (Form 8911)	1s			
	t	Enhanced oil recovery credit (Form 8830)	1t			
	u	Mine rescue team training (Form 8923)	1u			
	V	Agricultural chemicals security (carryforward only)	10		- -	
	W	Employer differential wage payments (Form 8932)	1w		_	
	X	Carbon oxide sequestration (Form 8933)	1x			
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	<u>1y</u>			
	Z	Qualified plug-in electric vehicle (carryforward only)	1z			(
	aa	Employee retention (Form 5884-A)	1aa			C
	bb	General credits from an electing large partnership (carryforward only)	1bb			C
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other				
		credits (see instructions)	1zz			C
2		Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			1,191
3	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			
4	la	Investment (Form 3468, Part III) (attach Form 3468)	4a			
	b	Work opportunity (Form 5884)	4b			C
	С	Biofuel producer (Form 6478)	4c			
	d	Low-income housing (Form 8586, Part II)	4d			
	e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			C
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f			181
	g	Qualified railroad track maintenance (Form 8900)	4g			
	h	Small employer health insurance premiums (Form 8941)	4h			
	i	Increasing research activities (Form 6765)	4i			C
	j	Employer credit for paid family and medical leave (Form 8994)	4j	_		C
	z	Other	4z			C
Ę		Add lines 4a through 4z and enter here and on the applicable line of Part II	5			181
6		Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			1,372

Nam	ne(s) shown on return		Identifying nur	nber
TH	E MCKNIGHT FOUNDATION		41-	0754835
Pa	rt III General Business Credits or Eligible Small Business Credits (see ins	truction	ns)	
	mplete a separate Part III for each box checked below. See instructions.			
Α	General Business Credit From a Non-Passive Activity E Reserved			
В	☑ General Business Credit From a Passive Activity			
	General Business Credit Carryforwards G Eligible Small Busin	ness Cre	edit Carryforward	s
	☐ General Business Credit Carrybacks H Reserved		•	
	If you are filing more than one Part III with box A or B checked, complete and attach first an	addition	al Part III combini	ng amounts from
	all Parts III with box A or B checked. Check here if this is the consolidated Part III			. ĭ > 🖂
	(a) Description of credit	-	(b)	(c)
	e: On any line where the credit is from more than one source, a separate Part III is needed for each s-through entity	fr	claiming the credit rom a pass-through entity, enter the EIN	Enter the appropriate amount
1	a Investment (Form 3468, Part II only) (attach Form 3468)	1a		
	b Reserved	1b		
	c Increasing research activities (Form 6765)	1c	26-1269055	230
	d Low-income housing (Form 8586, Part I only)	1d		
	e Disabled access (Form 8826) (see instructions for limitation)	1e		
	f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
	g Indian employment (Form 8845)	1g		
	h Orphan drug (Form 8820)	1h		
	i New markets (Form 8874)	1i		
	j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		
	k Employer-provided child care facilities and services (Form 8882) (see instructions			
	for limitation)	1k		
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
	m Low sulfur diesel fuel production (Form 8896)	1m		
	n Distilled spirits (Form 8906)	1n		
	Nonconventional source fuel (carryforward only)	10		
	p Energy efficient home (Form 8908)	1p		
	q Energy efficient appliance (carryforward only)	1q		
	r Alternative motor vehicle (Form 8910)	1r		
	s Alternative fuel vehicle refueling property (Form 8911)	1s		
	t Enhanced oil recovery credit (Form 8830)	1t		
	u Mine rescue team training (Form 8923)	1u		
	Agricultural chemicals security (carryforward only)	10		
	w Employer differential wage payments (Form 8932)	1w		
	x Carbon oxide sequestration (Form 8933)	1x 1y		
	y Qualified plug-in electric drive motor vehicle (Form 8936)	1z		
	aa Employee retention (Form 5884-A)	1aa		_ .
	bb General credits from an electing large partnership (carryforward only)	1bb		
	zz Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	·	2		230
3		3		
	a Investment (Form 3468, Part III) (attach Form 3468)	4a		
	b Work opportunity (Form 5884)	4b		
	c Biofuel producer (Form 6478)	4c		
	d Low-income housing (Form 8586, Part II)	4d		
	e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
	f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	g Qualified railroad track maintenance (Form 8900)	4g		
	h Small employer health insurance premiums (Form 8941)	4h		
	i Increasing research activities (Form 6765)	4i		
	Employer credit for paid family and medical leave (Form 8994)	4j	_	
	z Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		230

Na	Name(s) shown on return					
TH	HE MC	CKNIGHT FOUNDATION			41-0	754835
Р	Part III General Business Credits or Eligible Small Business Credits (see instructions)					
Co	omple	ete a separate Part III for each box checked below. See instructions.				
Α		General Business Credit From a Non-Passive Activity E Reserved				
В	V	General Business Credit From a Passive Activity F Reserved				
C		General Business Credit Carryforwards G 🔲 Eligible Small Busin	iess C	redit	Carryforward:	S
D		General Business Credit Carrybacks H 🔲 Reserved				
ı	If yo	ou are filing more than one Part III with box A or B checked, complete and attach first an a	additio	nal Pa	art III combinir	ng amounts from
_	all P	arts III with box A or B checked. Check here if this is the consolidated Part III				▶ 🗌
		(a) Description of credit		lf alau	(b)	(c) Enter the
		n any line where the credit is from more than one source, a separate Part III is needed for each ough entity		from a	ming the credit a pass-through , enter the EIN	appropriate amount
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			
	b	Reserved	1b			
	C	Increasing research activities (Form 6765)	1c	36	5-4778201	735
	d	Low-income housing (Form 8586, Part I only)	1d			
	e	Disabled access (Form 8826) (see instructions for limitation)	1e			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			
	g	Indian employment (Form 8845)	1g			
	h	Orphan drug (Form 8820)	1h			
	j	New markets (Form 8874)	1i			
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j			
	k	Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k			
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11			
	m	Low sulfur diesel fuel production (Form 8896)	1m			-
	n	Distilled spirits (Form 8906)	1n		.	
	0	Nonconventional source fuel (carryforward only)	10			
	p	Energy efficient home (Form 8908)	1p			
	q	Energy efficient appliance (carryforward only)	1g			
	r	Alternative motor vehicle (Form 8910)	1r			
	S	Alternative fuel vehicle refueling property (Form 8911)	1s			
	t	Enhanced oil recovery credit (Form 8830)	1t		-	··
	u	Mine rescue team training (Form 8923)	1u			
	v	Agricultural chemicals security (carryforward only)	1v			
	w	Employer differential wage payments (Form 8932)	1w		"	
	x	Carbon oxide sequestration (Form 8933)	1x			
	у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y			
	Z	Qualified plug-in electric vehicle (carryforward only)	1z			
	aa	Employee retention (Form 5884-A)	1aa			
	bb	General credits from an electing large partnership (carryforward only)	1bb			
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1			
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	1zz 2			735
	2 3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			755
	ა 4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		<u> </u>	
	₩a b	Work opportunity (Form 5884)	4b		·	
	C	Biofuel producer (Form 6478)	4c			
	ď	Low-income housing (Form 8586, Part II)	4d			<u></u>
	e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	36	4778201	180
	, g	Qualified railroad track maintenance (Form 8900)	4g	- 55		
	h	Small employer health insurance premiums (Form 8941)	4h			
	i	Increasing research activities (Form 6765)	4i			
	i	Employer credit for paid family and medical leave (Form 8994)	4i	_	_	
	j Z	Other	4z			
į	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		-	180
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			915
_		<u> </u>				

Nar	Name(s) shown on return								
TH	THE MCKNIGHT FOUNDATION 41-0754835								
Pa	Part III General Business Credits or Eligible Small Business Credits (see instructions)								
		ete a separate Part III for each box checked below. See instructions.							
Α	General Business Credit From a Non-Passive Activity E Reserved								
В	V	General Business Credit From a Passive Activity F 🔳 Reserved							
С		General Business Credit Carryforwards G 🔲 Eligible Small Busin	ess C	redit C	Carryforward:	S			
D		General Business Credit Carrybacks H 🔳 Reserved			-				
ı	If yo	u are filing more than one Part III with box A or B checked, complete and attach first an	additio	nal Pa	rt III combinir	ng amounts from			
		arts III with box A or B checked. Check here if this is the consolidated Part III							
		(a) Description of credit			(b)	(c)			
	ote: On any line where the credit is from more than one source, a separate Part III is needed for each ass-through entity.								
	fa	Investment (Form 3468, Part II only) (attach Form 3468)	1a						
	b	Reserved	1b						
	С	Increasing research activities (Form 6765)	1c	26-	3872534	11			
	d	Low-income housing (Form 8586, Part I only)	1d			· · · · · · · · · · · · · · · · · ·			
	е	Disabled access (Form 8826) (see instructions for limitation)	1e						
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f						
	9	Indian employment (Form 8845)	1g						
	h	Orphan drug (Form 8820)	1h						
	i	New markets (Form 8874)	1i						
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j						
	k	Employer-provided child care facilities and services (Form 8882) (see instructions	١						
		for limitation)	1k						
	I	Biodiesel and renewable diesel fuels (attach Form 8864)	11						
	m	Low sulfur diesel fuel production (Form 8896)	1m	_					
	n	Distilled spirits (Form 8906)	1n						
	0	Nonconventional source fuel (carryforward only)	10 1p						
	p ~	Energy efficient home (Form 8908)	1q		-				
	q	Energy efficient appliance (carryforward only)	1r						
	r s	Alternative fuel vehicle refueling property (Form 8911)	1s						
	t	Enhanced oil recovery credit (Form 8830)	1t						
	u	Mine rescue team training (Form 8923)	1u						
	v	Agricultural chemicals security (carryforward only)	1v						
	w	Employer differential wage payments (Form 8932)	1w						
	x	Carbon oxide sequestration (Form 8933)	1x						
	v	Qualified plug-in electric drive motor vehicle (Form 8936)	1v						
	z	Qualified plug-in electric vehicle (carryforward only)	1z						
	aa	Employee retention (Form 5884-A)	1aa						
	bb	General credits from an electing large partnership (carryforward only)	1bb						
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other							
		credits (see instructions)	1zz						
2	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			11			
3	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3						
4	la	Investment (Form 3468, Part III) (attach Form 3468)	4a						
	b	Work opportunity (Form 5884)	4b						
	C	Biofuel producer (Form 6478)	4c						
	đ	Low-income housing (Form 8586, Part II)	4d						
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e						
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f						
	g	Qualified railroad track maintenance (Form 8900)	4g	_					
	h	Small employer health insurance premiums (Form 8941)	4h						
	i	Increasing research activities (Form 6765)	4i						
	l	Employer credit for paid family and medical leave (Form 8994)	4j						
_	Z	Other	4z						
5		Add lines 4a through 4z and enter here and on the applicable line of Part II	5			0			
- 6		Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			11			

- 01111	2000 (2013)			
Name	(s) shown on return		Identifying num	nber
	MCKNIGHT FOUNDATION			754835
Par	t III General Business Credits or Eligible Small Business Credits (see inst	tructi	ons)	
Con	plete a separate Part III for each box checked below. See instructions.			
A [General Business Credit From a Non-Passive Activity E Reserved			
В	☐ General Business Credit From a Passive Activity F☐ Reserved			
C [☐ General Business Credit Carryforwards G ☐ Eligible Small Busin	ness C	redit Carryforwards	s
D [☐ General Business Credit Carrybacks H☐ Reserved			
1 h	you are filing more than one Part III with box A or B checked, complete and attach first an all Parts III with box A or B checked. Check here if this is the consolidated Part III	additio	onal Part III combinir	ng amounts from
	(a) Description of credit		(b)	(c)
	On any line where the credit is from more than one source, a separate Part III is needed for each through entity.		If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
18	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
t		1b		**
(1c	80-0966179	76
c	Low-income housing (Form 8586, Part I only)	1d		
e	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
ç	Indian employment (Form 8845) .	1g		
ŀ	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		
H	Employer-provided child care facilities and services (Form 8882) (see instructions			
	for limitation)	1k		
ŀ	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
r	n Low sulfur diesel fuel production (Form 8896)	1m		
r	Distilled spirits (Form 8906)	1n		
c		10		
F	Energy efficient home (Form 8908)	1p		
C		1q		
r	· · · · · · · · · · · · · · · · · · ·	1r		
S		1s		
t		1t		
ι	5 ,	1u		
٧	J , , , , , , , , , , , , ,	1۷		
٧	1	1w		
×	· · · · · · · · · · · · · · · · · · ·	1x		
У		1y		
2	, ,	1z		
а	a Employee retention (Form 5884-A)	1aa		
b	b General credits from an electing large partnership (carryforward only)	1bb		
Z	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1		
•		1zz 2		76
2 3	Add lines 1a through 1zz and enter here and on the applicable line of Part I Enter the amount from Form 8844 here and on the applicable line of Part II	3		76
	• •	4a		
4a		4b		 .
b				
0	•	4c 4d	-	
d	The state of the s			
e f		4e	80-0966179	
		4f	00-03001/9	
g		4g		
h :	Increasing research activities (Form 6765)	4h 4i		
į ;				
j	Employer credit for paid family and medical leave (Form 8994)	4j 4z		
Z 5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		1
5 6	Add lines 4.3 and 5 and enter here and on the applicable line of Part II	6	 	77
0	AUV III ES 4, 3, AUU 3 AUU EUREI HEIE AUU OH RIE AUDIRADIE III E OFFAN H	. 0	ı	11

Name	Name(s) shown on return					
THE	THE MCKNIGHT FOUNDATION 41-0754835					
Par	t III General Business Credits or Eligible Small Business Credits (see ins	truction	ons)			
	plete a separate Part III for each box checked below. See instructions.					
	General Business Credit From a Non-Passive Activity E Reserved					
_	General Business Credit From a Passive Activity F Reserved					
	☐ General Business Credit Carryforwards ☐ ☐ Eligible Small Busin	ness C	redit Carryforward	is		
	General Business Credit Carrybacks H Reserved		,			
	f you are filing more than one Part III with box A or B checked, complete and attach first an	additio	nal Part III combini	no amounts from		
· .	Ill Parts III with box A or B checked. Check here if this is the consolidated Part III			▶ □		
	(a) Description of credit		(b)	(c)		
	On any line where the credit is from more than one source, a separate Part III is needed for each through entity.		If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount		
18		1a	onary, onto the Env			
t		1b				
		1c	47-1688982	10		
Č		1d				
6		1e				
f		1f				
ç		1g				
ř		1h				
i	New markets (Form 8874)	1i				
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				
į						
•	for limitation)	1k				
- 1	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
r		1m				
r	D . H (T	1n				
c		10				
r	E ((E 0000)	1p				
c		1g				
r	AU	1r				
s		1s				
t		1t				
ι		1u				
v	Agricultural chemicals security (carryforward only)	1v				
v	= 1 NG 1 1 (= 0000)	1w				
х	Carbon oxide sequestration (Form 8933)	1x				
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				
z	Qualified plug-in electric vehicle (carryforward only)	1z		•		
а	a Employee retention (Form 5884-A)	1aa				
b	b General credits from an electing large partnership (carryforward only)	1bb				
Z	Z Other. Oil and gas production from marginal wells (Form 8904) and certain other					
	credits (see instructions)	1zz				
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		10		
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				
4 a	, , , , , , , , , , , , , , , , , , , ,	4a				
b	• • • • • • • • • • • • • • • • • • • •	4b				
C	. ,	4c				
d	· , ,	4d				
е		4e				
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f_				
g		4g				
h	, ,	4h				
i	Increasing research activities (Form 6765)	4i				
j	Employer credit for paid family and medical leave (Form 8994)	4j				
Z		4z				
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0		
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		10		

	000.	, (20.0)							
Nar	ne(s) s	nown on return			Identifying num	ber			
TH	THE MCKNIGHT FOUNDATION 41-0754835								
Pá	art II	General Business Credits or Eligible Small Business Credits (see inst	ruction	ons)					
Co	mple	te a separate Part III for each box checked below. See instructions.							
Α		General Business Credit From a Non-Passive Activity E 🔲 Reserved							
В	(<u> </u>							
С		General Business Credit Carryforwards G 🔲 Eligible Small Busin	ess C	redit (Carryforward:	S			
D		General Business Credit Carrybacks H Reserved							
1	If yo	u are filing more than one Part III with box A or B checked, complete and attach first an a	additio	nal Pa	rt III combinir	ng amounts from			
	all Pa	arts III with box A or B checked. Check here if this is the consolidated Part III				~ ▶ 🗀			
		(a) Description of credit			(b)	(c)			
		any line where the credit is from more than one source, a separate Part III is needed for each bugh entity		from a	pass-through	Enter the appropriate amount			
_	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	entity,	enter the EIN	a.r.oa.r.			
	b b	•	1b						
		Reserved	1c	27.	-4846111	127			
	c d	Low-income housing (Form 8586, Part I only)	1d		-4846111	2			
	u e	Disabled access (Form 8826) (see instructions for limitation)	1e	21	4040111				
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f						
		•	1g						
	g		1h						
	h :	Orphan drug (Form 8820)	1i						
	:	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j						
	J 1.		<u></u>			····			
	k	Employer-provided child care facilities and services (Form 8882) (see instructions	14						
		for limitation)	1k 1l						
	<u></u>	Biodiesel and renewable diesel fuels (attach Form 8864)							
	m		1m						
	n	Distilled spirits (Form 8906)	1n			-			
	0	Nonconventional source fuel (carryforward only)	10						
	p	Energy efficient home (Form 8908)	1p						
	q	Energy efficient appliance (carryforward only)	1q						
	r	Alternative motor vehicle (Form 8910)	1r						
	S	Alternative fuel vehicle refueling property (Form 8911)	1s 1t						
	t	Enhanced oil recovery credit (Form 8830)	<u> </u>						
	u	Mine rescue team training (Form 8923)	1u		+				
	V	Agricultural chemicals security (carryforward only)	1v		-				
	W	Employer differential wage payments (Form 8932)	1w						
	X	Carbon oxide sequestration (Form 8933)	1x						
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y						
	Z	Qualified plug-in electric vehicle (carryforward only)	1z						
	aa	Employee retention (Form 5884-A)	1aa						
	bb	General credits from an electing large partnership (carryforward only)	1bb						
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1						
,	,	Add lines 1a through 1zz and enter here and on the applicable line of Part I	1zz 2	-		129			
	2 3	Enter the amount from Form 8844 here and on the applicable line of Part II	3	_		123			
			4a						
•	la L	Investment (Form 3468, Part III) (attach Form 3468)	4b		+				
	b	Work opportunity (Form 5884)	4c		+				
	C	Low-income housing (Form 8586, Part II)	4d		+				
	d				+				
	e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e						
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f						
	g	Qualified railroad track maintenance (Form 8900)	4g						
	h :	Small employer health insurance premiums (Form 8941)	4h	<u> </u>					
	į :	Increasing research activities (Form 6765)	4i		- -	 			
]	Employer credit for paid family and medical leave (Form 8994)	4j		_				
_		Other	4z						
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			0			
Е	3	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	l		129			

Form 990T Part I, Line 5

Income (loss) from Partnership and S Corporations

Name of Partnership	EIN	UBI
PARTNERSHIP INVESTMENT ACTIVITY		
(1) INCOME FROM PARTNERSHIPS		2,833,621
	Total	2,833,621

Form 990T Part II, Line 18	Interest		
	Description		Amount
PARTNERSHIP INVESTMENT ACTIVITY			
(1) INTEREST FROM PARTNERSHIPS			553,917
		Total for Part II, Line 18	553,917

Form 990T Part II, Line 19	Taxes and Licenses	
	Description	Amount
PARTNERSHIP INVESTMENT ACTIVITY	•	-
(1) STATE TAXES		9.064

Г	$\alpha \alpha \alpha \tau$	Part II	Line	\sim

Other Deductions

Description	Amount			
PARTNERSHIP INVESTMENT ACTIVITY				
(1) DEDUCTIONS FROM PARTNERSHIPS	1,442,541			
(2) PROFESSIONAL FEES	32,534			
(3) LEGAL FEES	7,358			
(4) PORTFOLIO MANAGEMENT FEES	820,887			
(5) CONSULTING FEES	347			
(6) OCCUPANCY EXPENSES	833			
(7) TRAVEL EXPENSES	8,007			
(8) OTHER EXPENSES	404			
Tota	2,312,911			

V	
Form 990T Part III, Line 34	Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2014	578	578			0	2019
2015	101,272	99,964	·		1,308	2020
2016	142,384	22,436			119,948	2021
2017	58,699,452	59,135			58,640,317	2022
2018	89,109,250	21,500			89,087,750	2023
2019	89,515,621	0	139,633		89,375,988	2024
Totals	237,568,557	203,613	139,633	0	237.225.311	