Form **990**

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2022 calendar year, or tax year beginning and ending D Employer identification number Check if applicable: C Name of organization Address change THE UNIVERSITY OF TEXAS FOUNDATION, Name change 74-1587488 Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ (512) 473-8985 9011 MOUNTAIN RIDGE DRIVE 150 termi ated 58.700.234. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended AUSTIN, TX 78759 H(a) Is this a group return Applica-F Name and address of principal officer: REX G. BAKER, III for subordinates? pendina SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 4947(a)(1) or (insert no.) If "No," attach a list. See instructions UTXF.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation Association L Year of formation: 1967 M State of legal domicile: TX Trust Other Part I Summary Briefly describe the organization's mission or most significant activities: TO PROVIDE SUPPORT TO THE Governance UNIVERSITY OF TEXAS SYSTEM INSTITUTIONS. if the organization discontinued its operations or disposed of more than 25% of its net assets. 16 Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 5 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 20 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 42,756,427. 46,215,930. Contributions and grants (Part VIII, line 1h) 0. Program service revenue (Part VIII, line 2g) 4,743,148. 1,153,704. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 192,521 261,708. 47,692,096. 47,631,342. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 42,736,834. 47,486,992. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 14 381,473. 476,240. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 2,766,577. 2,828,633. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 45,946,940. 50,729,809. 1,745,156. -3,098,467. 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 500 83,486,599. 88,879,484. Total assets (Part X, line 16) 45,533,196. 41,339,032. 21 Total liabilities (Part X, line 26) 42,147,567. 43,346,288. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign SHERI DESPAIN, EXECUTIVE DIRECTOR & CFO Here Type or print name and title PTIN Preparer signature Print/Type preparer's name Sep 28, 2023 P01249221 Paid SEAN HOLCOMB self-employed MAXWELL LOCKE & RITTER LLP Firm's EIN 74-2900215 Preparer Firm's name Firm's address 401 CONGRESS AVENUE, SUITE 1100 **Use Only** Phone no. 512-370-3200 AUSTIN, TX 78701-9682

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO ADVANCE EDUCATION THROUGH FINANCIAL SUPPORT OF THE UNIVERSITY OF
	TEXAS SYSTEM, INCLUDING ALL OF ITS BRANCHES, DEPARTMENTS, SCHOOLS AND
	COLLEGES AT ITS THIRTEEN INSTITUTIONS, TO IMPROVE ITS RESEARCH,
	TEACHING, SCHOLARSHIP, FACULTIES AND FACILITIES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 47,656,984. including grants of \$ 47,486,992.) (Revenue \$)
	EDUCATIONAL PURPOSE - GIFTS TO VARIOUS DEPARTMENTS AT THE UNIVERSITY OF
	TEXAS SYSTEM INSTITUTIONS FOR VARIOUS EDUCATIONAL AND RESEARCH PROJECTS
4h	(Code:) (Expenses \$ 2,379,857. including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$2, 379, 857. including grants of \$) (Revenue \$) PAYMENTS MADE TO MEET CONDITIONS OF GIFTS TO THE UNIVERSITY OF TEXAS
	SYSTEM INSTITUTIONS.
	SISIEM INSTITUTIONS:
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4 .	Otherwood and in a (December of Other the Other
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 50,036,841.
	Form 990 (2022)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		37	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			7.7
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			٦,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا		v
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	I

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	(GOTTATAGE)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			1110
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			l
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			l
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			۱
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			۱
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			\ _{3,7}
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			3,7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		₩.	
Pa	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
ı a				
	Check if Schedule O contains a response or note to any line in this Part V			
٠. م	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 303		Yes	No
D -	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	(gambling) winnings to prize winners?	10		

232004 12-13-22

Form **990** (2022)

1022) THE UNIVERSITY OF TEXAS FOUNDATION, INC

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	5							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х						
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year			37					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	Х						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Λ						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8							
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	-							
а	Pid the analysis is a supplied to a supplied to the supplied to the supplied of the supplied to the supplied t								
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders 11a								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	, , , , , , , , , , , , , , , , , , , ,								
	organization is licensed to issue qualified health plans	4							
С	Enter the amount of reserves on hand			37					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			- v					
	excess parachute payment(s) during the year?	15		X					
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		Х					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		^					
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.	17							
	ii 103, complete i omi 0003.								

THE UNIVERSITY OF TEXAS FOUNDATION, INC. Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 16 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 16 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	CA

exempt status with respect to such arrangements?

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records SHERI DESPAIN - (512) 473-8985

9011 MOUNTAIN RIDGE DR, SUITE 150, AUSTIN, TX 78759

Form **990** (2022)

16h

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Compensation Comp	(A) Name and title	(B) Average hours per week	box	Position (do not check more tha box, unless person is b officer and a director/tr				one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
X		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/	organizations (W-2/1099-MISC/	compensation from the organization and related
DIRECTOR		40.00							100 000		04 050
DIRECTOR		1 00			X				180,000.	0.	24,852.
CAMPLES W. MATTHEWS, JR. 1.00 X		1.00	v						_	0	0
DIRECTOR		1 00	Δ						0.	0.	<u> </u>
DIRECTOR		1.00	Х						0.	0.	0.
STATESTATE STATESTATESTATE STATESTATE STATESTATE	(4) HECTOR DELEON	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
Column	(5) WOFFORD DENIUS	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
The column	(6) MELINDA HILL PERRIN	1.00								_	_
DIRECTOR			Х						0.	0.	0.
(8) MICHELLE BROCK		1.00	l								
DIRECTOR		1 00	Х						0.	0.	0.
1.00		1.00	ļ								
DIRECTOR X		1 00	X						0.	0.	0.
1.00 REX G. BAKER, III 1.00 X X X 0.		1.00	. ,							0	0
No. No.		1 00	Λ						0.	0.	<u> </u>
1.00		1.00	v		v					0	0
DIRECTOR X		1 00	^		Λ				· ·	0.	U •
1.00		1.00	x						0.	0.	0.
Name		1.00							•		
1.00			х		х				0.	0.	0.
IMMEDIATE PAST PRESIDENT	(13) THOMAS J. PERICH	1.00									
DIRECTOR	IMMEDIATE PAST PRESIDENT		Х		Х				0.	0.	0.
The column The	(14) BRIAN T. MCLAUGHLIN	1.00									
VP AND SECRETARY X X X 0. 0. 0. (16) TIM TAYLOR 1.00 0. 0. 0. 0. 0. DIRECTOR X 0. 0. 0. 0. 0. (17) TRACY LAQUEY PARKER 1.00 0. 0. 0. 0. VP AND TREASURER X X X 0. 0. 0.	DIRECTOR		Х						0.	0.	0.
1.00	(15) ALFRED M. MEYERSON	1.00									
DIRECTOR X 0. 0. 0. (17) TRACY LAQUEY PARKER 1.00 X X X 0. 0. 0.			Х		Х				0.	0.	0.
(17) TRACY LAQUEY PARKER VP AND TREASURER X X 0. 0. 0.	(16) TIM TAYLOR	1.00									
VP AND TREASURER X X X 0. 0. 0.	DIRECTOR		Х						0.	0.	0.
	(17) TRACY LAQUEY PARKER	1.00									
	VP AND TREASURER		Х		X				0.	0.	990 (2022)

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(A) Name and title	(B) Average hours per		not cl		ition more	l than d s both		(D) Reportable compensation	(E) Reportable compensation		(F Estimamou	ated
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Officer		Highest compensated	Former Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	ns compensa SC/ from th		nsation the zation elated
				_								
1b Subtotal c Total from continuation sheets to Part VI								180,000.			24,	852.
d Total (add lines 1b and 1c) Total number of individuals (including but no								180,000. eceived more than \$100,		•	24,	852.
compensation from the organization											Ye	1 es No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si											3	Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	e co	mpe	nsa	tion	and	oth	er compensation from t	he organization		4 X	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes." com	ccrue compen	satio	on fr	om a	any	unre	elate	ed organization or individ	dual for services		5	Х
Section B. Independent Contractors 1 Complete this table for your five highest contractors												
the organization. Report compensation for t	•	•						the organization's tax y	, ,			
(A) Name and business	address	NC	NE	:				(B) Description of s	ervices	Co	(C) mpensa	tion
O Tabel and the second	- de discontinu											
Total number of independent contractors (in \$100,000 of compensation from the organization from the organization)	•	υτ IIM	iited	101	thos (rea	above) who received mo	ore than		Orm QQ	0 (2022)

Part VIII	Statement of	of Revenue

Check if Schedule O contains a response or note to any line in								e in this Part VIII			
							-	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
									iunction revenue	business revenue	sections 512 - 514
ω ω	1	_	Federated campaigns			1a					
ar t	•					1b					
يخ و											
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events			1c					
ig ig			Related organizations			1d					
S,			Government grants (contril			1e					
ţi		f	All other contributions, gifts, g	gran	ts, and						
ig #			similar amounts not included	abov	/е	1f	46,215,930.				
		g	Noncash contributions included in li	ines '	1a-1f	1g \$	5,318,255.				
Co		h	Total. Add lines 1a-1f					46,215,930.			
							Business Code				
a l	2	а									
ķ	_	b									
Program Service Revenue		c									
E S		_									
gra Be		d									
Š		е									
<u>-</u>			All other program service r	eve	nue						
\longrightarrow		g	Total. Add lines 2a-2f								
	3		Investment income (includi	ing	dividen	ds, intere	st, and				
			other similar amounts)					825,997.			825,997.
	4		Income from investment of	f tax	c-exemp	ot bond p	roceeds				
	5		Royalties								
					(i)	Real	(ii) Personal				
	6	а	Gross rents	6a							
	_		Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss)		· · · · · ·						
	_		· · · · · · · · · · · · · · · · · · ·		(i) Se	curities	(ii) Other				
	′	а	Gross amount from sales of	_	<u> </u>		(ii) Other				
			assets other than inventory	7a	11,3	96,599.					
		b	Less: cost or other basis		l						
an						68,892.					
ther Revenue		С	Gain or (loss)	7с	3	27,707.					
Be		d	Net gain or (loss)			<u></u>		327,707.			327,707.
Ē	8	а	Gross income from fundraisin	g ev	ents (no	ot					
₹			including \$			of					
			contributions reported on I	line	1c). Se	e					
			Part IV, line 18		•	8a					
		b	Less: direct expenses								
			Net income or (loss) from f								
	۵		Gross income from gaming								
	J	u	Part IV, line 19								
			Less: direct expenses								
			Net income or (loss) from g	-	-		 T				
	10	а	Gross sales of inventory, le								
			and allowances								
		b	Less: cost of goods sold			10b					
		С	Net income or (loss) from s	sales	s of inv	entory					
,,							Business Code				
šno (11	а	OTHER INCOME				900099	261,708.	261,708.		
ne		b									
ella Yei		c									
Miscellaneous Revenue			All other revenue								
Σ			Total. Add lines 11a-11d					261,708.			
	12		Total revenue. See instruction					47,631,342.	261,708.	0.	1153704.
22222				110				1.,301,012.	201,700.	1	Form 990 (2022)
232009	, 12	- 13-	44								101111 000 (2022)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

D :	Check if Schedule O contains a respon	(A)	(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	47,384,509.	47,384,509.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	102,483.			
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ū	trustees, and key employees	204,852.		204,852.	
6	Compensation not included above to disqualified	201,0321		201/0321	
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7		223,375.		223,375.	
7	Other salaries and wages Pension plan accruals and contributions (include	225,515.		223,313.	
8	·	17,300.		17,300.	
_	section 401(k) and 403(b) employer contributions)	17,500.		17,300.	
9	Other employee benefits	30,713.		30,713.	
10	Payroll taxes	30,713.		30,713.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	20 750		20 750	
С	Accounting	28,750.		28,750.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	01 260		01 260	
f	Investment management fees	21,368.		21,368.	
g	Other. (If line 11g amount exceeds 10% of line 25,			22 252	
	column (A), amount, list line 11g expenses on Sch 0.)	33,260.		33,260.	
12	Advertising and promotion				
13	Office expenses	100,552.		100,552.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	28,932.		28,932.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	ANNUITY PAYMENTS	2,379,857.	2,379,857.		
a b	CHANCELLOR'S BUSINESS E	169,992.	169,992.		
C	STATE REGISTRATION EXPE	3,866.		3,866.	
d		2,000		2,3000	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	50,729,809.	50,036,841.	692,968.	0
<u></u> 26	Joint costs. Complete this line only if the organization	., -,	.,,		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2022)

Form 990 (2022) Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			4,858,212.	2	7,582,637
	3	Pledges and grants receivable, net		10,797,077.	3	9,266,983	
	4	Accounts receivable, net		1,104,900.	4	103,165	
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqual	ified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
<u>ي</u>	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
¥	9	B			0.	9	880
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation	10b	113,794.	585,413.	10c	556,481
	11	Investments - publicly traded securities			64,747,702.	11	50,485,393
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	6,786,180.	15	15,491,060		
	16	Total assets. Add lines 1 through 15 (must equ			88,879,484.	16	83,486,599
	17	Accounts payable and accrued expenses		5,587,074.	17	4,929,046	
	18	Grants payable	10,797,077.	18	9,266,983		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ړي	22	Loans and other payables to any current or form	ner offic	er, director,			
<u>≅</u>		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the		22			
=	23	Secured mortgages and notes payable to unrel	ated thir	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third p	oarties		24	
	25	Other liabilities (including federal income tax, pa	ayables [.]	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			29,149,045.		27,143,003
	26	Total liabilities. Add lines 17 through 25			45,533,196.	26	41,339,032
		Organizations that follow FASB ASC 958, ch	eck here	e X			
Ses		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions			16,904,757.		14,768,562
Ba	28	Net assets with donor restrictions			26,441,531.	28	27,379,005
밀		Organizations that do not follow FASB ASC 9	958, che	eck here			
년		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds				29	
şet	30	Paid-in or capital surplus, or land, building, or e	quipmer	nt fund		30	
As	31	Retained earnings, endowment, accumulated in	ncome, d	or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			43,346,288.	32	42,147,567
	33	Total liabilities and net assets/fund balances			88,879,484.	33	83,486,599

Form **990** (2022)

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Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,63</u> :		
2	Total expenses (must equal Part IX, column (A), line 25)	2	50	<u>,72</u>	9,8	09.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3	,09	8,4	67.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	43	,34	6,2	88.
5	Net unrealized gains (losses) on investments	5	-3	,24	7,9	98.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	5	,14	7,7	44.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	coluṃn (B))	10	42	,14	7,5	67.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	it			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

232012 12-13-22

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022 Open to Public

Inspection

Employer identification number

		THE	UNIVERSITY	OF TEXAS FO	JNDAT.	[ON,]	INC		4-1587488
Pa	τl	Reason for Public (Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instructions	3.	
The o	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	1)(A)(i).		
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3		A hospital or a cooperative)(b)(1)(A)(ii	ii).		
4		A medical research organiz					•	(iii). Enter	the hospital's name,
-		city, and state:	•	,			· · · · · · ·	. ,	,
5	X	An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental un	it describe	ed in
·		section 170(b)(1)(A)(iv). (C				, 9-			
6		A federal, state, or local gov	. ,	nental unit described in	section 17	70/hV/1V/AV	(14)		
7		An organization that norma	~					o gonoral	public described in
′				illiai part of its support ii	om a gove	enninentai	unit of from th	s general į	public described in
•		section 170(b)(1)(A)(vi). (C		(4)(A)(vi) (Camaniata Dam	L II \				
8		A community trust describe			-	and the remarks			
9		An agricultural research org							
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of t	ne college	e or
		university:							
10		An organization that norma	•	= =					-
		activities related to its exen							
		income and unrelated busin		(less section 511 tax) fro	m busines	sses acqui	red by the orga	anization a	after June 30, 1975.
		See section 509(a)(2). (Co							
11		An organization organized a							
12		An organization organized a							
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 5	09(a)(3). (Check the box on
	_	lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а			anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	ctors or trustee	s of the su	upporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b			anization supervised	or controlled in connect	ion with it	s supporte	ed organization	(s), by hav	/ing
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionall	y integrate	ed with,
		its supported organization	n(s) (see instructions)). You must complete I	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	, integrated. A supp	orting organization oper	ated in co	nnection v	vith its support	ed organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and	an attentiv	veness
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II	i, Type III	
		functionally integrated, or	r Type III non-function	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
g	Prov	vide the following information							
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of	-	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see in:	structions)	support (see instructions)
Tota									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sect	ion A. Public Support		· · · · · · · · · · · · · · · · · · ·	<u> </u>			
Calend	ar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and		, ,	` ,	, ,		
n	nembership fees received. (Do not						
ir	nclude any "unusual grants.")	35467858.	33822370.	33544442.	42756427.	46215930.	191807027
2 T	ax revenues levied for the organ-						
iz	zation's benefit and either paid to						
c	r expended on its behalf						
3 T	he value of services or facilities						
f	urnished by a governmental unit to						
ti	ne organization without charge						
4 T	otal. Add lines 1 through 3	35467858.	33822370.	33544442.	42756427.	46215930.	191807027
5 T	he portion of total contributions						
b	y each person (other than a						
g	overnmental unit or publicly						
s	upported organization) included						
c	n line 1 that exceeds 2% of the						
а	mount shown on line 11,						
С	olumn (f)						3401882.
6 F	Public support. Subtract line 5 from line 4.						188405145
Sect	ion B. Total Support				_		
Calend	ar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 /	mounts from line 4	35467858.	<u>33822370.</u>	33544442.	42756427.	<u>46215930.</u>	191807027
8 (Gross income from interest,						
c	lividends, payments received on						
s	ecurities loans, rents, royalties,						
а	nd income from similar sources	776,891.	1001899.	831,098.	693,109.	825,997.	4128994.
9 N	let income from unrelated business						
а	ctivities, whether or not the						
b	usiness is regularly carried on						
10	Other income. Do not include gain						
c	r loss from the sale of capital						
а	ssets (Explain in Part VI.)	376,398.	171,051.	176,323.	192,521.	261,708.	
11 T	otal support. Add lines 7 through 10						197114022
	Gross receipts from related activities,	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			12	
13 F	irst 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	rganization, check this box and sto						<u></u>
	ion C. Computation of Publi					т т	
	Public support percentage for 2022 (l					14	95.58 %
	Public support percentage from 2021					15	92.89 %
	3 1/3% support test - 2022. If the						
	stop here. The organization qualifies as a publicly supported organization						
	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	nd stop here. The organization qua						
	0% -facts-and-circumstances test	-					
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	neets the facts-and-circumstances to	•	•		•		
	0% -facts-and-circumstances test	ū				•	10% or
	nore, and if the organization meets the				-		
С	rganization meets the facts-and-circ	umetances test. Th	o organization au	difice on a publicly	, autoported avacai	rotion	1 1
	Private foundation. If the organization				• • •		H

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	A. Public Support	slow, please comp	nete Part II.)				
	ear (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
•	grants, contributions, and	(4) 2313	(2) 2010	(0) 2020	(4) 2021	(6) 2022	(i) rotal
-	pership fees received. (Do not						
	de any "unusual grants.")						
	receipts from admissions,						
	nandise sold or services per-						
	d, or facilities furnished in						
,	ctivity that is related to the ization's tax-exempt purpose						
-	receipts from activities that						
	ot an unrelated trade or bus-						
	under section 513						
	evenues levied for the organ-						
	n's benefit and either paid to						
-	pended on its behalf					+	
	alue of services or facilities						
	hed by a governmental unit to						
	rganization without charge						
	Add lines 1 through 5						
	ints included on lines 1, 2, and						
	eived from disqualified persons				1		
	ts included on lines 2 and 3 received ther than disqualified persons that						
exceed	the greater of \$5,000 or 1% of the						
	on line 13 for the year						
	nes 7a and 7b						
8 Publi	c support. (Subtract line 7c from line 6.)						
Section	B. Total Support		1	<u> </u>	_		1
Calendar ye	ear (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	ınts from line 6						
	s income from interest,						
	ends, payments received on ities loans, rents, royalties,						
	ncome from similar sources						
b Unrela	ted business taxable income						
(less s	ection 511 taxes) from businesses						
acquir	ed after June 30, 1975						
c Add li	nes 10a and 10b						
	come from unrelated business						
	ties not included on line 10b,						
	ner or not the business is arly carried on						
_	income. Do not include gain						
	s from the sale of capital						
	s (Explain in Part VI.)						
	5 years. If the Form 990 is for th	ne organization's fi	rst second third	fourth or fifth tax	vear as a section	501(c)(3) organizatio	
	this box and stop here	J			•	() ()	· —
	C. Computation of Publi						
	support percentage for 2022 (li			column (f))		15	%
	support percentage from 2021					16	%
	D. Computation of Inves					1 10 1	
	tment income percentage for 20			ine 13 column (f)		17	%
	tment income percentage from 2					18	%
	3% support tests - 2022. If the						
							, 13 HUL
	than 33 1/3%, check this box an	=	-				L
	3% support tests - 2021. If the						
	8 is not more than 33 1/3%, che						
∠u Priva	te foundation. If the organizatio	n did not check a	DOX OR LINE 14, 19	a. or 190. check th	iis dox and see in:	SITUCTIONS	1 1

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
_		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
_		
8		
9a		
Ja		
9b		
9с		
- 55		
10a		
10b		
ule A (For	m 990)	2022

Vas No

	Activities Test. Answer lines 2a and 2b below.
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
	those supported organizations and explain how these activities directly furthered their exempt purposes,
	how the organization was responsive to those supported organizations, and how the organization determined
	that these activities constituted substantially all of its activities.
-	

- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2022

2b

За

Part V Type III Non-Functionally Integrated	509(a)(3) Supporting Orga		74 1307400 Page
Check here if the organization satisfied the Integral	l Part Test as a qualifying trust or	n Nov. 20, 1970 (explain in	Part VI). See instructions
All other Type III non-functionally integrated suppo			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for produ	ction or		
collection of gross income or for management, conserva	tion, or		
maintenance of property held for production of income (see instructions) 6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from lin	ne 4) 8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets	s (see		
instructions for short tax year or assets held for part of y	ear):		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use	assets 2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3	(for greater amount,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from	line 3) 5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8	B, column A)		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, lir	e 8, column A) 3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unles	s subject to		
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's	first as a non-functionally integra	ated Type III supporting orga	anization (see

Schedule A (Form 990) 2022

Pa	rt V Type III Non-Functionally Integrated 509(a)	(3) Supporting Orga	nizations (continu	ed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exemp	ot purposes		1	
2	Amounts paid to perform activity that directly furthers exempt p	ourposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes	of supported organizations	}	3	
4	4 Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)				
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the				
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount				
		(i)	(ii)		(iii)

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reason-			
able cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D,			
line 7: \$			
Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if			
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

74-1587488

Name of the organization Employer identification number

INC

THE UNIVERSITY OF TEXAS FOUNDATION

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must

answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization Employer identification number

THE UNIVERSITY OF TEXAS FOUNDATION, INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,387,046</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,629,853</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,005,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 1,000,695.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>1,500,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$1,708,860.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

THE UNIVERSITY OF TEXAS FOUNDATION, INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>4,731,790</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>1,053,256</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>1,250,000</u> .	Person X Payroll
(a)	(b)	(c) Total contributions	(d) Type of contribution
	Name, address, and ZIP + 4	\$ 1,116,048.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$ <u>1,165,100</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$ <u>1,935,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022) Page **2**

Name of organization

Employer identification number

THE	UNIVERSITY	OF	TEXAS	FOUNDATION,	INC
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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$3,440,288.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$ <u>1,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$ <u>1,000,000</u> .	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

THE UNIVERSITY OF TEXAS FOUNDATION, INC

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	COLLECTION OF COLLECTIBLE VEHICLES	\$4,731,790 .	03/25/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Cabadala D (Farm 000) (0000)

Name of organization **Employer identification number** THE UNIVERSITY OF TEXAS FOUNDATION, INC 74-1587488 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

223454 11-15-22

Schedule B (Form 990) (2022)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection **Employer identification number**

Name of the organization

THE UNIVERSITY OF TEXAS FOUNDATION, INC 74-1587488

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		milar Funds or A	ccounts. Complete if the
	organization answered Tes OffForm 990, Part IV, line	(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year	(,)	3	
2	Aggregate value of contributions to (during year)		-	
3	Aggregate value of grants from (during year)		70,654.	
4	Aggregate value at end of year	7	90,263.	
5	Did the organization inform all donors and donor advisors in w			nds
	are the organization's property, subject to the organization's e	-		
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			X Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes	on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of a his	torically important land area
	Protection of natural habitat		Preservation of a cer	tified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribute	tion in the form of a c	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired at	fter July 25,2006, and no	on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or te	rminated by the orgai	nization during the tax
	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the peri		on, handling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	l enforcing conservat	ion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enfo	orcina conservation e	asaments during the year
•	Amount of expenses mounted in monitoring, inspecting, harrier	ing or violations, and crit	ording conscivation c	ascincing the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements	of section 170(h)(4)(E	3)(i)
_	and section 170(h)(4)(B)(ii)?	•		
9	In Part XIII, describe how the organization reports conservatio			
	balance sheet, and include, if applicable, the text of the footnote			
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	Art, Historical Trea	sures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its rever	nue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for public	lic exhibition, education,	or research in furthera	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that desc	ribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue	statement and baland	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtherand	ce of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				*
2	If the organization received or held works of art, historical trea	sures, or other similar as:	sets for financial gain	, provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these it	ems:	
а	Revenue included on Form 990, Part VIII, line 1			\$
				\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2022

232051 09-01-22

	rt III Organizations Maintaining Co	/ERSITY OF				74-15			
	•						<u> (continu</u>	<u>iea) </u>	
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records	s, check any of the r	ollowing that make	signincant	use of its			
_	Public exhibition	d	Loan or ovel	nango program					
a b	Public exhibition d Loan or exchange program Scholarly research e Other								
C	Preservation for future generations	e							
4	Provide a description of the organization's co	llections and evolain	how they further th	e organization's eve	amnt nurn	nce in Dart	YIII		
5	During the year, did the organization solicit or					Joe IIII ait	AIII.		
J	to be sold to raise funds rather than to be ma		•	•			Yes	☐ No	
Par	rt IV Escrow and Custodial Arrang							110	
	reported an amount on Form 990, Part					o, . a ,			
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contributions	or other assets not	tincluded				
	on Form 990, Part X?						Yes	☐ No	
b	If "Yes," explain the arrangement in Part XIII a								
		•	· ·				Amount		
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year								
f	Ending balance				1f				
2a	Did the organization include an amount on Fo				ility?		Yes	No	
	If "Yes," explain the arrangement in Part XIII.								
Par	rt V Endowment Funds. Complete if	the organization and							
		(a) Current year	(b) Prior year	(c) Two years back	+	years back		years back	
1a	Beginning of year balance	12,635,439.	11,231,141.	10,374,071.	-	218,555.	9,9	956,216.	
b	Contributions	45,617.	169,803.	21,689.	-	20,000.		10,000.	
С	Net investment earnings, gains, and losses	-1,529,331.	1,746,458.	1,332,315.	1,	659,140.	-:	241,026.	
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	535,623.	511,963.	496,934.	-	523,624.		506,635.	
f	Administrative expenses	10.515.100	10 605 100	44 004 444	10	254 254			
g	End of year balance	10,616,102.	12,635,439.		10,	374,071.	9,	218,555.	
2	Provide the estimated percentage of the curre) held as:					
a	Board designated or quasi-endowment	.0000	_%						
b	Permanent endowment 83.8351	%							
С	Term endowment 16.1650								
0-	The percentages on lines 2a, 2b, and 2c should be a sh		Cara dia akama ing balah an	al a destatata and for a	l				
за	Are there endowment funds not in the posses	ssion of the organiza	tion that are neid an	id administered for t	ne		[·	Yes No	
	organization by:							X	
	(i) Unrelated organizations						3a(i)	X	
h	(ii) Related organizations	tions listed as require	nd on Cohodulo D2				3a(ii) 3b	— —	
4	Describe in Part XIII the intended uses of the						30		
	rt VI Land, Buildings, and Equipme		villerit idrids.						
	Complete if the organization answered		, Part IV, line 11a. S	ee Form 990, Part X	(, line 10.				
	Description of property	(a) Cost or of		<u> </u>	Accumulat	ted	(d) Book	value	
	becompation of property	basis (investm		1 , ,	epreciation		(a) Book	value	
1a	Land	`	,	6,508.			86	,508.	
	Buildings			4,097.	30,7	89.		,308.	
	Leasehold improvements			0,891.		27.		,164.	
	Equipment			8,779.	78,2			,501.	
	Other				· · ·				
	I. Add lines 1a through 1e. (Column (d) must ed		Column (B) line 10	OC)			556	,481.	

Schedule D (Form 990) 2022

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) LAND AND MINERALS	11,473,480.
(2) REINSURANCE ASSET	4,017,580.
(3)	
(4)	
(5)	
(6)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	15,491,060.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	1. (a) Description of liability					
(1)	Federal income taxes					
(2)	GIFT ANNUITIES	20,922,038.				
(3)	GIFT COMMITMENT IN EXCESS	3,079,264.				
(4)	OTHER PAYABLES TO UT INSTITUTIONS	2,644,572.				
(5)	DEFERRED GAIN ON REINSURANCE ASSET	497,129.				
(6)						
(7)						
(8)						
(9)						
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	27,143,003.				

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

8,348,659.

TOTAL TO SCHEDULE D, PART XI, LINE 2D

Schedule D (Form 990) 2022 THE UNIVERSITY OF TEXAS FOUNDATION, INC Part XIII Supplemental Information (continued)	74-1587488 Page 5
Part AIII Supplemental Information (continued)	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
AMOUNTS FROM RELATED ENTITIES INCLUDED IN CONSOLIDATED	
	0.550.500
FINANCIAL STATEMENTS	2,550,720.
RECONCILING ITEMS FROM AUDITED FINANCIALS	466,464.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	3,017,184.
,	, , , , , ,
	_

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization						Employer identification number			
тні	E UNIVERSITY	OF TEXAS	FOUNDAT	ION. INC		74-158748	8		
	THE UNIVERSITY OF TEXAS FOUNDATION, INC 74-1587488 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on								
	Form 990, Part IV								
1			n maintain record	ds to substantiate the amount of its gra	nts and other	assistance,			
	the grantees' eligibility for	or the grants or a	assistance, and t	he selection criteria used to award the	grants or assis	stance?	Yes No		
2		ribe in Part V the	e organization's p	procedures for monitoring the use of its	grants and ot	her assistance outsi	de the		
	United States.								
3	(a) Region	(b) Number of		n be duplicated if additional space is n (d) Activities conducted in the region		vity listed in (d)	(f) Total		
	(a) Negion	offices	employees,	(by type) (such as, fundraising, pro-		gram service,	expenditures		
		in the region	agents, and independent	gram services, investments, grants to		e specific type	for and investments		
			contractors in the region	recipients located in the region)	of service	(s) in the region	in the region		
EURC	OPE (INCLUDING		in the region						
ICEI	LAND & GREENLAND)								
- AI	BANIA, ANDORRA,								
AUSI	RIA, BELGIUM	0	1	FUNDRAISING			0.		
	Subtotal	0	1				0.		
b	Total from continuation		_				_		
_	sheets to Part I	0	0				0.		
С	Totals (add lines 3a								

232071 10-17-22

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2022

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Part II

Schedule F (Form 990) 2022

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	inization by the IRS, o	or for which the grantee	ecognized as charities by the correction counsel has provided a sect		Secretaria de Labora.	>		

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

Part III Grants and Other Assistanc Part III can be duplicated if ac			tes. Complete if	f the organization answered "Yes	" on Form 990, Part	IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2022 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

UTMB GALVESTON
301 UNIVERSITY BLVD
GALVESTON TX 77555

3900 UNIVERSITY BLVD

UT TYLER

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

2022 Open to Public

Inspection

OMB No. 1545-0047

Employer identification number Name of the organization 74-1587488 THE UNIVERSITY OF TEXAS FOUNDATION, INC Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) UTMD ANDERSON 1515 HOLCOMBE BLVD 74-6001118 UT SYSTEM HOUSTON, TX 77030 15,960,075, 0 EDUCATIONAL/RESEARCH

TYLER, TX 75799 75-1396988 UT SYSTEM 86,610 0 EDUCATIONAL/RESEARCH UT PERMIAN BASIN 4901 E. UNIVERSITY 75-1393493 UT SYSTEM ODESSA TX 79762 60 232 0. EDUCATIONAL/RESEARCH UNIVERSITY OF TEXAS SYSTEM 601 COLORADO ST. EDUCATIONAL/RESEARCH AND 74-6000203 UT SYSTEM SCHOLARSHIPS AUSTIN, TX 78701 117,012, 0. UNIVERSITY OF TEXAS SOUTHWESTERN 5323 HARRY HINES BLVD. DALLAS, TX 75390 75-6002868 UT SYSTEM 75 056 0 EDUCATIONAL/RESEARCH 13. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

99,482,

0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Enter total number of other organizations listed in the line 1 table

74-6000949 UT SYSTEM

Schedule I (Form 990) 2022

EDUCATIONAL/RESEARCH

Part II Continuation of Grants and Other A		Or garnzauoris	and Domestic Go			,	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TEXAS SAN ANTONIO							
1 UTSA CIRCLE							
SAN ANTONIO, TX 78249	74-1717115	UT SYSTEM	1,079,304.	0.			EDUCATIONAL/RESEARCH
,							
UNIVERSITY OF TEXAS HEALTH SCIENCE							
CENTER SAN ANTONIO - 7703 FLOYD							
CURL DR SAN ANTONIO, TX 78229	74-1586031	UT SYSTEM	2,753,819.	0.			EDUCATIONAL/RESEARCH
UNIVERSITY OF TEXAS HEALTH SCIENCE							
CENTER HOUSTON - 7000 FANNIN,							
SUITE 1200 - HOUSTON, TX 77030	74-1761309	UT SYSTEM	2,468,403.	0.			EDUCATIONAL/RESEARCH
UNIVERSITY OF TEXAS EL PASO							
500 W UNIVERSITY AVENUE	74 6000013	III GVOMEN	1 016 763	0.			EDUGA ETONAT / DEGEA DOU
EL PASO, TX 79902	74-6000813	UT SISTEM	1,916,763.	٠.			EDUCATIONAL/RESEARCH
UNIVERSITY OF TEXAS DALLAS						FOOD DONATIONS	
800 WEST CAMPBELL ROAD						TO THE UTD	
RICHARDSON, TX 75080	75-1305566	UT SYSTEM	1,916,072.	43,380.	RETAIL COST	COMET CUPBOARD	EDUCATIONAL/RESEARCH
,							
UNIVERSITY OF TEXAS AUSTIN							
2400 INNER CAMPUS DR.							
AUSTIN, TX 78712	74-6000203	UT SYSTEM	20,390,027.	0.			EDUCATIONAL/RESEARCH
UNIVERSITY OF TEXAS ARLINGTON							
701 SOUTH NEDDERMAN DRIVE							EDUCATIONAL/RESEARCH AN
ARLINGTON, TX 76019	75-6000121	UT SYSTEM	410,448.	0.			SCHOLARSHIPS

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
DS PROVIDED FOR STUDENT AND STAFF EMERGENCIES	126	102,483.	0.		
rt IV Supplemental Information. Provide the information re-	quired in Part I, line	e 2; Part III, column	ı (b); and any other ac	Iditional information.	
RT I, LINE 2:					
L GRANTS ARE MONITORED DIRECTLY	BY THE UN	IVERSITY (OF TEXAS SY	STEM	
STITUTIONS.					

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

THE UNIVERSITY OF TEXAS FOUNDATION, INC

 $Employer\ identification\ number \\ 74-1587488$

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
				l
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
				l
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
		5a		X
b	, , , , , , , , , , , , , , , , , , , ,	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			l
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			37
		6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		i

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) SHERI DESPAIN	(i)	180,000.	0.	0.	7,200.	17,652.	204,852.	0.
EXECUTIVE DIRECTOR AND CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
-	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(II)						I	

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

	THE UNIVERSI	TY OF	TEXAS FOUR	NDATION, I	NC	74-1	587	488	
Pa	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contrib amounts reporte Form 990, Part VII	ed on	(d) Method of de noncash contribu	termin		S
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles	Х	1	4,731,	790.2	AUCTION VAL	UE		
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock	Х	1	226,	835.E	EXCHANGE VA	LUE		
11	Securities - Partnership, LLC, or								
	trust interests	X	1	316,	250.E	EXCHANGE VA	LUE		
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory	Х	1	43,	380.F	RETAIL COST			
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other (
28	Other (
29	Number of Forms 8283 received by the organiz	zation durino	the tax vear for co	ontributions					
	for which the organization completed Form 826	-	•		29			0	
	To Whom the organization completed from 62.	50,1 4,1 1, 5	onee menious	omone				Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I. lines	1 through	28, that it			
	must hold for at least 3 years from the date of			·	•	•			
	exempt purposes for the entire holding period?						30a		Х
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	oolicv that re	equires the review of	of any nonstandard	contribution	ons?	31	Х	
	Does the organization hire or use third parties	•	•	•					
OŁU							32a		Х
h	If "Yes," describe in Part II.						u		
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is check	red.			
	describe in Part II.	2.3.1 (0) 101	a type of property	milon column (۵, ان ۱۱۰۵۰	,			

232141 09-09-22

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2022

Schedule	M (For	m 990) 2022	THE	UNIVE	RSITY	OF	TEXAS	FOU	NDATION,	INC	74-1587		Page 2
Part II	⊐ is re	pple portin	mental ng in Part for any ad	Infor I, colu ditions	mation. P mn (b), the n Il informatior	rovide th umber of	e inforr contril	mation requir outions, the r	ed by F number	Part I, lines 30b, of items receive	32b, and 33 ed, or a com	, and whether th bination of both.	e organiza Also com	ition plete
	11115	parti	or arry au	uitiona	ii iiiioiiiiatioi									
SCHEI	DULE	М,	PART	I,	COLUM	(B)	:							
THE C	ORGAI	NI ZZ	ATION	IS	REPORT	ING	THE	NUMBER	OF	CONTRIB	UTIONS	IN PART	I,	
COLUI	IN (I	3)												
														_

232142 09-09-22

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

Name of the organization 74-1587488 THE UNIVERSITY OF TEXAS FOUNDATION, INC FORM 990, PART VI, SECTION B, LINE 11B: THE 990 IS REVIEWED BY THE CFO AND EXECUTIVE DIRECTOR, THEN PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION REQUIRES A CONFLICT OF INTEREST POLICY TO BE SIGNED ANNUALLY. NO CONFLICTS WERE NOTED. FORM 990, PART VI, SECTION B, LINE 15: COMPARABLE DATA IS GATHERED AS PART OF THE BUDGETING PROCESS, COMPENSATION IS REVIEWED BY THE TREASURER AND PRESENTED TO THE EXECUTIVE COMMITTEE FOR THE ENTIRE BUDGET IS APPROVED BY THE BOARD. APPROVAL. FORM 990, PART VI, SECTION C, LINE 19: AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON GUIDESTAR.ORG, THE ORGANIZATION'S WEBSITE AND BY REQUEST TO GRANTING ORGANIZATIONS. LINE 9, CHANGES IN NET ASSETS: FORM 990, PART XI, CHANGE IN GIFT COMMITMENTS -1,607,346. 6,755,090. CHANGE IN ACTUARIAL LIABILITY TOTAL TO FORM 990, PART XI, LINE 5,147,744. FORM 990, PART XII, LINE 2C THE PROCESS OF SELECTING AN INDEPENDENT ACCOUNTANT AND OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS HAS NOT CHANGED FROM THE PRIOR YEAR.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2022

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							
	тиг	IINTVFPCTTV	\cap E	ΨΕΥΛΟ	FOINDATION	TNC	

Employer identification number 74-1587488

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
UT FOUNDATION, LLC					
302 N LAST CHANCE GULCH STE 409	TO SUPPORT THE UNIVERSITY				UNIVERSITY OF TEXAS
HELENA, MT 59601	OF TEXAS	MONTANA	0.	0.	FOUNDATION, INC.

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	1	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
UNIVERSITY OF TEXAS FOUNDATION NO. I, INC							
23-7109244, 9011 MOUNTAIN RIDGE DR., STE	TO SUPPORT THE UNVERSITY						1
150, AUSTIN, TX 78759	OF TEXAS	TEXAS	501(C)(3)	5	N/A		X
UNIVERSITY OF TEXAS FOUNDATION NO. 2, INC							
74-6173027, 9011 MOUNTAIN RIDGE DR., STE	TO SUPPORT THE UNVERSITY						
150, AUSTIN, TX 78759	OF TEXAS	TEXAS	501(C)(3)	5	N/A		X
UT FOUNDATION UK LIMITED - 98-1644268							
20 OLD BAILEY	TO SUPPORT THE UNVERSITY		EXEMPT				İ
LONDON, UNITED KINGDOM EC4M 7AN	OF TEXAS	UNITED KINGDOM	ORGANIZATION		N/A		Х
]						ĺ

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2022

		0 11 20 1	"' "	D . N . II . O .		
Dort III Ide	entification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 34,	because it had one or r	nore related
org	ganizations treated as a partnership during the tax year.					

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	Disprop alloca	h) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule	(j) General managir partner	(k) Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets			tion b)(13) rolled tity?
		country						Yes	No

1a

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

					1b		_ <u>X</u>
					1c		X
					1d		<u>X</u>
е	Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(s)				1f		<u>X</u>
g	Sale of assets to related organization(s)				1g		<u>X</u>
h	Purchase of assets from related organization(s)				1h		<u>X</u>
i	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
- 1	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11		X
m	m Performance of services or membership or fundraising solicitations by related organization(s)						
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							<u>X</u>
Sharing of paid employees with related organization(s)						Х	
					1p		v
p Reimbursement paid to related organization(s) for expenses						Х	<u>X</u>
q	Reimbursement paid by related organization(s) for expenses				1q	Λ	
r	Other transfer of cash or property to related organization(s)				1r		X
	Other transfer of cash or property from related organization(s)				1s		X
	If the answer to any of the above is "Yes," see the instructions for information on wh						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved		
<u>(1)</u>							
<u>(2)</u>							
(3)							
1-7							
<u>(4)</u>							
(5)							
<u>(5)</u> (6)							
(6)	09-14-22			Schedule	R (Forr	n 990)	2022

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box of Schedule K-	General managin partner	(k) Percentage ownership
	-									

Schedule R (Form 990) 2022

Schedule R	(Form 990) 2022	\mathtt{THE}	UNIVERSITY	OF	\mathtt{TEXAS}	FOUNDATION,	INC	74-1587488	Page 5
Part VII	(Form 990) 2022 Supplemental Infor	mation							J
				_					
	Provide additional inform	ation for r	esponses to question	is on S	schedule R.	See instructions.			

Form **5471**

(Rev. December 2022)

Department of the Treasury

Information Return of U.S. Persons With Respect to Certain Foreign Corporations

Go to www.irs.gov/Form5471 for instructions and the latest information.

Information furnished for the foreign corporation's annual accounting period (tax year required by

OMB No. 1545-0123

Attachment Sequence No. **121**

Internal Revenue Service section 898) (<u>see ins</u> tructio	ns) beginning JAI	<u>и</u> т	, 2022, and endin	g <u>DE</u> C 3	<u>1, 2</u> 02:	2		
Name of person filing this return				A Identifying num					
THE UNIVERSITY OF TEX	XAS FO	UNDATION,	INC	74-1587	488				
Number, street, and room or suite no. (or P.O. box num			ss)	B Category of filer	(See instruct			_ ` ` ` —	
9011 MOUNTAIN RIDGE I	ORIVE,	150			1c 2		4 X 5a		5c
City or town, state, and ZIP code AUSTIN, TX 78759				C Enter the total p	-	-	-		
Filer's tax year beginning JAN 1		,2022 , and end	dina	DEC 31	.20		nting period		70
D Check box if this is a final Form 5471 for the	he foreign cor	, ,	y		,				. \square
E Check if any excepted specified foreign fina			orm (s	ee instructions)					
F Check the box if this Form 5471 has been	completed usi	ing "Alternative Inform	nation"	under Rev. Proc. 2019-4	0				🔲
G If the box on line F is checked, enter the co			nforma	ation" (see instructions)					
H Person(s) on whose behalf this information	n return is file	d:			I		(4) 01		
(1) Name (2) Address				(3) Identifyir	ng number	(4) Chec	k applicable		
			, ,		Snarenoider	Officer	Director		
Important: Fill in all applicable lines a	and schedule	es All information I	must	he in Fnalish All amou	ints must he	stated in	LLS dollar	اــــــــا د	
unless otherwise indicated				~ · · · · · · · · · · · · · · · · · · ·					
1a Name and address of foreign corporation						loyer identif – 1644		nber, if any	
UT FOUNDATION UK L	СЯТТМІ							nstructions)	
20 OLD BAILEY	LMIIED				1 ' '	06039	,	iisii uciioiis)	
LONDON EC4M 7AN								incorporated	
UNITED KINGDOM					1	ITED :		•	•
d Date of e Principal place of busine	ess	f Principal	g Pri	ncipal business activity	l	h Function	nal currency	y code	
incorporation LONDON		business activity code number	E	XEMPT ORG.					
12/03/20UNITED KINGD	MC	813000					GB	P	
2 Provide the following information for the fo	oreign corpora	ation's accounting per	riod st	ated above.	T				
a Name, address, and identifying number of	branch office	or agent (if any) in the	e Unit	ed States	b If a U.S. in	ncome tax re			
					(i) Taxable ir	come or (lo		U.S. income (after all cre	
							-	(untor un oro	
c Name and address of foreign corporation's	statutory or	resident agent		d Name and address (ir	ı. ıcludina corpo	rate departr	ment, if app	licable) of	
in country of incorporation				person (or persons) v	vith custody o	f the books	and records	s of the forei	gn
				corporation, and the I	ocation of suc	in books and	a records, n	amerent	
HUGO WALFORD CHARI	ries an	ND PHILANT	Ή						
20 OLD BAILEY									
LONDON EC4M 7AN									
UNITED KINGDOM	oian Cori	acration							
Schedule A Stock of the For	eigii Corp	JUTALIUII			/h\ N	mhar of obo	rae iccuad	and outstand	dina
(a) Daga	rintian of aga	h alaga of atook							
(a) Desc	ription of each	h class of stock				ing of annua ing period		(ii) End of ar accounting p	
COMMON							1		1
							_		
LHA For Paperwork Reduction Act Notice,	see instructio	ns.					Form	5471 (Rev	. 12-2022)
SEE STA	TEMENT	י 1	SEI	E STATEMENT	2				

212301 01-04-23 Form 5471 (Rev. 12-2022) Page **2**

Schedule B Shareholders of Forei	gn Corporation		
Part I U.S. Shareholders of Foreig	Corporation (see instructions)		_
(a) Name, address, and identifying number of shareholder	(b) Description of each class of stock held by shareholder. Note: This description should match the corresponding description entered in Schedule A, column (a). (c) Number of shares held at beginning of annual accounting period	end of annual accounting period	(e) Pro rata share of Subpart F income (enter as a percentage)
UNIVERSITY OF TEXAS FOUN	1	1	100.00%
9011 MOUNTAIN RIDGE DR	COMMON		
AUSTIN TX 78759			
74-1587488			
Part II Direct Shareholders of Ford	ign Corporation (see instructions)		
(a) Name, address, and identifying number of shareholder. Also, include country of incorporation or formation, if applicable.	(b) Description of each class of stock held by shareholder. Note: This description should match the corresponding description entered in Schedule A, column (a).	(c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period
UNIVERSITY OF TEXAS FOUN		1	1
9011 MOUNTAIN RIDGE DR	COMMON		
AUSTIN TX 78759			
74-1587488			

Form **5471** (Rev. 12-2022)

Form 5471 (Rev. 12-2022) Page **3**

Schedule C Income Statement

Important: Report all information in functional currency in accordance with U.S. generally accepted accounting principles (GAAP). Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for dollar approximate separate transactions method (DASTM) corporations.

			Functional Currency	U.S. Dollars
	1a Gross receipts or sales	1a		
	b Returns and allowances	1 1		
	c Subtract line 1b from line 1a	1c		
	2 Cost of goods sold			
	3 Gross profit (subtract line 2 from line 1c)	3		
e	4 Dividends			
ncome	5 Interest	1 - 1		
<u>=</u>	6a Gross rents	6a		
	b Gross royalties and license fees			
	7 Net gain or (loss) on sale of capital assets			
	8a Foreign currency transaction gain or loss - unrealized			
	b Foreign currency transaction gain or loss - realized			
	9 Other income (attach statement) SEE STATEMENT 3	9	1,505,100.	1,855,857.
	10 Total income (add lines 3 through 9)		1,505,100.	1,855,857.
	11 Compensation not deducted elsewhere			
	12a Rents			
	b Royalties and license fees			
us	13 Interest	13		
ē	14 Depreciation not deducted elsewhere			
Deductions	15 Depletion			
Ď	16 Taxes (exclude income tax expense (benefit))	16		
	17 Other deductions (attach statement - exclude income tax expense			
	(benefit)) SEE STATEMENT 4	17	1,500,131.	1,849,730.
	18 Total deductions (add lines 11 through 17)	. 18	1,500,131.	1,849,730. 1,849,730.
	19 Net income or (loss) before unusual or infrequently occurring items, and			
e	income tax expense (benefit) (subtract line 18 from line 10)	. 19	4,969.	6,127.
et Income	20 Unusual or infrequently occurring items			
Ë	21a Income tax expense (benefit) - current			
Ne	b Income tax expense (benefit) - deferred			
	22 Current year net income or (loss) per books (combine lines 19 through 21b)		4,969.	6,127.
	23a Foreign currency translation adjustments	23a		
Sive	b Other			
ther ehen come	c Income tax expense (benefit) related to other comprehensive income	23c		
Other Comprehensive Income	24 Other comprehensive income (loss), net of tax (line 23a plus line 23b less			
ŏ	line 23c)	24		

Form **5471** (Rev. 12-2022)

Form 5471 (Rev. 12-2022) Page 4

Schedule F	Balance	Sheet
------------	---------	-------

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions

	Assets		(a) Beginning of annual accounting period		(b) End of annual accounting perior	d
1	Cash	1	0.		7,3	
2a	Trade notes and accounts receivable	2a				
b	Less allowance for bad debts	2b	((
3	Derivatives	3				
4	Inventories	4				
5	Other current assets (attach statement)	5				
6	Loans to shareholders and other related persons	6				
7	Investment in subsidiaries (attach statement)	7				
8	Other investments (attach statement)	8				
9a		9a				
b		9b	()	()
10a		10a				
b		10b	()	()
11		11				
12	Intangible assets:					
а		12a				
b		12b				
C		12c				
d		12d	()	()
13	Other assets (attach statement)	13	,			
14	Total assets	14			7,3	76.
	Liabilities and Shareholders' Equity					
15	Accounts payable	15				
16	Other current liabilities (attach statement)	16				
17		17				
18		18				
19		19				
20	Capital stock:					
а	Preferred stock	20a				
b		20b				
21		21				
22		22	0.		7,3	76.
23		23	()	()
24	Total liabilities and shareholders' equity	24			7,3	76.
Sc	hedule G Other Information					
					Yes	No
1	During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in a	any fo	reign			
	partnership?					Х
	If "Yes," see the instructions for required statement.					
2	During the tax year, did the foreign corporation own an interest in any trust?					X
3	During the tax year, did the foreign corporation own any foreign entities that were disregarded as sep	parate	from			
	their owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation of	wn ar	ny foreign			
	branches (see instructions)?					Х
	If "Yes," you are generally required to attach Form 8858 for each entity or branch (see instructions).					
4a	During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the	e fore	ign			
	corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to a					
	payment made or accrued to the foreign corporation (see instructions)?					Х
	If "Yes," complete lines 4b and 4c.					
b	Enter the total amount of the base erosion payments		\$			

b Enter the total amount of the disallowed deductions (see instructions) 212331 01-04-23

c Enter the total amount of the base erosion tax benefit
 5a During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the deduction is not

Enter the total amount of the base erosion tax benefit

Form **5471** (Rev. 12-2022)

Х

allowed under section 267A?

If "Yes," complete line 5b.

FORM 5471	AMOUNT AND TYPE OF INDEBTEDNESS OF CORPORATION TO THE RELATED PERSONS IN REGULATIONS SECTION 1.6046-1(DESCRIBED	PATEMENT 1	
AMOUNT	DESCRIPTION			
	NONE			
FORM 5471 NAME, ADDRESS, IDENTIFYING NUMBER AND NUMBER OF STATEMEN SHARES SUBSCRIBED TO BY EACH SUBSCRIBER TO THE STOCK OF THE FOREIGN CORPORATION				
	NAME AND ADDRESS	IDENTIFYING NUMBER	NUMBER OF SHARES	
UT FOUNDATION AUSTIN TX 787	N, INC 9011 MOUNTAIN RIDGE DR NO 150	74-1587488	1	

FORM 5471 OTHER	INCOME		STATEMENT 3
DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
DONATIONS AND LEGACIES OTHER INCOME	1,501,656.	.811000 .811000	1,851,610.
TOTAL TO 5471, SCHEDULE C, LINE 9	1,505,100.		1,855,857.
FORM 5471 OTHER D	EDUCTIONS		STATEMENT 4
FORM 5471 OTHER D DESCRIPTION	EDUCTIONS FUNCTIONAL CURRENCY	EXCHANGE RATE	STATEMENT 4 U.S. DOLLAR
	FUNCTIONAL		

Form 5471 (Rev. 12-2022)

Schedule G Other Information (continued) Yes No 6a Is the filer claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any transactions with the foreign corporation? Х If "Yes," complete lines 6b, 6c, and 6d. See instructions. Enter the amount of gross reciepts derived from all sales of general property to the foreign corporation that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) Enter the amount of gross receipts derived from all sales of intangible property to the foreign corporation that the filer included in its computation of FDDEI Enter the amount of gross receipts derived from all services provided to the foreign corporation that the filer included in \$_ X During the tax year, was the foreign corporation a participant in any cost-sharing arrangement? If the answer to question 7 is "Yes," complete a separate Schedule G-1 for each cost sharing arrangement in which the foreign corporation was a participant during the tax year. From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations Х section 1.358-6(b)(2))? Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S. Х transferor is required to report a section 367(d) annual income inclusion for the tax year? If "Yes," go to line 9b. Enter in functional currency the amount of the earnings and profits reduction pursuant to section 367(d) During the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section Х 1.7874-12(a)(9)? If "Yes," see instructions and attach statement. During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations Х If "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G). During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under X section 901(m)? During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended? Х X Did you answer "Yes" to any of the questions in the instructions for line 14? If "Yes," enter the corresponding code(s) from the instructions and attach statement Does the foreign corporation have interest expense disallowed under section 163(j) (see instructions)? Х If "Yes," enter the amount Does the foreign corporation have previously disallowed interest expense under section 163(j) carried forward 16 Х to the current tax year (see instructions)? If "Yes," enter the amount \$ _ 17a Did any extraordinary reduction with respect to a controlling section 245A shareholder occur during the tax year Х If the answer to question 17a is "Yes," was an election made to close the tax year such that no amount is treated as an extraordinary reduction amount or tiered extraordinary reduction amount (see instructions)? Does the reporting corporation have any loan to or from the related party to which the safe-haven rate rules of Regulations section 1.482-2(a)(2)(iii)(B) are applicable, and for which the reporting corporation used a rate of interest within the safe-haven range of Regulations section 1.482-2(a)(2)(iii)(B)(1) (100% to 130% of the AFR for the Х relevant term)? 19a Did the reporting corporation make at least one distribution or acquisition (as defined by Regulations section 1.385-3) during the period including the tax year and the preceding 3 tax years, or, during the period beginning 36 months before the date of the respective distribution or acquisition and ending 36 months afterward, did the Х reporting corporation issue or refinance indebtedness owed to a related party? If the answer to question 19a is "Yes," provide the following. (1) The amount of such distribution(s) and acquisition(s) \$______ (2) The amount of such related party indebtedness \$_______

Form **5471** (Rev. 12-2022)

Form 5471 (Rev. 12-2022) Page **6**

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item H on page 1 is completed, a separate Schedule I must be filed for each Category 4, 5a, or 5b filer for whom reporting is furnished on this Form 5471. This Schedule I is being completed for:

Name o	f U.S. shareholder UNIVERSITY OF TEXAS FOUNDATI Identifying number 74-1587488				
1 a	Section 964(e)(4) Subpart F dividend income from the sale of stock of a lower-tier foreign corporation				
	(see instructions)	1a			
b	Section 245A(e)(2) Subpart F income from hybrid dividends of tiered corporations (see instructions)	1b			
C	Subpart F income from tiered extraordinary disposition amounts not eligible for subpart F exception				
	under section 954(c)(6)	1c			
d	Subpart F income from tiered extraordinary reduction amounts not eligible for subpart F exception				
	under section 954(c)(6)	1d			
е	Section 954(c) Subpart F Foreign Personal Holding Company Income (enter result from Worksheet A)	1e			
f	Section 954(d) Subpart F Foreign Base Company Sales Income (enter result from Worksheet A)	1f			
g	Section 954(e) Subpart F Foreign Base Company Services Income (enter result from Worksheet A)	1g			
h	Other subpart F income (enter result from Worksheet A)	1h			
2	Earnings invested in U.S. property (enter the result from Worksheet B)	2			
3	Reserved for future use	3			
4	Factoring income	4			
	See instructions for reporting amounts on lines 1, 2, and 4 on your income tax return.				
5 a	Section 245A eligible dividends (see instructions)	5a			
b	Extraordinary disposition amounts (see instructions)	5b			
C	Extraordinary reduction amounts (see instructions)	5c			
d	Section 245A(e) dividends (see instructions)	5d			
е	Dividends not reported on line 5a, 5b, 5c, or 5d	5e			
6	Exchange gain or (loss) on a distribution of previously taxed earnings and profits	6		1	1
				Yes	No
7 a	Was any income of the foreign corporation blocked?				X
b	Did any such income become unblocked during the tax year (see section 964(b))?				
If the ar	swer to either question is "Yes," attach an explanation.				
8 a	Did this U.S. shareholder have an extraordinary disposition (ED) account with respect to the foreign corporation at				
	any time during the tax year (see instructions)?				X
b	If the answer to question 8a is "Yes," enter the U.S. shareholder's ED account balance at the beginning of the CFC year				
	\$ and at the end of the tax year \$ Provide an attachment detailing any chang	es from	the		
	beginning to the ending balances.				
C	Enter the CFC's aggregate ED account balance with respect to all U.S. shareholders at the beginning of the CFC year				
	\$ and at the end of the tax year \$ Provide an attachment detailing any chang	es from	the		
-	beginning to the ending balances.	•			
9	Enter the sum of the hybrid deduction accounts with respect to stock of the foreign corporation (see instructions)	. \$	E 474		
		Form :	5471 ₍	(Rev. 12	-2022)

SCHEDULE G-1 (Form 5471)

Cost Sharing Arrangement

(December 2021)

Penartment of the Treasury.

Attach to Form 5471.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

	of person filing Form 5471		Identifying number		
	·	IŅC	74-1587488		
Name o	of foreign corporation	EIN (if any)	Reference ID number	(see instr	uctions)
UT 1	FOUNDATION UK LIMITED	98-1644268	13060396		
	tant. Complete a separate Schedule G-1 for each cost sharing arrapant during the tax year. Report all amounts in U.S. dollars. See in:		e foreign corporation was a		
1	Provide a brief description of the CSA with respect to which this $\underline{N/A}$	· ·	pleted.		
				Yes	No
2	During the course of the tax year, did the foreign corporation bed	come a participant in the CS	SA?		Х
3	Was the CSA in effect before January 5, 2009?				Х
4	What was the foreign corporation's share of reasonably anticipat				
	the tax year?		>		
5a	Did a U.S. taxpayer make any platform contributions (as defined				
	during the tax year?				X
b	If the answer to question 5a is "Yes," enter the present value of t				
	U.S. dollars	•	\$		
С	If the answer to question 5a is "Yes," check the box for the meth				
	determine the price of the platform contribution transaction(s).				
	Comparable uncontrolled transaction method	ome method	Acquisition price method		
	Market capitalization method Res	sidual profit split method	Unspecified method		
6a	Enter the total amount of stock-based compensation deductions	s claimed by the filer for the	tax		
	year		> \$		
b	Enter the total amount of deductions for the tax year for stock-ba	ased compensation that was	s		
	granted during the term of the CSA and, at the date of the grant	is directly identified with, or	-		
	reasonably allocable to, the intangible development activity under	er the CSA	> \$		
С	Was there any stock-based compensation granted during the ter	m of the CSA to individuals	who performed		
	functions in business activities that generate cost shared intangi	bles that was not treated as	s directly identified		
	with, or reasonably allocable to, the intangible development activ	vity?			Х
7a	For the tax year, enter the total amount of intangible developmer		> \$		
b	For the tax year, enter the amount of intangible development cos	sts allocable to the foreign			
	corporation based on the foreign corporation's reasonably antici	pated benefits share	> \$		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule G-1 (Form 5471) (12-2021)

SCHEDULE E (Form 5471)

Income, War Profits, and Excess Profits Taxes Paid or Accrued

(Rev. December 2021) Department of the Treasury Internal Revenue Service ➤ Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

	person filing Form 5471	mpvac	EΟ	א רוווד	MITONI INC	,											ifying nu –158		0.0
	UNIVERSITY OF foreign corporation	TEXAS	FU	UNDA	TION, INC							EIN (if any)	١						er (see instructions)
	OUNDATION UK L	тмттег)									98-16					6039		er (see instructions)
	Separate Category (Enter code			ne)													► GI		
h If	code 901j is entered on line	a enter the	COLL	intry cod	e for the sanction	ned country	(see ins	truction									<u> </u>		
c If	one of the RBT codes is enter	ered on line	a. e	nter the	country code for	the treaty co	ountry (s	see inst	ructi	ions)							_		
Part							, (,									
Section	n 1 - Taxes Paid or Accr	ued Direc	ctly I	by Fore	ign Corporation	on													
						(b)		(c)		Country	(d)	Possession		(e				T)/	(f)
	Nam	(a) ne of Payor	Entit	h.,		EIN or Ref ID Numb		Unsusper	- 1	to Wh	ich Tax	ls Paid			ear of Pa				ear of Payor Entity th Tax Relates
	Name of Payor Entity ID Number of Payor Entity (Enter code - see instructions. Use a separate line for each.) (Year/Month/Day)									1103			/Month/Day)						
1																			
2	2																		
3																			
4																			
	(g) Income Subject to Tax	If taxes	(h) are n	aid on	(i) Local Curr	ency in	Tav	(j Paid o		crued		(k)			(I)				(m)
	in the Foreign Jurisdiction	U.S. sou			Which Tax Is					in which	С	onversion Ra U.S. Dolla			In U.S. Dol				ctional Currency
	(see instructions)																		
1																			
2																			
3																			
4																			
5	Total (combine lines 1 through				report amount or	n Schedule E	E-1, line ⋅	4					▶						
6	Total (combine lines 1 through															🕨			
Sectio	n 2 - Taxes Deemed Pai	d by Fore	ign (Corpor	ation														
		(a)				(b) EIN or Refer	rence ID			Country	or U.S	(c) . Possession to	o Which Ta	x Is			(d)		(e) Annual PTEP
	Name of Lower-Tier		g For	eign Cor	poration	Number of Lo Distributing				•		r code-see ins					P Grou er code		Account
						Corpora	tion			L	lse a se	eparate line fo	r each.)			(GIII	ei code	=)	(enter year)
1								1											
								-											
3								-										\rightarrow	
4																		(i)	
	(f)					(g)			Τ.	stal Amount	of the	(h) PTEP Group 1	Tayos With	Pospost	Foreign I	ncome T			Attributable to PTEP
	PTEP Distrib (enter amount in funct)		ncv)		ו otal A in the PTEP Grou	mount of Pl		ency)	10	nai Amount		TEP Group (U		nespeci	, .				emed Paid
	Torrest amount in funct		.5,			, (iii iuiiotic	, ar our	J. 10 y /	+			. ,			((col	umn (f)/c	column ((g)) x co	olumn (h)) (USD)
1									+										
									+										
<u>3</u> 4									+										
	intel (combine lines 1 through	4 of ool: :	an (i\\	Also **	nort amount as C	Pohodulo F 1	l line 6												
212445	otal (combine lines 1 through						i, iirie o											<i></i>	E4E4) (D. 40.000.1)

Schedule E (Form 5471) (Rev. 12-2021) Name of foreign corporation EIN (if any) Reference ID number (see instructions) 98-1644268 UT FOUNDATION UK LIMITED 13060396 GEN a Separate Category (Enter code - see instructions.) **b** If code 901j is entered on line a, enter the country code for the sanctioned country (see instructions) If one of the RBT codes is entered on line a, enter the country code for the treaty country (see instructions) Part II Election For tax years beginning after December 31, 2004, has an election been made under section 986(a)(1)(D) to translate taxes using the exchange rate on the date of payment? X No If "Yes," state date of election Taxes for Which a Foreign Tax Credit Is Disallowed (Enter in functional currency of foreign corporation.) Part III (b) (g) (c) (h) (i) (d) EIN or Reference ID Suspended Name of Payor Entity Other Section 901(i) Section 901(k) and (l) Section 901(m) U.S. Taxes Total No. of Payor Entity Taxes In functional currency (combine lines 1 and 2) 4 In U.S. dollars (translated at the average exchange rate, as defined in section 989(b)(3) and related regulations (see instructions)) Taxes Paid, Accrued, or Deemed Paid on Earnings and Profits (E&P) of Foreign Corporation Schedule E-1 Taxes related to: IMPORTANT: Enter amounts in U.S. dollars. (d) Subpart F Income Tested Income Residual Income Suspended Taxes Balance at beginning of year (as reported in prior year Schedule E-1) 1a Beginning balance adjustments (attach statement) Adjusted beginning balance (combine lines 1a and 1b) 2 Adjustment for foreign tax redetermination За Taxes unsuspended under anti-splitter rules Taxes suspended under anti-splitter rules b Taxes reported on Schedule E, Part I, Section 1, line 5, column (I) 4 5 Taxes carried over in nonrecognition transactions Taxes reported on Schedule E. Part I. Section 2. line 5. column (i) 6 7 Other adjustments (attach statement) Taxes paid or accrued on current income/E&P or accumulated E&P (combine lines 1c through 7) 9 Taxes deemed paid with respect to inclusions (see instructions) 10 Taxes deemed paid with respect to actual distributions 11 Taxes on amounts reclassified to section 959(c)(1) E&P from section 959(c)(2) E&P 12 Other (attach statement) 13 Balance of taxes paid or accrued (combine lines 8 through 12 in columns (a), (b), and (c)) 14 Reserved for future use 15 Reduction for other taxes not deemed paid 16 Balance of taxes paid or accrued at the beginning of the next year. Line 16, columns (a), (b),

and (c) must always equal zero. So, if necessary, enter negative amounts on line 15 of columns (a), (b), and (c) in amounts sufficient to reduce line 13, columns (a), (b), and (c) to

zero. For the remaining columns, combine lines 8 through 12

Schedule E (Form 5471) (Rev. 12-2021)

Name of foreign corporation	EIN (if any)	Reference ID number (see instructions)
UT FOUNDATION UK LIMITED	98-1644268	13060396
a Separate Category (Enter code - see instructions.)		→ GEN
b If code 901j is entered on line a, enter the country code for the sanctioned country (see instructions)		•
c If one of the RBT codes is entered on line a, enter the country code for the treaty country (see instructions)		
Schedule E-1 Taxes Paid, Accrued, or Deemed Paid on Accumulated Earnings and Profits	(E&P) of Foreign Corporation	(continued)

	(e) Taxes related to previously taxed E&P (see instructions)									
	(i) Reclassified section 965(a) PTEP	(ii) Reclassified section 965(b) PTEP	(iii) General section 959(c)(1) PTEP	(iv) Reclassified section 951A PTEP	(v) Reclassified section 245A(d) PTEP	(vi) Section 965(a) PTEP	(vii) Section 965(b) PTEP	(viii) Section 951A PTEP	(ix) Section 245A(d) PTEP	(x) Section 951(a)(1)(A) PTEP
1a										
b										
с										
_ 2										
3a										
b										
4										
5										
6										
7										
8										
_9										
10										
12										
13										
14										
15										
16										

212447 04-01-22 Schedule E (Form 5471) (Rev. 12-2021)

SCHEDULE H (Form 5471) (Rev. December 2021)

Current Earnings and Profits

► Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service Name of person filing Form 5471 Identifying number 74 - 1587488THE UNIVERSITY OF TEXAS FOUNDATION, INC EIN (if any) Reference ID number (see instr.) Name of foreign corporation 98-1644268 UT FOUNDATION UK LIMITED 13060396

1	Current year net income or (loss) per foreign books of accour	nt				1	4,969.
2	Net adjustments made to line 1 to determine current						2,3031
_	earnings and profits according to U.S. financial and tax						
	accounting standards (see instructions):		Net Addition	<u> </u>	Net Subtractions		
а	Capital gains or losses	2a	TTOETTAGGILIOTT	<u> </u>	tot odbtraotions	1	
b	Depreciation and amortization					1	
c	Depletion						
d	Investment or incentive allowance					1	
e	Charges to statutory reserves					1	
f						1	
	Inventory adjustments Income taxes (see Schedule E, Part I, Section 1, line 6,	21				1	
g	column (m), and Part III, line 3, column (i))	2g					
h	Foreign currency gains or losses					-	
i	Other (attach statement)					-	
3	Total net additions					1	
4	T						
т 5а	Current earnings and profits (line 1 plus line 3 minus line 4)					5a	4,969.
b	DASTM gain or (loss) for foreign corporations that use DASTI		\			5b	1,3030
	Combine lines 5a and 5b and enter the result on line 5c. The	-				36	
С	through 5c(iii)(D) the portion of the line 5c amount with respe		.,,	` '	• •		
	on those lines		Ü			5c	4,969.
	(i) General category (enter amount on applicable Schedule		·····	I		30	4,505.
	line 3, column (a))		_	ic(i)	4,969.		
	(ii) Passive category (enter amount on applicable Schedule		·····	(1)	4,505.	-	
	line 3, column (a))		_	c(ii)			
	(iii) Section 901(j) category:			c(ii)		1	
		_					
	(A) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sance						
	country on this line 5c(iii)(A) and on the applicable Sc						
	Part I, line 3, column (a)		Fal	:::\/ A\			
	_			iii)(A)		-	
	(B) Enter the country code of the sanctioned country						
	and enter the line 5c amount with respect to the san						
	country on this line 5c(iii)(B) and on the applicable Sc	•	F-1				
	Part I, line 3, column (a)			iii)(B)		-	
	(C) Enter the country code of the sanctioned country						
	and enter the line 5c amount with respect to the san						
	country on this line 5c(iii)(C) and on the applicable So		L.				
	Part I, line 3, column (a)		<u>5c(</u>	iii)(C)		-	
	(D) Enter the country code of the sanctioned country						
	and enter the line 5c amount with respect to the san						
	country on this line 5c(iii)(D) and on the applicable So						
	Part I, line 3, column (a)			iii)(D)			
d	Current earnings and profits in U.S. dollars (line 5c translated	at the ave	rage exchange r	ate, as			c 40=
	defined in section 989(b)(3) and the related regulations (see in	nstructions))	·····		5d	6,127.
	Enter exchange rate used for line 5d				.811000		

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule H (Form 5471) (Rev. 12-2021)

SCHEDULE I-1 (Form 5471)

Information for Global Intangible Low-Taxed Income

(Rev. December 2021)

Department of the Treasury Internal Revenue Service ► Attach to Form 5471.

OMB No. 1545-0123

► Go to www.irs.gov/Form5471 for instructions and the latest information.

Name o	f person filing Form 5471					Identifying number				
THE	UNIVERSITY OF TEXAS FOUND	ATIO	N, INC			74-158748	8			
Name o	f foreign corporation		EIN ((if any)		Reference ID numb	per (see instructions)			
UT I	FOUNDATION UK LIMITED		98-	-16442	68	13060396				
	Separate Category (Enter code - see instructions)						GEN			
					Functional	Conversion	U.S. Dollars			
					Currency	Rate	U.S. Dollars			
1	Gross income (see instructions if cost of goods sol	ld excee	ed gross							
	receipts)			1	1505100.					
2	Exclusions (see instructions if cost of goods sold e	xceed	gross receipts)							
а	Effectively connected income	2a								
b	Subpart F income	2b								
С	High-tax exception income per section 954(b)(4)	2c								
d	Related party dividends	2d								
е	Foreign oil and gas extraction income	2e								
3	Total exclusions (combine lines 2a through 2e)			3						
4	Gross income less total exclusions (line 1 minus lin	ne 3) (se	e instructions)	4	1505100.					
5	Deductions properly allocable to amount on line 4			5	1500131.					
6	Tested income (loss) (line 4 minus line 5)			6	4,969.	.811000	6,127.			
7	Tested foreign income taxes			7		.811000				
8	Qualified business asset investment (QBAI)	,		8		.811000				
9a	Interest expense included on line 5									
b	Qualified interest expense	9b								
С	Tested loss QBAI amount	9с								
d	Tested interest expense (line 9a minus the sum of	line 9b a	and line							
	9c). If zero or less, enter -0-	γ		9d		.811000				
10a	Interest income included in line 4									
b	Qualified interest income	10b								
С	Tested interest income (line 10a minus line 10b). If	zero or	less,							

10c

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule I-1 (Form 5471) (Rev. 12-2021)

.811000

SCHEDULE J (Form 5471)

Accumulated Earnings & Profits (E&P) of Controlled Foreign Corporation

► Attach to Form 5471.

(Rev. December 2020)
Department of the Treasury
Internal Revenue Service

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name o	of person filing Form 5471								Identify	ing number
THE	UNIVERSITY OF TEXAS FOUNDATION	, INC							74-	1587488
Name o	of foreign corporation				EIN (if any)		Reference	ce ID number		
$\mathbf{U}\mathbf{T}$	FOUNDATION UK LIMITED				98-164	4268	130	60396		
а .	Separate Category (Enter code - see instructions.)				•				GEN	
	If code 901j is entered on line a, enter the country code for the s									
	t I Accumulated E&P of Controlled Foreign Co		,					•		
	Check the box if person filing return does not have all U.S. sha	reholders' information	to complete an amoun	t in colu	mn (e) (see ins	tructions).				
Impo	rtant: Enter amounts in functional currency.	(a)	(b) Post-1986		(c)	(d)	1	(e) Previously 1	Taxed	E&P (see instructions)
	,	Post-2017 E&P Not Previously Taxed (post-2017 section 959(c)(3) balance)	Post-1986 Undistributed Earnings (post-1986 and pre-2018 section 959(c)(3) balance)	Previ (pre-1	987 E&P Not ously Taxed 987 section)(3) balance)	Hovering Def and Deducti for Suspend Taxes	on	(i) Reclassifi section 965(a)		(ii) Reclassified section 965(b) PTEP
1a	Balance at beginning of year (as reported on prior year Schedule J)									
b	Beginning balance adjustments (attach statement)									
С	Adjusted beginning balance (combine lines 1a and 1b)									
2a	Reduction for taxes unsuspended under anti-splitter rules									
b	Disallowed deduction for taxes suspended under									
	anti-splitter rules									
3	Current year E&P (or deficit in E&P) (enter amount									
	from applicable line 5c of Schedule H)	4,969.								
4	E&P attributable to distributions of previously taxed									
	E&P from lower-tier foreign corporation									
5a	E&P carried over in nonrecognition transaction									
b	Reclassify deficit in E&P as hovering deficit after									
	nonrecognition transaction									
6	Other adjustments (attach statement)									
7	Total current and accumulated E&P (combine lines									
	1c through 6)	4,969.								
8	Amounts reclassified to section 959(c)(2) E&P from									
	section 959(c)(3) E&P									
_ 9	Actual distributions									
10	Amounts reclassified to section 959(c)(1) E&P									
	from section 959(c)(2) E&P									
11	Amounts included as earnings invested in U.S. property									
	and reclassified to section 959(c)(1) E&P (see instructions)									
12	Other adjustments (attach statement)									
13	Hovering deficit offset of undistributed post-			l						

4,969.

Balance at beginning of next year (combine lines 7 through 13)

transaction E&P (see instructions)

raiti	Accumulated Lar of Coll	tioned roleigh corporation (continuea)				
				I E&P (see instructions))		
	(iii) General section 959(c)(1) PTEP	(iv) Reclassified section 951A PTEP	(v) Reclassified s	section 245A(d) PTEP	(vi) Section 965(a)	PTEP	(vii) Section 965(b) PTEP
1a							
b							
С							
2a							
b							
3							
4							
5a							
b							
6							
7							
9							
10							
11							
12							
13							
14							
		(e) Previously Taxed E&P	(see instructions)				(f) Total Section 964(a) E&P
	(viii) Section 951A PTEP	(ix) Section 245A	(d) PTEP	(x) Section 9	951(a)(1)(A) PTEP	(0	Total Section 964(a) E&P combine columns (a), (b), (c), and (e)(i) through (e)(x))
1a							
b							
С							
2a							
b							
3							4,969.
4							
5a							
b							
6 7							4,969.
8							4,707.
9						-	
10							
11							
12							
13							
14							4,969.

Part	II Nonpreviously Taxed E&P Subject to Recapture as Subpart F Income (section 952(c)(2))		•	
Import	tant: Enter amounts in functional currency.			
1	Balance at beginning of year	•	1	
2	Additions (amounts subject to future recapture)		2	
3	Subtractions (amounts recaptured in current year)	•	3	
Ū	Cubitactions (amounts recaptured in current year)			
4	Balance at end of year (combine lines 1 through 3)	•	4	

Schedule J (Form 5471) (Rev. 12-2020)

SCHEDULE M (Form 5471)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Transactions Between Controlled Foreign Corporation and Shareholders or Other Related Persons

► Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471				Ident	ifying number
THE UNIVERSITY OF TE	XAS FOUNDATI	ION, INC		74-	1587488
Name of foreign corporation		EIN (if any)	Refere	nce ID number	
UT FOUNDATION UK LIM	ITED	98-16442	68 130	60396	
Important: Complete a separate Schedule the annual accounting period between the dollars translated from functional current	ne foreign corporation a	and the persons listed i	n columns (b) through	(f). All amounts must be	
Enter the relevant functional currency and the	exchange rate used throu	ighout this schedule	UNITED KING	DOM, POUND	.811000
(a) Transactions of	(b) U.S. person	(C) Any domestic corporation or partnership controlled by	(d) Any other foreign corporation or partnership controlled by	(e) 10% or more U.S. shareholder of controlled foreign corporation	(f) 10% or more U.S. shareholder of any corporation

	(a) Transactions of foreign corporation	(b) U.S. person filing this return	(C) Any domestic corporation or partnership controlled by U.S. person filing this return	(0) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(T) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1	Sales of stock in trade (inventory)					
	Sales of tangible property other than					
_	stock in trade					
3	Sales of property rights (patents,					
4	trademarks, etc.) Platform contribution transaction payments					
5	received Cost sharing transaction payments received					
	Compensation received for technical,					
Ŭ	managerial, engineering, construction,					
	or like services					
7	Commissions received					
	Rents, royalties, and license fees received					
-	Hybrid dividends received (see instr.)					
	Dividends received (exclude hybrid dividends, deemed distributions under subpart F, and distributions of previously taxed income)					
11	Interest received					
	Premiums received for insurance or					
	reinsurance					
13	Loan guarantee fees received					
	Other amounts received (att. statement)					
	Add lines 1 through 14					
	Purchases of stock in trade (inventory)					
	Purchases of tangible property other					
	than stock in trade					
18	Purchases of property rights					
	(patents, trademarks, etc.)					
19	Platform contribution transaction					
	payments paid					
20	Cost sharing transaction payments paid					
21	Compensation paid for technical, managerial, engineering, construction,					
22	or like services Commissions paid					
	Rents, royalties, and license fees paid					
	Hybrid dividends paid (see instructions)					
25	Dividends paid (exclude hybrid dividends paid)					
26	Interest paid					
	Premiums paid for insurance or reinsurance					
28	Loan guarantee fees paid					
29	Other amounts paid (attach statement)					
			I	I		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule M (Form 5471) (Rev. 12-2021)

loan balance during the year) - see instr.

Name of person filing Form 5471

THE UNIVERSITY OF TEXAS FOUNDATION, INC

(a) Transactions of foreign corporation

(b) U.S. person filling this return

(c) Any domestic corporation or partnership controlled by U.S. person filling this return

(d) Any other foreign corporation or partnership corporation or partnership controlled by U.S. person filling this return

(a) Transactions of foreign corporation

(b) U.S. person filling this return

(c) Any domestic corporation or partnership controlled by U.S. person filling this return

(d) Any other foreign corporation or partnership controlled by U.S. person filling this return

(present the foreign corporation on partnership controlled by U.S. person filling this return)

(f) 10% or more U.S. shareholder of controlled foreign corporation controlling the foreign corporation

(a) Transactions

(b) U.S. person filling this return

(c) Any other foreign corporation or partnership controlled by U.S. person filling this return

(d) Any other foreign corporation or partnership controlled by U.S. person filling this return

(present filling this return)

(f) 10% or more U.S. shareholder of controlled foreign corporation controlling the foreign corporation

(a) Transactions

(b) U.S. person filling this return

(c) Any other foreign corporation or partnership controlled by U.S. person filling this return

(d) Any other foreign corporation

(present filling this return)

(f) 10% or more U.S. shareholder of controlled for other universal foreign corporation or partnership controlled by U.S. person filling this return

(f) 10% or more U.S. shareholder of controlled for other foreign corporation or partnership controlled by U.S. person filling this return

(g) 10% or more U.S. shareholder of controlled for other foreign corporation or partnership controlled for other foreign corporation or p

Schedule M (Form 5471) (Rev. 12-2021)

Identifying number

SCHEDULE P (Form 5471)

(Rev. December 2020)

Previously Taxed Earnings and Profits of U.S. Shareholder of Certain Foreign Corporations

► Attach to Form 5471.

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form5471 for instructions and the latest information. Name of person filing Form 5471

OMB No. 1545-0123

Identifying number

THE	UNIVERSITY OF TEXAS FOUNDATION, INC	7	74-1587488				
Name	of U.S. shareholder		I	dentifying nun	nber		
UNI	VERSITY OF TEXAS FOUNDATION, INC		7	4-1587	488		
		IN (if any)			number (see instructions)		
		8-1644268		306039			
a	Separate Category (Enter code - see instructions.)			<u> </u>	N		
	If code 901j is entered on line a, enter the country code for the sanctioned country (see instructions) t I Previously Taxed E&P in Functional Currency (see instructions)			>			
Гаі							
		(a) Reclassified section 965(a) PTEP	Reclassifie	b) ed section) PTEP	(c) General section 959(c)(1) PTEP		
1a_	Balance at beginning of year (see instructions)						
b	Beginning balance adjustments (attach statement)						
c	Adjusted beginning balance (combine lines 1a and 1b)						
_2	Reduction for taxes unsuspended under anti-splitter rules						
3	Previously taxed E&P attributable to distributions of previously taxed E&P from lower-tier foreign corporation						
4	Previously taxed E&P carried over in nonrecognition transaction						
5	Other adjustments (attach statement)						
6	Total previously taxed E&P (combine lines 1c through 5)						
_ 7	Amounts reclassified to section 959(c)(2) E&P from section 959(c)(3) E&P						
8	Actual distributions of previously taxed E&P						
_9	Amounts reclassified to section 959(c)(1) E&P from section 959(c)(2) E&P						
10	Amounts included as earnings invested in U.S. property and reclassified to section 959(c)(1) E&P (see instructions)						
11	Other adjustments (attach statement)						
12	Balance at beginning of next year (combine lines 6 through 11)						
1 1 1 4	For Department Department and Making and Instructions						

Schedule P (Form 5471) (Rev. 12-2020)

Part	Previously Taxed E&P in Functional Currency (see instructions) (continued)									
	(d) Reclassified section 951A PTEP	(e) Reclassified section 245A(d) PTEP	(f) Section 965(a) PTEP	(g) Section 965(b) PTEP	(h) Section 951A PTEP	(i) Section 245A(d) PTEP	(j) Section 951(a)(1)(A) PTEP	(k) Total		
_1a										
b										
_ с										
_2										
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_5										
_6										
_7										
8										
9										
10										
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Schedule P (Form 5471) (Rev. 12-2020)

Schedule P (Form 5471) (Rev. 12-2020)

Par	t II Previously Taxed E&P in U.S. Dollars			
		(a) Reclassified section 965(a) PTEP	(b) Reclassified section 965(b) PTEP	(c) General section 959(c)(1) PTEP
1a	Balance at beginning of year (see instructions)			
b	Beginning balance adjustments (attach statement)			
c	Adjusted beginning balance (combine lines 1a and 1b)			
_2	Reduction for taxes unsuspended under anti-splitter rules			
3	Previously taxed E&P attributable to distributions of previously taxed E&P from lower-tier foreign corporation			
_4	Previously taxed E&P carried over in nonrecognition transaction			
5	Other adjustments (attach statement)			
6	Total previously taxed E&P (combine lines 1c through 5)			
	Amounts reclassified to section 959(c)(2) E&P from section 959(c)(3) E&P			
8	Actual distributions of previously taxed E&P			
9	Amounts reclassified to section 959(c)(1) E&P from section 959(c)(2) E&P			
10	Amounts included as earnings invested in U.S. property and reclassified to section 959(c)(1) E&P (see instructions)			
11	Other adjustments (attach statement)			
12	Balance at beginning of next year (combine lines 6 through 11)			

Schedule P (Form 5471) (Rev. 12-2020)

Schedule P (Form 5471) (Rev. 12-2020)
Page **4**

Part	TII Previously Taxed E&P in U.S. Dollars (continued)								
	(d) Reclassified section 951A PTEP	(e) Reclassified section 245A(d) PTEP	(f) Section 965(a) PTEP	(g) Section 965(b) PTEP	(h) Section 951A PTEP	(i) Section 245A(d) PTEP	(j) Section 951(a)(1)(A) PTEP	(k) Total	
1a									
b									
c									
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_6									
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Schedule P (Form 5471) (Rev. 12-2020)

SCHEDULE Q (Form 5471)

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

CFC Income by CFC Income Groups

Attach to Form 5471.

Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471						Ide	entifying nun	nber
THE UNIVERSITY OF TEXAS	FOUND	ATION, INC				7	4-158	7488
Name of foreign corporation					EIN (if any)	Ref	ference ID r	number (see instructions)
UT FOUNDATION UK LIMITED					98-1644268	13	06039	6
Complete a separate Schedule Q with respect to	o each app	licable category of inco	ome (see instructions).					
A Enter separate category code with respe	ect to whic	h this Schedule Q is be	eing completed (see instr	ructions for codes)			GEI	N
B If category code "PAS" is entered on line							'	
C If code "901j" is entered on line A, enter	the counti	y code for the sanction	ned country (see instruct	ions)				
Complete a separate Schedule Q for U.S. source	e income a	nd foreign source i <u>nc</u> o	me (see instructions for a	an exc <u>e</u> ption).				
D Indicate whether this Schedule Q is beir	ng complet	ed for:	U.S. source income or	Foreign so	ource income			
Complete a separate Schedule Q for FOGEI or F	ORI incom	e.						_
E If this Schedule Q is being completed fo	r FOGEI or	FORI income, check t	his box					
Enter amounts in functional currency of the foreign corporation (unless otherwise noted).	(i) Country Code	(ii) Gross Income	(iii) Definitely Related Expenses	(iv) Related Person Interest Expense	(v) Other Interest Expense	(vi) Research & Expens	perimental	(vii) Other Expenses (attach schedule)
Subpart F Income Groups					·	·		,
a Dividends, Interest, Rents, Royalties,								
& Annuities (Total)								
(1) Unit name:								
(2) Unit name:								
b Net Gain From Certain Property								
Transactions (Total)								
(1) Unit name:								
(2) Unit name:								
c Net Gain From Commodities								
Transactions (Total)								
(1) Unit name:								
(2) Unit name:								
d Net Foreign Currency Gain (Total)								
(1) Unit name:								
(2) Unit name:								
e Income Equivalent to Interest (Total)								
(1) Unit name:								
(2) Unit name:								
f Other								
(1) Unit name:								
(2) Unit name:								
g Foreign Base Company Sales								
Income (Total)								
(1) Unit name:								
(2) Unit name:								
Important: See Computer-Generated Sc	nedule Q	in instructions.						

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Schedule Q (Form 5471) (Rev. 12-2022)

	(viii) Current Year Tax on Reattributed Income From Disregarded Payments	(ix) Current Year Tax on All Other Disregarded Payments	(x) Other Current Year Taxes	(xi) Net Income (column (ii) less columns (iii) through (x))	(xii) Foreign Taxes for Which Credit Allowed (U.S. Dollars)	(xiii) Average Asset Value	(xiv Hig Ta: Elect	Loss Allocation	(xvi) Net Income After Loss Allocation (column (xi) minus column (xv))
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a									
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(2)							ш	_	
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(2)									

Important: See Computer-Generated Schedule Q in instructions.

Schedule Q (Form 5471) (Rev. 12-2022)

Schedule Q (Form 5471) (Rev. 12-2022)

Enter amounts in functional currency of the foreign corporation (unless otherwise noted).		(ii) Gross Income	(iii) Definitely Related Expenses	(iv) Related Person Interest Expense	(v) Other Interest Expense	(vi) Research & Experimental Expenses	(vii) Other Expenses (attach schedule)
1 Subpart F Income Groups							
h Foreign Base Company Services							
Income (Total)							
(1) Unit name:							
(2) Unit name:							
i Full Inclusion Foreign Base Company							
Income (Total)							
(1) Unit name:							
(2) Unit name:							
j Insurance Income (Total)							
(1) Unit name:							
(2) Unit name:							
k International Boycott Income							
I Bribes, Kickbacks, and Other							
Payments							
m Section 901(j) income							
2 Recaptured Subpart F Income	UK						
3 Tested Income Group (Total)							
(1) Unit name:							
(2) Unit name:							
4 Residual Income Group (Total)							
(1) Unit name:							
(2) Unit name:							
5 Total							

Important: See Computer-Generated Schedule Q in instructions.

Schedule Q (Form 5471) (Rev. 12-2022)

Schedule Q (Form 5471) (Rev. 12-2022)

	(viii) Current Year Tax on Reattributed Income From Disregarded Payments	(ix) Current Year Tax on All Other Disregarded Payments	(x) Other Current Year Taxes	(xi) Net Income (column (ii) less columns (iii) through (x))	(xii) Foreign Taxes for Which Credit Allowed (U.S. Dollars)	(xiii) Average Asset Value	(xiv) High Tax Election	(xv) Loss Allocation	(xvi) Net Income After Loss Allocation (column (xi) minus column (xv))
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(1)									
(2)									
i									
(1)									
(2)									
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(2)									
k									
m									
2									
3									
(1)									
(2)							Ш		
4									
(1)									
(2)									
5									

Important: See Computer-Generated Schedule Q in instructions.

Schedule Q (Form 5471) (Rev. 12-2022)

SCHEDULE R (Form 5471)

Distributions From a Foreign Corporation

► Attach to Form 5471.

(December 2020)
Department of the Treasury
Internal Revenue Service

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Internal Revenue Service Go to www.irs.gov/Form5471 for instruct	tions and the latest informat	ion.	
Name of person filing Form 5471		Identifying number 74-1587488	
THE UNIVERSITY OF TEXAS FOUNDATION, INC Name of foreign corporation	EIN (if any)	Reference ID number	(see instructions)
UT FOUNDATION UK LIMITED	98-1644268		(See mandenons)
(a) Description of distribution	(b) Date of distribution	(c) Amount of distribution in foreign corporation's functional currency	(d) Amount of E&P distribution in foreign corporation's functional currency
1 N/A	12/31/2022	0.	0.
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For Panarwark Poduction Act Notice see instructions LUA 040407 84 04		0.1	/Form F474) (10 0000)