

Form <b>990-T</b> .	E	xempt Org	janization I (and proxy tax				Tax Retur	'n	OMB No 1545-0047
*	For cale	endar vear 2019 or other ta	x year beginning JUL				л 30, 20	20	2019
•7	1 0. 54.15		vww.irs.gov/Form9901						2013
Department of the Treasury Internal Revenue Service	<b></b>		mbers on this form as					3).	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed			( Check box if r			_		D Empl (Emp	loyer identification number sloyees trust, see uctions)
B Exempt under section	Print	INTVERSITY	Y OF WYOMI	VG FOU	МПАТТО	J		8	3-0201971
X 501(c 03 )	1		oom or suite no. If a P			•		E Unte	lated business activity code
408(e) 220(e)	Туре		22ND STREI					(500	instructions)
408A 530(a)			province, country, and		gn postal code				
529(a)		LARAMIE, V						523	000
C Book value of all assets		F Group exemption r	iumber (See instructio	ns.) 🕨					
at end of year 692,604,1	76.	G Check organization	type ▶ X 501(	c) corporation	on 50	)1(c) trust	401	(a) trust	Other trust
H Enter the number of the	•		or businesses	1		-	the only (or first)		
trade or business here						•	, complete Parts I-		•
describe the first in the			evious sentence, comp	lete Parts I a	nd II, complete	a Schedul	e M for each additi	onal trade	e or
business, then complete									<b>19</b> 1
During the tax year, was		_		a parent-sub	sidiary controll	ea group'?	•	Y	es X No
If "Yes," enter the name  J The books are in care o					<del>.</del>	Telent	none number 🕨	307-	766-3938
		e or Business			(A) inc		(B) Expens		(C) Net
1a Gross receipts or sa			<del>-                                     </del>		1	<u> </u>	1= 1= 1= 1		/
b Less returns and allo			C Balance	<b>▶</b> 1c					
2 Cost of goods sold (		A, line 7)		2					
3 Gross profit. Subtract				3					
4a Capital gain net inco				4a					
b Net gain (loss) (Forn	1 4797, Pa	art II, line 17) (attach f	orm 4797)	4b					
c Capital loss deduction	n for trust	ts		4c			/		
5 Income (loss) from a	partnersh	hip or an S corporatio	n (attach statement)	5		_/		. —	
6 Rent income (Sched	•			6					<u>_</u>
7 Unrelated debt-finan		,		7	<del>  _ /</del>				<u> </u>
			led organization (School		/				
			7) organization (Sched	ule G) 9	4				
<ul><li>10 Exploited exempt ac</li><li>11 Advertising income (</li></ul>	-			11	<del> </del>				
12 Other income (See ii		•	STATEMENT	$1 \frac{1}{12}$	-561	,282.	ı		-561,282.
13 Total. Combine line				13		,282.			-561,282.
Part II Deduction	ns No	t Taken Elsewi	nere (See instructi	ons for limi	tations on de	ductions)			
(Deduction	s must be	e directly connected	d with the unrelated	business ii	ncome )				
14 Compensation of o	ficers, dire	ectors, and trustees (S	Schedule K)			1		14	
15 Salaries and wages		/	R	ECEI\	EU	1		15	
16 Repairs and mainte	nance				180	1		16	
17 Bad debts			12/1	MAR 15	2021	<i>f</i> :		17	
18 Interest (attach sch	edule) (se	e instructions)	<u>6700</u>	*** · · · · · ·	<u>`</u>	=		18	
19 Taxes and licenses 20 Depreciation (attack	Form AF	62)		GDEN	LIT	20		19	
<ul><li>20 Depreciation (attacl</li><li>21 Less depreciation c</li></ul>		oz) Schedule A and elsew	here on return	GUE	<u>v, U i</u>	21a		21b	1
22 Depletion	J	SALIDADIO A AIIO 6136W	sio on foto <u>ni</u>	•				22	
23 Contributions to de	r erred com	npensation plans						23	
24 Employee benefit p								24	
25 Excess exempt exp		nedule I)						25	
26 Excess readership								26	
27 Other deductions (a					SEE	STAT	TEMENT 2	27	880,320.
28 Total deductions								28	880,320.
			ating loss deduction S					29	-1,441,602.
,	perating lo	oss arising in tax years	s beginning on or after	January 1, 2		. ~			
(see instructions)					SEE	STAT	rement 3	30	0.
		come Subtract line 30						31	-1,441,602.
923701 01-27-20 LHA F	or Paperw	vork Reduction Act No	otice, see instructions	48					Form <b>990-T</b> (2019

	O-T (2019) UNIVERSITY OF WYOMING FOUNDATION	83-02019/1 Page 2
Part	Total Unrelated Business Taxable Income	. 4
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	$\frac{32}{32}$ -1,441,602.
33	Amounts paid for disallowed fringes  Charitable contributions (see instructions for limitation rules)	33
<b>3</b> 4	Charitable contributions (see instructions for limitation rules)	34 0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33	35 - 1,441,602.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36 0.
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37 - 1,441,602.
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,	1,000
33	enter the smaller of zero or line 37	39 -1,441,602.
Dort	IV Tax Computation	139 [1,441,002.
40	Organizations Taxable as Corporations Multiply line 39 by 21% (0 21)	40 0.
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
43	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 0.
Part	N Tax and Payments	
46 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a	
b	Other credits (see instructions) 46b	1 1
	General business credit. Attach Form 3800 46c	7
	Credit for prior year minimum tax (attach Form 8801 or 8827) 46d	7
	Total credits Add lines 46a through 46d	46e
47	Subtract line 46e from line 45	47 0.
48	Other taxes Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48
		49 0.
	Total tax Add lines 47 and 48 (see instructions)	
	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  5,583.	50 0.
	· · · · · · · · · · · · · · · · · · ·	<del>-</del>
	2019 estimated tax payments 51b	4
	Tax deposited with Form 8868	4 1
d	Foreign organizations. Tax paid or withheld at source (see instructions)  516	4 1
	Backup withholding (see instructions) 51e	4 1
f	Credit for small employer health insurance premiums (attach Form 8941)  51f	4 1
g	Other credits, adjustments, and payments: Form 2439	
	Form 4136 X Other11,165. The state is 11,165.	<u> </u>
52	Total payments Add lines 51a through 51g SEE STATEMENT 4	52 16,748.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 🔲 💛	53
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54
r 55	Overpayment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55 16,748.
.56	Enter the amount of line 55 you want: Credited to 2020 estimated tax   16,748. Refunded	56 0.
Part		•
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	
	here	X
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?	$\frac{1}{x}$
	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   Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowless.	dge and helief it is thin
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	age and belief, it is true,
Here	VP FOR FINANCIAL M	ay the IRS discuss this return with
11010		e preparer shown below (see
		structions)? X Yes No
	Print/Type preparer's name Preparer's signature Date Check X	f PTIN
Paid	DENNIS TSCHACHER, self-employed	
Prep	arer CPA Sent Taskela 2-7-21	P00297942
•		
Use	Only Firm's name ► BDO USA, LLP Firm's EIN ►	13-5381590
Use	Only Firm's name ► BDO USA, LLP Firm's EIN ► 505 SOUTH 3RD STREET, SUITE 100	13-5381590
Use	Only Firm's name ► BDO USA, LLP Firm's EIN ► 505 SOUTH 3RD STREET, SUITE 100	13-5381590 307) 755-1040 Form 990-T (2019)

Schedule A - Cost of Good	s Sold. Enter	method of inven	tory valuation N/A			· · · · · · · · · · · · · · · · · · ·	
1 Inventory at beginning of year	1		6 Inventory at end of year	ır		6	
2 Purchases	2		7 Cost of goods sold. Su	ubtract I	ine 6		
3 Cost of labor	3		from line 5. Enter here and in Part I,				
4a Additional section 263A costs			line 2			7	
(attach schedule)	4a		8 Do the rules of section	263A (v	with respect to	Yes No	
b Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to		
5 Total. Add lines 1 through 4b	5		the organization?				
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property L	.ease	d With Real Prope	rty) 	
1 Description of property							
(1) N/A							
(2)			<u> </u>				
(3)	-						
(4)							
		ed or accrued			3/a \ Deductions directly or	onnected with the income in	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	and personal property (if the percenta personal property exceeds 50% or if at is based on profit or income)	ge	columns 2(a) and	2(b) (attach schedule)	
(1)							
(2)		_					
(3)							
(4)							
Total	0.	Total		0.	<u></u>		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	ı (A)	<b>&gt;</b>		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	0.	
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)				
			2 Gross income from		<ol><li>Deductions directly conne to debt-financed</li></ol>		
1. Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1) N/A							
(2)							
(3)							
(4)						· -	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-final	adjusted basis illocable to nced property n schedule)	6. Column I divided by column 5		7. Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)			%				
(2)			%				
(3)			%				
(4)			%				
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)	
Totals			<b>&gt;</b>		0.	0.	
Total dividends-received deductions in	icluded in column	8	<u> </u>			0.	
						Form <b>990-T</b> (2019)	

Schedule F - Interest,				Controlled O				1300 1113	struction	<del>-,</del>	
1 Name of controlled organize	identi			elated income instructions)		al of specified ments made	5. Part of column 4 that is included in the controlling organization s gross income		rolling	6. Deductions directly connected with income in column 5	
(1) N/A		· · · · · · · · · · · · · · · · · · ·	-								
(2)											
(3)											
(4)											
Nonexempt Controlled Organ	izations		1						· · ·		
7. Taxable Income	8. Net unrelated inco (see instruction		9 Total	of specified payr made	nents	10. Part of colur in the controlli gross		nization's		ductions directly connected income in column 10	
(1)		-									
(2)			Ì			·					
(3)											
(4)											
			• "			Add colum Enter here and line 8, c		1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I, tine 8, column (B)	
Totals					▶			0.		0.	
Schedule G - Investme (see inst	ent Income of a tructions)	Section	501(c)(7	), (9), or ( <sup>-</sup>	17) Org	janization					
<b>1</b> . Des	cription of income			2. Amount of	income	3 Deduction directly connein (attach sched)	cted	4. Set-i (attach s		5 Total deductions and set-asides (col 3 plus col 4)	
(1) N/A											
(2)											
(3)											
(4)											
				Enter here and o Part I, line 9, col						Enter here and on page 1, Part I, line 9, column (B)	
Totals			▶		0.					0.	
Schedule I - Exploited (see instri		Incom	e, Other	Than Adv	ertisin	g Income					
Description of exploited activity	2 Gross unrelated business income from trade or business	directly of with proof un	spenses connected oduction related is income	4. Net incom from unrelated business (col minus column gain, compute through	trade or umn 2 3) If a cols 5	5 Gross inco from activity the is not unrelate business income	nat ed	6. Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)			-								
(2)											
(3)											
(4)	Enter here and on page 1, Part I,		re and on 1, Part I,							Enter here and on page 1,	
	line 10, col (A)		, col (B)							Part II, line 25	
Totals -	0.	<u></u>	0.							0.	
Schedule J - Advertisi				olidated	Basis				•		
1. Name of periodical	2 Gross advertising income		3 Direct ertising costs	4. Adverti or (loss) (co col 3) If a ga cols 5 thi	l 2 minus in, compute	5 Circulate	on	6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A		0.	0.	•							
(2)											
(3)											
(4)											
								-			
Totals (carry to Part II, line (5))	<b>•</b>	0.	0.	.		<u> </u>				0 . Form <b>990-T</b> (2019)	

Form 990-1 (2019) ONT AFK211.						0.3	-02019	/ Page 5
Part 11 Income From Perio columns 2 through 7 on a			a Separ	ate Basis (For each	ch perio	dical listed in	Part II, fill in	
1. Name of periodical	2 Gross advertising income		Direct	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cots. 5 through 7		rculation	6. Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A	· . <del>-</del>							
(2)								
(3)							•	
(4)							<u></u> -	
Totals from Part I	0.		0.					0.
	Enter here and on page 1, Part I, line 11, col (A)	page	ere and on 1, Part I, , col (B)					Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	0.		0.					0.
Schedule K - Compensation	n of Officers, [	Directo	rs, and	Trustees (see in:	structio	ns)		
1. Name				2 Title		3. Percent of time devoted to business		pensation attributable nrelated business
(1) N/A							%	
(2)	-						%	
(3)							%	
(4)							%	1

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0.

Total Enter here and on page 1, Part II, line 14

FORM 990-T	OTHER	INCOME	STATEMENT 1
DESCRIPTION			AMOUNT
UBIT LOSS			-561,282.
TOTAL TO FORM 990-T, PA	GE 1, LINE 12		-561,282.
FORM 990-T	OTHER	DEDUCTIONS	STATEMENT 2
DESCRIPTION			AMOUNT
INVESTMENT ADVISOR FEES INVESTMENT COUNCIL FEES DIRECT LABOR OTHER			199,978. 12,491. 580,861. 86,990.
TOTAL TO FORM 990-T, PA	GE 1, LINE 27		880,320.

FORM 990-T	OTHER	CREDITS	AND	PAYMENT	S	STATEMENT 4
DESCRIPTION						AMOUNT
FORM 8827, LINE 5C						11,165.
TOTAL INCLUDED ON FORM	990-т, Е	PAGE 2,	PART	V, LINE	51G	11,165.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 5
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/05	179,747.	179,747.	0.	0.
06/30/06	196,637.	196,637.	0.	0.
06/30/07	241,777.	241,777.	0.	0.
06/30/08	895,049.	895,049.	0.	0.
06/30/09	1,182,227.	126,002.	1,056,225.	1,056,225.
06/30/11	1,219,523.	0.	1,219,523.	1,219,523.
06/30/12	293,907.	0.	293,907.	293,907.
06/30/13	229,474.	0.	229,474.	229,474.
06/30/14	56,375.	0.	56,375.	56,375.
06/30/15	478,478.	0.	478,478.	478,478.
06/30/18	1,044,022.	0.	1,044,022.	1,044,022.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	4,378,004.	4,378,004.

## Form **8827**

(Rev May 2020)
Department of the Treasury
Internal Revenue Service

## **Credit for Prior Year Minimum Tax - Corporations**

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form8827 for the latest information.

OMB No 1545-0123

2019

Name	Employer identification number
UNIVERSITY OF WYOMING FOUNDATION	83-0201971
1 Minimum tax credit carryforward from 2018 Enter the amount from line 9 of the 2018 Form 8827 STMT 6	1 11,165.
2 Enter the corporation's 2019 regular income tax liability minus allowable tax credits (see instructions)	2
3 Enter the refundable minimum tax credit (see instructions)	3 11,165.
4 Add lines 2 and 3	4 11,165.
5a Enter the smaller of line 1 or line 4. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions	5a 11,165.
b Current year minimum tax credit. Enter the smaller of line 1 or line 2 here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions. If you made an entry on line 3, go to line 5c. Otherwise, skip line 5c.	5b
c Subtract line 56 From line 5a. This is the current year refundable minimum tax credit. Include this amount on Form 1120, Schedule J, Part III. line 20c (or the applicable line of your return)	5c 11,165.
6 Minimum tax credit carryforward. Subtract line 5a from line 1 Keep a record of this amount to carry forward and use in future years	6

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8827** (Rev 5-2020)