### PUBLIC DISCLOSURE COPY

Form **990** 

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Open to Public

inte	mai Reven		do to www.irs.gov/Forms50 for instructions and the latest ir			Inspection	Ull		
Α	For the	2023 calend	lar year, or tax year beginning 07/01 , 2023, and ending	06/3	0	, 20 24			
В	Check if	applicable:	C Name of organization UNIVERSITY OF ARIZONA FOUNDATION		D Empl	oyer identification n	umber		
П	Address	change	Doing business as		130	G course to be a consequence to the			
一	Name ch			om/suite	F Teleni				
H	Initial retu		1111 NORTH CHERRY AVENUE	JOHN GUILG	15.000 Part 1 Av. 0.0 *00 April 100 March 200 April 200				
H		50000				(320) 021-3340			
님		rn/terminated		1	• •		10.000		
님	Amended		TUCSON, AZ 85721						
Ш	Application	on pending	· · · · · · · · · · · · · · · · · · ·	200000					
_			SAME AS C ABOVE				s ∐ No		
<u> </u>		npt status:			' attach a list. See instructions.				
J	Website:		FOUNDATION.ORG						
		rganization: 🗸	Corporation Trust Association Other L Year of format	ion: 1958	M State	of legal domicile:	AZ		
P	art I	Summai	У						
	1	Briefly desc	cribe the organization's mission or most significant activities: SEE SC	HEDULE O.					
Se									
Activities & Governance		(CONTINU	ED ON SCHEDULE O)						
ern	2	Check this	box if the organization discontinued its operations or disposed of	more than 25	% of it	s net assets.			
Š					1		27		
8	1								
es									
Λİ									
cti					-	/0			
٩				70 500 500 50		(9)	82,902)		
	b	Net unrelat	ed business taxable income from Form 990-1, Part I, line 11				0		
		_							
e			related business taxable income from Form 990-T, Part I, line 11	144,2	281,697				
enr		10 <del>00</del> 00		8,4	30,459	10,0	026,223		
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)	48,5	15,701	71,2	278,552		
ш	11	Other rever	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)... .	4:	38,775	(9:	58,796)		
	12	Total reven	ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	221,2	91,216	224,6	327,676		
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1-3)	98,10	05,412	117,6	574,041		
			id to or for members (Part IX, column (A), line 4)		0		0		
S		man an institution of the contract of the cont		14.1	27.578	16.3	321,222		
Expenses				H(c) Group exemption number   AZ					
Sen									
K				20.44	C2 24E	24.6	24 206		
	1			Erelephone number					
. 0		Revenue le							
Net Assets or Fund Balances		T							
sse	20		s (Part X, line 16)		-				
et A	21		ies (Part X, line 26)		,				
_			or fund balances. Subtract line 21 from line 20	1,298,7	12,532	1,397,7	707,676		
	art II		re Block						
Un	der penalt	ties of perjury,	I declare that I have examined this return, including accompanying schedules and state	ments, and to the	best of	my knowledge and b	elief, it is		
tru	e, correct,	and complete	. Declaration of preparer (other than officer) is based on all information of which preparer	nas any knowled	ge.				
				d/	13/05				
Sig	gn	Signature of	of officer	Date	/				
He	ere	J CRAIG	BARKER, SVP FINANCIAL SVCS						
		Type or pri	nt name and title						
D -	ام:	Print/Type	preparer's name Preparer's sometimes. Da	te	Check [	if PTIN			
Pa		PATRICK	SHIELDS	02/13/2025	The state of the s	√".	556		
	epare	Firm's name		02/10/2020		1010000			
Us	e Only	Firm's add					0		
Ma	v the ID				110.				
ivia	y trio ir t	C GIOCUSS L	no rotarn with the property shown above: oee instructions			. res	140		

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2023)

Cat. No. 11282Y

Partil	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE UNIVERSITY OF ARIZONA FOUNDATION IS COMMITTED TO SUPPORTING AND ENHANCING THE VISION,
	MISSION AND VALUES OF THE UNIVERSITY OF ARIZONA THROUGH THE DEVELOPMENT AND MANAGEMENT OF
	PRIVATE SUPPORT.
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.
	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
	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.
	the total expenses, and revenue, if any, for each program control reported.
	(Code: ) (Expenses \$ 129,652,860 including grants of \$ 117,674,041 ) (Revenue \$ 10,026,223 )
	THE UNIVERSITY OF ARIZONA FOUNDATION IS COMMITTED TO SUPPORTING AND ENHANCING THE VISION,
	MISSION AND VALUES OF THE UNIVERSITY OF ARIZONA THROUGH THE DEVELOPMENT AND MANAGEMENT OF
	PRIVATE SUPPORT. INCORPORATED IN 1958, THE UNIVERSITY OF ARIZONA FOUNDATION PROVIDES ASSISTANCE
	TO THE UNIVERSITY OF ARIZONA IN TWO MAIN AREAS: FUND-RAISING AND ASSET MANAGEMENT.
	W
	,
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
45	(Code:) (Liverides 4)
4-	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	,,
	H
	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 129,652,860

Part	Checklist of Required Schedules		Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		103	
1	complete Schedule A	1	V	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	<u>~</u>	
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		V
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	v	
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		V
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	V	
.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		V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8	V	
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	!	V
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	V	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	V	
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	v	
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		V
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		V_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	V	
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	v	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	v	
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		V
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		V
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	~	
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes." complete Schedule G, Part III	19	-	V
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		-
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or demostic government on Part IX, column (A) line 1? If "Yes," complete Schedule I. Parts I and II.	21	·	

Form 990	(2023) Tay Compliance (continued)		/es	No
Part \	(2023)  Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	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  186  Statements Regarding Other Into Statements Regarding Without Statements (In all required foderal employment tax returns?)	2b	~	erenigh.
	Leading the organization file all required leading compositions tax.	Ba	V	
		Bb	V	
b b	Did the organization have unrelated business gross income of \$1,000 of many and an explanation on Schedule O. If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O. If "Yes," has it filed a Form 990-T for this year? If the explanation have an interest in or a signature or other authority over,	3D		
4a		4a	!	V
74	a financial account in a foreign country (such as a bank account, sociation descarry,	+a		78-017-01
b	If "Yes," enter the name of the foreign country  See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FDAn).	5a		V
5a		5b		1
b	argenization that it was Ar IS a DARV to a plotholica tax allows	5c		<del></del> -
c		-		<del> </del>
6a	If "Yes" to line 5a or 5b, did the organization file Form 6666-1?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Does the organization have annual gross receipts that are normally greater than \$100,000.	6a		1
ou		<del>Q</del> a		Ť
b	14 "Vee," did the organization include with every solicitation an express statement that such solicitation	6b		
-	with ware not toy deductible?	0,5		
7	The state of the s			
a	my table a graphization receive a navment in excess of \$75 made party as a solution in the same of the	7a	V	
-		7b	V	+
b		1 2	<del>                                     </del>	+
c	The second overlands of otherwise dispuse of talignor personal property	7c		1
	required to file Form 82827			
d	t = 2020 filed during the Vear	7e		V
e		7f	<b>†</b>	1
f		7g	1	
g		7h		1
h				4 (0.1)
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, the discontinuous facilities of cars, boats, airplanes, or other vehicles, the discontinuous facilities of cars, boats, airplanes, or other vehicles, the discontinuous facilities at any time during the year?	8		1
	sponsoring organization have excess business holdings at any time daming and year			
9	Sponsoring organizations maintaining donor advised funds.	9a		\ \
а		9b	1	V
k	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
á	tutus de la grad conital contributions included du Fait viii, into 12			
ŧ	Gross receipts, included on Form 990, Part VIII, line 12, for public date of close receipts.			
11	Section 501(c)(12) organizations. Enter:			
: 6				
ŀ	Gross income from members or shareholders.  Gross income from other sources. (Do not net amounts due or paid to other sources 11b against amounts due or received from them.)			
	against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	a	
12	Section 4947(a)(1) non-exempt charitable trusts, is the organization many trusts. It is the organizati			
	b If "Yes," enter the amount of tax-exempt interest received of accorded damage and the cattle incurance issuers			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13	a	
	Section 501(c)(29) qualified holds to least the death than one state?  Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.			
	Note: See the instructions for additional information the organization the organization by the states in which  b Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	the organization is ilderised to issue qualified the arrangement of the control o			9755A 377
	c Enter the amount of reserves of hard	14	a _	
14		14	b	_
	the state of the reaction 4960 tax off Davidon (1900) of the order of the state of the reaction 4960 tax off Davidon (1900) of the order of the state of the reaction 4960 tax of the state of the reaction 4960 tax of the state		1	
15	Is the organization subject to the section 4900 tax on paymont(s) during the year?	1	5	
	excess paracnute payments) during the year.			
	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	1	6	
16				
	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  Section 501(c)(21) organizations.			1
17	Section 501(c)(21) organizations. Did the trust, or any disqualified of other person, angular that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	1	7	
		13		
	If "Yes," complete Form 6069.		Form	990 (2

5

Form 990	2023) Far each "Vas" response to lines 2 through 7b below, an	nd for a "No"	ท
Part V	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, ar response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See Check if Schedule O contains a response or note to any line in this Part VI	instructions	<u>]</u>
	Check if Schedule O contains a response of note to any and in this is a second		
Sectio	A. Governing Body and Management	Yes No	<del>_</del>
	Enter the number of voting members of the governing body at the end of the tax year		
	Enter the number of voting members included on line 1a, above, who are independent . [18]  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2 /	
3	Did the organization delegate control over management duties customany performed by or analysis of the person?	3 /	
4 5 6 7a		5 v 6 v 7a v	_
b 8	desistant of the organization reserved to for subject to approve and	7b 🗸	_
a b 9	the year by the following:  The governing body?  Each committee with authority to act on behalf of the governing body?  Each committee with authority to act on behalf of the governing body?	8a 🗸 8b 🗸	
	Is there any officer, director, trustee, or key employee listed in the trust of the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<u> </u>	
Sect	the organization's mailing address? If "Yes," provide the hames and address and required by the Internal Revenu on B. Policies (This Section B requests information about policies not required by the Internal Revenu	Yes N	No
10a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, or affiliates?	10a V	
11a b 12a k	Has the organization provided a complete copy of this Form 990 to all members of its governing body obtained.  Describe on Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	11a	
13 14 15	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by Did the process for determining compensation of the following persons include a review and decision?	14 V	
16	The organization's CEO, Executive Director, or top management official of the organization of the organization.  Other officers or key employees of the organization o	15b 🗸	<b>V</b>
	If "Yes," did the organization follow a written policy or procedure requiring the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
Se	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed AR, CA, CO, DC, (CONTINUED ON SCHE	DULE O)	
17 18	Section 6104 requires an organization to make its Forms 1020 (1021 of 1021).  (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.		
19	Own website Another's website Opon request Strick (system) documents, conflict Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict	of interest precords.	olicy
20	and talenhone number of the person with possesses the organization	Form <b>99</b> 0	) (2023

6

art V	III S	tatement of Reven theck if Schedule O c	ue		ar note to an	uline in this Pal	rt VIII .	<u>.</u>	🗆
	<u>c</u>	heck if Schedule O c	contains a	response	or note to any	(A) Total revenue	(B) Related or exemp function revenue		(D) Revenue excluded from tax under sections 512–514
				1a					
ıts j	1a F	ederated campaigns  Membership dues		1b					
, I		Tundraising events .		1c					
Am	c i	Related organizations		1d					
<u>ia</u>	، م	Government grants (co	ontributions	i) 1e					
Ei	4	All other contributions.	gifts, grant	s,	144,281,697				
Program Service		and similar amounts not i			144,201,091	1			
히	g	Noncash contributions	s moluded	''   1g  \$	13,694,173				
2						144,281,697			
, "	_ <u>n</u> _	Total. Add lines 1a-1f			Business Code		0.477.0	12	in the second se
اب	2a	CONFERENCES & SEN	MINARS		611710	2,177,012			
أما	b	OTHER PROFESSION	AL SERVICE	S	541900	7,849,211	1,049,2		
3 [[	С								
Program Service Contributions, Gifts, Grant Revenue and Other Similar Amount	d								
	е						0	0	0 0
	f	All other program ser Total. Add lines 2a-2	)f			10,026,22	3		
-+	<u>g</u> 	Investment income	(including	dividends	, interest, and	1			50,522,049
}		other similar amounts	s)			50,522,04	9		
ł	4	Income from investm	ent of tax-e	exempt bo	nd proceeds	24,10	6		24,100
	5	Royalties	. <u></u>		(ii) Personal	24,10			
		Ì	<u>-</u>	) Real	(ii) Personal	$\dashv$			
	6a	Gross rents	6a						
	b	Less: rental expenses   Rental income or (loss)		0		0			
	d	Net rental income of	(loss)						
	7a	Gross amount from	(i) 5	Securities	(ii) Other	_			
		sales of assets	2	32,171,887					
	Ì	other than inventory	7a		ļ	$\dashv$			
ā	b		_,   ,	11,415,384					
en.	Ì	and sales expenses .		20,756,503	<del></del>	0			20.758.50
Re	C	المممال بيد التابية				20,756,5	603		20,756,50
ē	d	not gain or house fro							
5	8a	events (not including	\$						
		of contributions re	ported on	line					
	}	1c). See Part IV, line				$\dashv$			
	k	Less: direct expens	ses	8b		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	1		from dat	nina	T				
	9	activities. See Part	IV, line 19	9a					
		Loos direct evnen	ses	. 9b					
		<ul> <li>Net income or (los)</li> </ul>	s) from gan	ning ac <u>tivi</u>	ties				
	10	a Gross sales of	inventory,	less ]	<b>\</b>				
		returns and allowa				-			
		<ul><li>b Less: cost of good</li><li>c Net income or (los</li></ul>	is sold .	10		•			
		c Net income or (los	s) ironi sale	OF ITIVES	Business Co	de			000)
цs		a K-1 PASSTHROUG	Н		901101	(982,	902)	(982	,902)
эео	၌ 11	b							
<u>s</u>	.ve	C		~==H===+			0		0
sce	Re	All other revenue				(982,			
Ξ		a Total Add lines 1	1a-11d .		<u> </u>	224,627			2,902) 71,302,6
	12		ee instructi	ons .	· · · · · · · · · · · · · · · · · · ·		9	2/14/2025 11:41:4	9 AM Form 990 (2

tion	Statement of Functional Expenses 501(c)(3) and 501(c)(4) organizations must complet	e all columns. All o	ner organizations i	nast combiete colan	[7]
шоп	501(c)(3) and 501(c)(4) organizations must complete Check if Schedule O contains a response of	Thore to any into it	T CINO	(c)	
not	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	117,674,041	117,674,041		
,	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		0		
4 5	Benefits paid to or for members	2,026,002	0	867,470	1,158,532
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	44 442 092		4,051,027	7,091,95
7	Other salaries and wages	11,142,982			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	758,389		304,376	
		1,419,451		501,314	
9	Other employee benefits	974,398		351,208	623,19
10 11	Payroll taxes			ļ	
а	Management	214,032		214,032	
b	Legal	235,476		235,476	j
С	Accounting	294,500	294,50	0	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 Investment management fees	12,428,567		12,428,567	7
f g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	9,583,954	7,851,07	7 278,369	1,454,5
12	Advertising and promotion	1,228,123	289,42	29 444,32	7 494,3
13	Office expenses	2,357,078			6 86,1
14	Information technology	2,007,1075			
	Royalties			7 00	6 349,9
17	Troval	1,427,314	1,069,43	7,89	549,3
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	5.000.04/	2,183,5	13 11,26	3,709,6
19 20	Conferences, conventions, and meetings Interest	5,903,840	2,100,0		
21	Payments to affiliates	270,88	7	270,88	37
	Depreciation, depletion, and amortization .	301,11		301,11	
	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.)				
	DEAL BRODERTY HOLDING COSTS	51,72	2 2	125 51,29	
	THE AND OUR DOPP	227,69	0	195,3	80 32,
e F f f f f f f f f f f f f f f f f f f					
					0
	All other expenses		0 420.652	0 860 22,494,5	
25	Total functional expenses, Add lines 1 through 24e	168,519,50	129,652,	22,734,0	
26					

PartX Balance Sheet Check if Schedule O contains a response or note to any line in this Part X . . . . . . . (B) End of year Beginning of year 1,760,683 1 3,176,393 267,141,578 223,740,986 2 2 34,298,756 42,824,010 3 4 4 Loans and other receivables from any current or former officer, director, F. trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 0 6 7 7 8 Assets 8 9 Prepaid expenses and deferred charges . . Land, buildings, and equipment: cost or other 10a 4,349,030 basis. Complete Part VI of Schedule D . . . | 10a 1,042,158 1,313,045 10c Less: accumulated depreciation . . . . . 10b 3,306,872 501,174,274 11 438,757,775 11 844,181,122 831,165,749 12 Investments-other securities. See Part IV, line 11 . . . . . . . . 12 0 13 Investments—program-related. See Part IV, line 11 . . . . . . . . 0 13 14 14 3.598,048 4,317,543 15 Other assets. See Part IV, line 11 . . . . . . . . . . . . . 15 1,653,196,619 16 Total assets. Add lines 1 through 15 (must equal line 33) . . . . . 1,545,295,501 16 5,781,496 6,303,103 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% Liabilities controlled entity or family member of any of these persons . . . . . 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 249,707,447 25 240,279,866 255,488,943 26 246,582,969 26 Organizations that follow FASB ASC 958, check here [/] **Fund Balances** and complete lines 27, 28, 32, and 33. 24,683,370 21,648,691 27 Net assets without donor restrictions . . 27 1,373,024,306 28 1,277,063,841 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds . . . . . . . . . Net Assets or 29 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 30 31 Retained earnings, endowment, accumulated income, or other funds . 31 1,397,707,676 1,298,712,532 32 32 1,653,196,619 1,545,295,501 33 33 Form 990 (2023)

orm 990	(2023)					
Parit	Reconciliation of Net Assets					V
	Check if Schedule O contains a response or note to any line in this Part XI	1		224.	,627,6	376
1	Total revenue (must equal Part VIII, column (A), line 12)	2		168.	,519,	559
2	Total expenses (must equal Part IX, column (A), line 25)	3		56	,108,	117
3	Revenue less expenses. Subtract line 2 from line 1	4		1,298	,712,	532
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	5		41	,904,	125
5	Net unrealized gains (losses) on investments	6				
6	Donated services and use of facilities	7				
7	Investment expenses	8				
8	Prior period adjustments .  Other changes in net assets or fund balances (explain on Schedule O) .  Our bins lines 2 through 9 (must equal Part X, line	9			982,	,902
9	Other changes in net assets or fund balances (explain on contouch 9) (must equal Part X, line Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
10	32, column (B))	10		1,397	7,707	676
	The state of the s					_
للازايا	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>		<del></del>	<u>Ll</u>
	Officer is obsticated a solution of the soluti		r de	Y	/es	No
1	Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," e Schedule O.		100	2a		V
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were correviewed on a separate basis, consolidated basis, or both.	 mpiled	d or	2a		
b	Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were aud separate basis, consolidated basis, or both.	 dited (	, , , -	2b	<b>V</b>	
С	the audit, review, or compilation of its financial statements and selection of an independent account if the organization changed either its oversight process or selection process during the tax year,	explai	n on	2c	V	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	i the	За		~
b	Uniform Guidance, 2 of the art 200, Guarding audit or audits? If the organization did not un	ndergo	o the			
i i	If "Yes," did the organization undergo the required audit of addition and the organization undergo such required audit or audits, explain why on Schedule O and describe any steps taken to undergo such	audit	ş.	3b		
				Form	1990	(2023

### SCHEDULE A (Form 990)

# **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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number 86-6050388

UNIVE	RSIT	Y OF ARIZONA FOUNDATION			ampleta	thic par	t ) See instructions	3.	
Part	П	Reason for Public Charity	/ Status. (All or	ganizations must c	Ompiere	ulu one	hox )		
The or	rganiz	ration is not a private foundation	n because it is: (	For lines   through	d in eact	ion 170/k	50/) 51/11(A)(i).		
1	□ A	church, convention of churches	s, or association	of Churches describe	n 990).)		.W.W. 444.		
						70(b)(1)(/	A)(iii).		
3	□ A	hospital or a cooperative hospi	tal service organ	unction with a hospita	al describ	ed in sec	tion 170(b)(1)(A)(iii)	. Enter the	
_	no	ospital's name, city, and state.	henefit of a co	Mege or university o	vned or	perated	by a governmental	unit described in	
		- Ation 470/b)/4\/A)/iv) (Comple	ete Part II.)						
_				ental unit described in	n section	170(b)(1	)(A)(v).	. 1.18-	
		n organization that normally re	ceives a substa	ntial part of its suppo	ort from a	governn	nental unit or from t	he general public	
,	الا الآ	escribed in section 170(b)(1)(A	)(vi). (Complete	Part II.)					
Ω	_	والمساكين والمراكب	tion 170/h\/1	VAMvit (Complete Pa	art II.)				
						ated in c	onjunction with a lar	id-grant college	
3	0	r university or a non-land-grant	college of agric	utture (see matraotion	oji Erito.				
10			ceives (1) more t	han 331/3% of its sup	port from	contribu	tions, membership t d (2) no more than 3	131/3% of its	
	re	eceipts from activities related to	Ties exembraging	Lated business taxable	a income	fless sec	tion 511 tax) from b	usinesses	
	s a	cquired by the organization aft	er June 30, 1975	, See section 509(a)	(2). (Com	plete Par	t III.) 500(a)(4)		
11								but the nurnoses of	
12								n 509(a)(3), Check	
	C	one or more publicly supported	organizations de	scribed in <b>section 50</b> ha tune of sunnorting	organizat	ion and o	omplete lines 12e, 1	2f, and 12g.	
	ť	_		and and or contro	diad by it	ร รมกากกา	en organizationist, i	ypically by giving	
a	a [	Type I. A supporting organization	zation operated,	egularly appoint or el	ect a maj	ority of th	e directors or truste	es of the	
		value a semination Vo	u muct complet	e Part IV. Secuolis i	anu D.				
	г			-l	maction i	with its su	apported organizatio	n(s), by having	
k	3 L	control or management of the	ne supporting or	ganization vested in t	he same	persons 1	that control or mana	ge the supported	
				i Sarinne a ann u.					
,	c [		A aumont	na organization oner:	ated in co	nnection	with, and functiona	ily integrated with,	
		. I Ii=otion/c	A look inctruction	isi You must compi	ete Larr		orro , .,,		
	d [	☐ Type III non-functionally i	ntegrated. A sur	porting organization	operated	ın conne dietribu	tion requirement and	d an attentiveness	
			wated the erger	NZSTIAN ABNEJANY IIIUS	น ออแอเง	a ulousou	(10111100000000000000000000000000000000	-	
		requirement (see instruction	is). You must co	inpiete Fart 19, 000	n fram th	o IBS the	at it is a Type I. Type	II. Type III	
	e [	Check this box if the organi	ization received	a written determinalic conally integrated sut	portina (	organizati	on.		
		functionally integrated, or i	ype in non-tune	ioriany intogrator our					
	f E	nter the number of supported to	about the supp	orted organization(s).					
			(ii) EIN	(iii) Type of organization	i (ivi is the c	rganization	(v) Amount of monetary	(vi) Amount of	
	(1)	vame of supported organization	(,,		listed in you docu	ir governing ment?	support (see instructions)	instructions)	
				Spoke (zee mandenoma))					
		:			Yes	No			
(A)									
(B)									
(C)									
(D)	<u> </u>								
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital search organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Complete Part II.)    A redical research organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)    A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).    A community trust described in section 170(b)(1)(A)(v). (Complete Part III.)    A community trust described in section 170(b)(1)(A)(v). (Complete Part III.)    A community trust described in section 170(b)(1)(A)(v). (Complete Part III.)    A community trust described in section 170(b)(1)(A)(v). (Complete Part III.)    A community trust described in section 170(b)(1)(A)(v). (Complete Part III.)    A nargicultural research organization described in section 170(b)(1)(A)(v). (Complete Part III.)    A nargicultural research organization described in section 170(b)(1)(A)(v). (Complete Part III.)    A norganization that normally receives (1) more than 33°,% of its support from contributions, membership fees, and gross receipts from activities related to its exempt frontlons, subject to certain exceptions, and (2) no more than 33°,% of its support from gross investment from the lumbions of, or to carry out the purposes of one or more publicly supported organization operated exclusively to test for public safety. See section 509(a)(1). See sect									
			<ul> <li>Investigate particular description of the principal control of the</li> </ul>		· · · · · · · · · · · · · · · · · · ·	The state of the s	1		

Schedule A (Form 990) 2023 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 II Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	rartin. Il tho organization						
Sectio	n A. Public Support	130040	(h) 0000	(c) 2021	(d) 2022	(e) 2023	(f) Total
Calend	ar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(6) 2021	(d) 2022	(0) ====	
1 (	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	100,548,000	142,249,114	167,665,686	163,906,281	144,281,697	718,650,778
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			10			0
-	The value of services or facilities furnished by a governmental unit to the organization without charge				402.000.201	144,281,697	0 718,650,778
4	Total. Add lines 1 through 3	100,548,000	142,249,114	167,665,686	163,906,281	144,201,001	110,000,110
	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						58,296,466
_	Public support. Subtract line 5 from line 4						660,354,312
6	on B. Total Support						
Secti	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	100,548,000		167,665,686	163,906,281	144,281,697	718,650,778
7 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from	30,236,485		56,382,508	47,022,515	50,546,155	217,556,753
9	similar sources	30,230,433					0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				) <u>C</u>		936,207,531
11	Total support. Add lines 7 through 10	/	Hama)			12	45,968,217
12	Gross receipts from related activities, et First 5 years. If the Form 990 is for the	c. (see instruct	uons)	d third fourth	or fifth tax V	ear as a sect	on 501(c)(3)
13	organization, check this box and stop h	iere .					
Sect	ion C. Computation of Public Support Public support percentage for 2023 (line	ort Percenta	ge divided by line	11 column /f	W .	14	70.54 %
14						15	73.00 %
15	Public support percentage from 2022 S 331/3% support test—2023. If the orga					331/3% or more	e, check this
16a	. • TI	Indition on a Dil	MUCIN SHITH OFFE	a chankanoi			
b	331/3% support test—2022. If the organization	nization did no on qualifies as :	ot check a box a publicly supr	on line 13 or orted organiz	ation		
<b>1</b> 7a	10%-facts-and-circumstances test— 10% or more, and if the organization Part VI how the organization meets th	-2023. If the or meets the fact e facts-and-cl	ganization did ts-and-circums rcumstances t	not check a k stances test, o est. The orga	oox on line 13, theck this box nization qualifie	and stop her as as a public	e. Explain in  y supported
k	15 is 10% or more, and if the organiza in Part VI how the organization meets	tion meets the the facts-and-	circumstances	test. The orga	anization qualif	ies as a public	ly supported
18	organization  Private foundation. If the organizatio instructions	n did not che	ck a box on li	ne 13, 16a, 1	ob, 17a, or 17	b, check this	DON and CCC
						Scnedu	16 W (1.01111 990) 5050

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

(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.)

	II tile organization falle to quitty						
Sectio	n A. Public Support	( ) 2010	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
Calend	lar year (or fiscal year beginning in)	(a) 2019	(B) 2020	(6) 2021			-
1	Gifts, grants, contributions, and membership tees		}	Ì		ļ	
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities		}	Ì			
	furnished in any activity that is related to the			ľ	ļ	Į	
	organization's tax-exempt purpose L						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the			ļ ļ			
-	organization's benefit and either paid		ļ			l	1
	to or expended on its behalf		<u> </u>				
5	The value of services or facilities						
_	furnished by a governmental unit to the					į	
	organization without charge						
6	Total. Add lines 1 through 5						,
7a	Amounts included on lines 1, 2, and 3	ļ			1		
	received from disqualified persons .		_	<u> </u>			
b	Amounts included on lines 2 and 3	ļ					
.,	received from other than disqualified						1
	persons that exceed the greater of \$5,000				]	1	ļ
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)				S graduation and a second	2	
Sect	ion B. Total Support	1 (10040	(12) 0000	(c) 2021	(d) 2022	(e) 2023	(f) Total
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(0) 2021	(4)		
9	Amounts from line 6						
10a	Gross income from interest, dividends,					1	
	payments received on securities loans, rents,	1				1	
	royalties, and income from similar sources			<del> </del>			
b	Unrelated business taxable income (less	1					
	section 511 taxes) from businesses			į			
	acquired after June 30, 1975						
C							
11	Net income from unrelated business	İ	1		<b>\</b>		
	activities not included on line 10b, whether	į	į			<u> </u>	
	or not the business is regularly carried on						1
12	Other income. Do not include gain or			ļ		-	
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	1		}			
	and 12.)  First 5 years. If the Form 990 is for t	he organizati	on's first, seco	nd, third, four	th, or fifth tax	year as a sec	tion 501(c)(3)
14	organization, check this box and stop	here					
		ort Darcon	tage				
	The state of the s	LA REPORTED A	n. aividea by iii	ne 13, column	(f))	. 15	%
15	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Schedule A. F	art III, line 15	<u></u>		. 16	%
16		Incoma Pai	rceniane				
		19 March 1110 C	מנוועונז זוו וזווזווומר	ed by line 13, c	olumn (f))	. 17	<u>%</u> %
17	Investment income percentage for 202 Investment income percentage from 20	022 Schedule	A, Part III, line	17		. 18	
18	Investment income percentage from 20 331/3% support tests—2023. If the org	anization did	not check the	box on line 14	, and line 15 is	more than 33	sysmo ine
19	331/3% support tests—2023. If the org 17 is not more than 331/3%, check this b	ox and stop h	ere. The organi	zation qualifies	as a publicly su	pported organi	zation
	If the examination	n did not ched	ck a box on line	14, 19a, or 19	b, check this b	OX and ood in	<del>,</del>
_20	Private foundation. If the organization					Sched	ule A (Form 990) 2023

# 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 and D. and complete Part V.)

	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete I	ait i	<i>J</i> -)		
Section	on A. All Supporting Organizations		Yes	No	 )
	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by documents? If "No," describe the designation of the supported organizations are described the designation of the supported organizations are described the designation of the organization or supported organizations are designated. If designated by the designation of the organization or supported organizations are designated by the designated by the organization or supported organizations are designated by the designated by the designation of the organization or supported organizations are designated. If designated by the organization of the organization or supported organization or su	1			
2	Did the organization have any supported organization that does not have an IRS determination of states under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported under section 509(a)(1) or (2)	2			
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 1763, another	За			
đ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the	3b			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с			
4a	Was any supported organization not organized in the United States ("Toreign supported organization"), in the	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the locaging supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion supported organizations.	4b			
c	Did the organization support any foreign supported organization that does not have all the determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	40			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If res, answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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 (iii) the authority under the organization organizing document).	5a			
k	Type I or Type II only. Was any added or substituted supported organization part of a class already	5b			188
,	the regult of an event beyond the ordanization's control:	5c			66
6	Did the organization provide support (whether in the form of grants of the provision of set vices anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited anyone or more of its supported organizations, or (iii) other supporting organizations that also support or by one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6			
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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor.	7			
8	Did the organization make a loan to a disqualified person (as defined in section 4930) Not described the analysis and the Schodule I. (Form 990).				£
9	a 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 disqualified persons, as defined in section 4946 (other than foundation managers and organizations).	98	3		
	b Did one or more disqualified persons (as defined on line 9a) noid a controlling interest in any strain bad an interest? If "Yes " provide detail in <b>Part VI</b> .	1	<b>)</b>		.66
	c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal serious of the disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal serious of the disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal serious of the disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive any personal serious of the derive and the derive any personal serious of the derive and the derive any personal serious of the derive and the derive		<u> </u>		8
10	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943 beconomic 4943 because of section 4943 because of section 4943 beca	10	)a		088893
	b Did the organization have any excess business holdings in the tax year? (ose defications, years)	10 dula 4		2,93823	L

Schedule Parti	Supporting Organizations (continued)	V.	es l	No
www.trafengarategerund	**************************************			
a	11c below, the governing body of a supported organization.	11a 11b		
С	A family member of a person described on line 11a above?  A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .	11c		
Secti	on B. Type I Supporting Organizations	- Iv	'es	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the organization are acted experizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		Yes	N
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, to the extent not previously provided?	1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organization's have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.			
Sor	The state of the s	inatu	otio	201
1	Chack the box pert to the method that the organization used to satisfy the integral i at 1 out and	i pjati u	i Cti Ci	10).
	a The organization satisfied the Activities Test. Complete line 2 below.  b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The supported a governmental entity. Describe in Part vi now you supported a governmental entity.	y (see li	nstru	ctio
2	A 11 thing Test. Applyor lines 29 and 2h helow.	T	Ye	s   I
	the tay year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? It is the 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
;	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or "No." provide details in <b>Part VI</b> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and administration of the supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		000)

2/14/2025 11:41:49 AM

	A (Form 990) 2023	ากเร	ations	<del></del>
Part \	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	rust	on Nov. 20, 1970 lexplair	n in Part VI). See
1	Type III Non-Functionally integrated 303(a)(a) capper any angular Type III Non-Functionally integrated 303(a)(a) capper any angular Type III non-functionally integrated supporting organizations. All other Type III non-functionally integrated supporting organizations.	ausi zatio	ns must complete Sectio	ns A through E.
	instructions. All other Type III non-functionally integrated supporting organization		10 11100	(B) Current Year
Section	on A—Adjusted Net Income		(A) Prior Year	(optional)
		1		
	Net short-term capital gain	2		
	Recoveries of prior-year distributions	3		
	Other gross income (see Instructions)	4		
4	Add lines 1 through 3.	5		
5	Depreciation and depletion			
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
	property neid for production of income (acc meta-serve)	7		
	Other expenses (see instructions)	8		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)		(N) Duine Voor	(B) Current Year
Secti	ion B—Minimum Asset Amount	ĺ	(A) Prior Year	(optional)
	the state of all non exemptage assets (see			
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	instructions for short tax year of assets hold for part of year.	1a		
a	Average monthly value of securities	1b		
<u>b</u>	Average monthly cash balances	1c		
<u>c</u>	Fair market value of other non-exempt-use assets	1d		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	N. C.		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):  Acquisition indebtedness applicable to non-exempt-use assets	2		
2_	Acquisition indebtedness applicable to horrexempt decisions	3		
3	Subtract line 2 from line 1d.	1		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	4		
	see instructions).  Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
5_	Net value of non-exempt-use assets (subtract line 4 if off and a	6		
6_	Multiply line 5 by 0.035.	7		
	Recoveries of prior-year distributions	8		
8	Minimum Asset Amount (add line 7 to line 6)	<u></u>		Current Year
Sec	tion C—Distributable Amount			
	Adjusted net income for prior year (from Section A, line 8, column A)	1		
	Entor 0.95 of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
3	Enter greater of line 2 or line 3.	4		
4	Income tax imposed in prior year	5		
5	Distributable Amount. Subtract line 5 from line 4, unless subject to			
6		6		
	emergency temporary reduction (see instructions).  Check here if the current year is the organization's first as a non-function	nally	integrated Type III suppo	orting organization
7	(see instructions).			
	(see mandonor).		•	Schedule A (Form 990) 20

Part V	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiz	ations (continue	<u>u)</u>	
Sectio	n D—Distributions			1	Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes	tod	-	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of suppor	tea	2	
	organizations, in excess of income from activity			3	
3	Administrative expenses paid to accomplish exempt purpo	nizations	4		
	Amounta poid to acquire exempt-use assets			5	
5	Qualified set-aside amounts (prior IRS approval required -	-provide details in <b>Par</b> τ	VI)	6	
6	Other distributions (describe in Part VI). See instructions.			7	
7	Total annual distributions. Add lines 1 through 6.	the expeniention is res	nonsive	+-+	
8	Distributions to attentive supported organizations to which	Time organization is res	poriarvo	8	
	(provide details in Part VI). See instructions.			9	
9	Distributable amount for 2023 from Section C, line 6			10	
10	Line 8 amount divided by line 9 amount		(ii)	1.0	(iii)
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistribution Pre-2023	ons	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
-	(reasonable cause required—explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
e	From 2022			nesavey Abaleid	
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years			1500	
h	Applied to 2023 distributable amount				
ī	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7:				
a	Applied to underdistributions of prior years				
d	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023, Subtract lines 3h	1			
·	and 4b from line 1. For result greater than zero, explain	in			
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
_ <u>o</u>	E 6 0010				
a					
	E				
	4 0000				
	= 6				1
e	EVOCOS HOLLI FOFO 1				Schedule A (Form 990) 202

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section III, line 12; Part IV, Section A, lines 1, 2a, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 2 and 3; Part IV, Section E, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_ 4 4 4 4	
	~

### SCHEDULE C (Form 990)

# **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (se	ee separate instructions), the	n:			
• Se	ction 501(c)(4), (5), or (6) organi	zations: Complete Part III.		Employer identi	fication number
Name c	f organization			· ·	5-6050388
UNIVE	RSITY OF ARIZONA FOUNDA	TION	End/o	1	
Part	Complete if the	organization is exempt und	er section 50 (C)	or is a section of the Part	V See instructions for
1		the organization's direct and in			
	definition of "political camp	expenditures. See instructions		\$	*******
2	Political campaign activity	al campaign activities. See instru	ctions	<u> </u>	
3	Volunteer nours for political	organization is exempt und	er section 501(c	)(3).	
Part		union tox incurred by the organiz	ation under section	4900	
1	وم ووموم الأساسين والأراب مسا	valaa tay incurred by ordanizatio	n managers under a	30000117300	
2	Enter the amount of any e	d a section 4955 tax, did it file Fo	rm 4720 for this ve	ar?	· · □ · · · □ · · ·
3	If the organization incurred	1 a section 4955 tax, did it more	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, . Yes No
4a					
b	If "Yes," describe in Part I	organization is exempt uno	er section 501(c	), except section 501(	c)(3).
Part	EG Complete it the	y expended by the filing organi	zation for section	527 exempt turiculor	
1	12. 202				**
_	E to the empty of the	filing organization's funds contri	buted to other org	anizations for section	
2	man and function action	itioe			
3	Total exempt function e	xpenditures. Add lines 1 and	2. Enter here and	on Form 1120-POL,	
J	u 4 171.				Yes No
4	4 11	CI. F 4400 DOL for this yes	ır?		• • [] •
5					zations to which the ming
•					
	as a separate segregated	ntributions received that were prefund or a political action commit	tee (PAC), il addition	ilat space to freeded, pro-	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
	(a) Hamo			funds. If none, enter -0	promptly and directly
			`		delivered to a separate political organization.
					If none, enter -0
(1)					
(1)					
(2)					
(3)					
(4)	<del></del>				1
(5)					
(6)				<u> </u>	

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).   Complete if the organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).   Check							Page 2
EIN, expenses, and share of excess locotying expenditures  (a) Filing  (b) Affiliated  Climits on Lobbying Expenditures  (The term "expenditures" means amounts paid or incurred.)  (a) Filing  (roup totals  (b) Affiliated  (roup totals  (c) Filing  (roup totals  (d) Piling  (rou	Part	I-A Complete if the organization					
Timits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Total lobbying expenditures to influence public opinion (grassroots lobbying)  Dotal lobbying expenditures to influence public opinion (grassroots lobbying)  Total lobbying expenditures to influence a legislative body (direct lobbying)  Total lobbying expenditures (add lines 1a and 1b)  Other exempt purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  I (a) 200,000  Over \$1,000,000  Over \$1,000		FINI avadance and share of exce	ess loodylliu expe	Highlance).		a group member s	lame, address,
Total lobbying expenditures to influence public opinion (grassroots lobbying)  Discription of the process of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the public opinion (grassroots lobbying)  Discription of the grassroots opinion (grassroots lobbying)  Discription of the grassroots opinion (grassroots lobbying)  Discription of the grassroots opinion (grassroots lobbying)  Discription of the grassroots opinion (grassroots lobbying)  Discription of the grassroots opinion (grassroots lobbying)  Discription of the grassroots opinion (grassroots lobbying)  Discription of the grassroots lobying expenditures to influence a legislative body (direct lobbying)  Discription of the grassroots lobying expenditures to influence a legislative body (direct lobbying)  Discription of the grassroots lobying expenditures to influence a legislative body (direct lobbying expenditures obbying	B C	Limits on Lobb	ving Expenditur	es	ino appiy.	(a) Filing organization's totals	(b) Affiliated group totals
g Grassroots nontaxable amount (enter 25% of line 11)  h Subtract line 1g from line 1a. If zero or less, enter -0-  i Subtract line 1f from line 1c. If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720  reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year  (a) 2020  (b) 2021  (c) 2022  (d) 2023  (e) Total	b c d	Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines 1 Other exempt purpose expenditures .  Total exempt purpose expenditures (add Lobbying nontaxable amount. Enter columns.  If the amount on line 1e, column (a) or (b) is not over \$500,000, over \$500,000 but not over \$1,000,000, over \$1,000,000 but not over \$1,500,000, over \$1,500,000 but not over \$17,000,000, over \$17,000,000 but not over \$17,000,000, over \$17,000,000.	public opinion (g a legislative body a and 1b) d lines 1c and 1d) the amount from 20% of the amo \$100,000 plus 1 \$175,000 plus 1 \$225,000 plus 5 \$1,000,000.	rassroots lobbying y (direct lobbying) y (direct lobbying)	table in both  is:  ver \$500,000.  ver \$1,000,000.	294,500 294,500 168,225,059 168,519,559 1,000,000	
Calendar year (or fiscal year (a) 2020 (b) 2021 (c) 2022 (d) 2023 (e) Total		Subtract line 1g from line 1a. If zero or lead to subtract line 1f from line 1c. If zero or leaf there is an amount other than zero reporting section 4911 tax for this year.  4-Y	less, enter -0- ess, enter -0- o on either line ? /ear Averaging Pection 501(h) ele	1h or line 1i, did	tion 501(h) to complete all	0 file Form 4720	
Calendar year (or fiscal year (a) 2020 (b) 2021 (c) 2021		Lobbyin	ng Expenditures	During 4-Year A	veraging Period		
		Calendar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total

	Lobbyin	g Expenditures D	uring 4-Year Ave	raging Period		
····	Calendar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying celling amount (150% of line 2a, column (e))					6,000,000
¢	Total lobbying expenditures	0	25,000	220,000	294,500	539,500
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	0	o	0	0	0

art II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	(8		(b)
or each	"Yes" response on lines 1a through 1i below, provide in Part IV a detailed	-		
escriptio	n of the lobbying activity.	Yes	No	Amount
1eai	ing the year, did the filing organization attempt to influence foreign, national, state, or local slation, including any attempt to influence public opinion on a legislative matter or erendum, through the use of:			
5.7.1	unteers? d staff or management (include compensation in expenses reported on lines 1c through 1i)?			
~ Ma	dia advertisements?			
a Dui	blications or published or broadcast statements?		<u> </u>	
£ 0	anto to other organizations for lobbying purposes?	ļ	-	
- Div	act contact with legislators, their staffs, government officials, or a legislative body?	-	<del> </del>	
h Ra	llies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Of	her activities?	1013740		
j To	tal. Add lines 1c through 1i	100000	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
2a Die	d the activities in line 1 cause the organization to not be described in section 501(c)(3)?			
b lf	Yes," enter the amount of any tax incurred under section 4912	100000		
c lf	Yes, "enter the amount of any tax incurred by organization managers under section 4912 . 'Yes," enter the amount of any tax incurred by organization managers under section 4912			
		c)(5),	or s	ection
art III-	501(c)(6).			
				Yes N
1 W	ere substantially all (90% or more) dues received nondeductible by members?			1
				2 3
3 Di	to the sum and labeling and notifical compains activity exteriority to		JI YOU	a ation 501/a)//
Part III-	and if either (a) BOTH Part III-A, lines 1 and 2, are answered No ON (b) 1 a "Yes."	rt III-	7, 111	e 3, is answer
1 D	ues, assessments and similar amounts from members		_	
0 6	ection 162(e) nondeductible lobbying and political expenditures (do not include amour olitical expenses for which the section 527(f) tax was paid).	nts of	100000	
a C	urrent vear		2t	
b C	armover from last year		20	
			3	
3 A	remarks amount reported in section 6033(A)(1)(A) notices of noticeductible section 102(b) add	of the		
4 lf	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	bbying	, 1	
е	notices were sent and the amount of thic 26 exceeds the amount of nondeductible lot xcess does the organization agree to carryover to the reasonable estimate of nondeductible lot nd political expenditures next year?		4	75-61
a	nd political expenditures next year?  axable amount of lobbying and political expenditures. See instructions		5	
granter in the deligible	The state of the s			
Part	the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated of the descriptions required for Part II-A) and the part for any additional information.	group	list); I	Part II-A, lines 1
2 (coe in	structions); and Part II-B, line 1. Also, complete this part for any additional information.			
	XT PAGE			
OLL ML				
				•

Part IV

Supplemental Information. Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Deturn Reference - Identifier	Explanation Explanation ON MATTERS
Return Reference Tourisme.	THE FOUNDATION INCURRED \$200,000 FOR LOBBYING THE DEPARTMENT OF EDUCATION ON MATTERS  THE FOUNDATION INCURRED \$200,000 FOR LOBBYING OF THE ARIZONA  INDUCTION OF THE LINIVERSITY AND ITS AFFILIATES, AND \$94,500 FOR LOBBYING OF THE ARIZONA  INDUCTION OF THE LINIVERSITY AND ITS AFFILIATES.
I- LINE 1B	THE FOUNDATION INCURRED \$200,000 FOR LOBBYING THE DEPARTMENT OF THE ARIZONA INVOLVING THE UNIVERSITY AND ITS AFFILIATES, AND \$94,500 FOR LOBBYING OF THE ARIZONA LEGISLATIVE SESSION ON MATTERS INVOLVING THE UNIVERSITY AND ITS AFFILIATES.
- Live 10	LEGISLATIVE SESSION ON MATTERS INVOLVING THE SYMPLE

# **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990,

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

nternal Revenue Service Go to www.iis.govii Ori		Employer identification number
Name of the organization	•	86-6050388
UNIVERSITY OF ARIZONA FOUNDATION  Part I Organizations Maintaining Donor A	triped Funds or Other Similar Fund	ls or Accounts
Part I Organizations Maintaining Donor A	"Vee" on Form 990 Part IV. line 6.	
Part I Organizations Maintaining Donor Address Complete if the organization answere	(a) Donor advised funds	(b) Funds and other accounts
	1	
1 Total number at end of year	.   0	
Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year) .	43 714 555	
A Aggregate value at end of year		eld in donor advised
5 Did the organization inform all donors and dor	ior advisors in writing their lens contro	) ? ✓ Yes 🗌 No
funds are the organization's property, subject to	that drar	at funds can be used
6 Did the organization inform all grantees, donors only for charitable purposes and not for the be	enefit of the donor or donor advisor, or for	or any other purpose
only for charitable purposes and not for the be conferring impermissible private benefit?		🗹 Yes 🗌 No
conferring impermissible private benefit		
Part II Conservation Easements Complete if the organization answere	od "Ves" on Form 990. Part IV, line 7.	
Complete if the organization answer	the organization (check all that apply).	
1 Purpose(s) of conservation easements held by	representation or education)	of a historically important land area
Purpose(s) of conservation easements that 2 y  Preservation of land for public use (for example,	Preservation	of a certified historic structure
☐ Protection of natural habitat		
☐ Preservation of open space Complete lines 2a through 2d if the organization	n held a qualified conservation contributi	on in the form of a conservation
2 Complete lines 2a through 2d if the organization	AT THAT WE STORY	Held at the End of the Tax Year
easement on the last day of the tax year.  a Total number of conservation easements		2a
<ul> <li>b Total acreage restricted by conservation ease</li> <li>c Number of conservation easements on a certification of the conservation easements on a certification of the conservation easements.</li> </ul>	ied historic structure included on line 2a	2c
Number of conservation easements on a certification of conservation easements included to the Number of conservation easements.		
d Number of conservation easiments molecular on a historic structure listed in the National Re	gister	· · [2d]
on a historic structure listed in the National Re Number of conservation easements modified,	transferred, released, extinguished, or to	erminated by the organization during the
tax year  4 Number of states where property subject to c	onservation easement is located	
4 Number of states where property subject to c 5 Does the organization have a written polic	y regarding the periodic monitoring, in	nspection, handling of
5 Does the organization have a written police violations, and enforcement of the conservation	on easements it holds?	
violations, and enforcement of the conservations.  6 Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforce	cing conservation easements during the year
6 Staff and volunteer hours devoted to monitoring,	mopes may, m	L. L. ata a Hoo your
7 Amount of expenses incurred in monitoring, ins	necting, handling of violations, and enforci	ng conservation easements during the year
7 Amount of expenses incurred in monitoring, mo	pooting, name o	1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 ×
8 Does each conservation easement reported of	on line 2d above satisfy the requirements	of section 170(h)(4)(B)(l)
8 Does each conservation easement reported of and section 170(h)(4)(B)(ii)?		Yes I No
and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization report of the section	oorts conservation easements in its reven	ue and expense statement and balance
-k-at and include if annifoanie. The text of the	le localiere re une segui	Statements that describes the
organization's accounting for conservation e	asements.	Oil Oil Hou Apoets
- I I I I I Collo	Ations of Art. Historical Headules,	or Other Similar Assets
Part III Organizations Maintaining Cone Complete if the organization answ	ered "Yes" on Form 990, Part IV, line	8.
Complete if the organization answ  1a If the organization elected, as permitted und	er FASB ASC 958, not to report in its rev	venue statement and balance sneet works
1a If the organization elected, as permitted und of art, historical treasures, or other similar	assets held for public exhibition, educa	tion, or research in turticianse of passes
of art, historical treasures, or other similar service, provide in Part XIII the text of the foo	otnote to its financial statements that des	Chipes these tromb.
service, provide in Part XIII the text of the for b If the organization elected, as permitted und	der FASB ASC 958, to report in its reven	ue statement and balance sheet works
ext biotorical treasures, or other situat asse	to floid for parity	r research in furtherance of passes as
provide the following amounts relating to the	Sae iterne.	¢
provide the following amounts relating to the (i) Revenue included on Form 990, Part VIII.	line 1	Ф
<ul> <li>(i) Revenue included on Form 990, Part VIII.</li> <li>(ii) Assets included in Form 990, Part X.</li> <li>2 If the organization received or held works</li> </ul>		The appete for financial gain provide the
(II) Assets included in Form 300; such works	of art, historical treasures, or other sin	mar assets for infancial gain, provide the
2 If the organization received or neid works following amounts required to be reported units.	inder FASB ASC 958 relating to these iter	H5.
- I had ad in Form 990 Part X	<u> </u>	2283D Schedule D (Form 990) 2023
b Assets included in Form Section 1	Cat No. 52	2283D Schedule D (Form 990) 2020

chedule C	(Form 990) 2023 Organizations Maintaining C	II. Hans of Av	+ Historical Tr	reasures, or Oth	er Similar Assets	s (continued)
Part I	Organizations Maintaining C sing the organization's acquisition, acqui	ollections of Ar	r records check	any of the following	ng that make signif	icant use of its
3 L	sing the organization's acquisition, accollection items (check all that apply).	cession, and othe	1 (000) 40, 01.00			
			d ☑ Loan o	r exchange progra	m	
	Public exhibition		e 🖸 Other			,
b j	Scholarly research					
c l	Preservation for future generations Provide a description of the organization	n's collections an	d explain how th	ey further the orga	anization's exempt	purpose III Fait
4 F	Provide a description of the organization	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		it t then	
, , , , , , , , , , , , , , , , , , ,	(III. During the year, did the organization s	olicit or receive de	onations of art, I	nistorical treasures	, or other similar	_ Yes ☑ No
5	During the year, did the organization s assets to be sold to raise funds rather t	han to be maintair	ned as part of the	e organization's co	lection? [	Yes VINO
Part						int on Form
. FI - 18-38	Escrow and Custodial Arrar Complete if the organization a	answered "Yes"	on Form 990, F	art IV, line 9, or	eported an amou	
	990, Part X, line 21.				other assets not	
		custodian, or othe	er intermediary to	or contributions of	Other addote her	☐ Yes ☐ No
	t itiidad ay Eagna UUN PATAN				• • • •	
b	If "Yes," explain the arrangement in Pa	rt XIII and complet	te the following t	able.	Amo	ount
С	Beginning balance			· · · · · <del>  -</del>		
đ	Additiona during the year			• • • • •	_	
e	Distributions during the year			· · · · ·		
f	Ending balance	<u>.</u> .		L	l account liability?	☐ Yes ☐ No
2a	Ending balance	it on Form 990, Pa	art X, line 21, for	escion of castodic	ed in Part XIII	
b	Did the organization include an amour If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	on has been provid	Ca hi i air / iii	
Par						
	Complete if the organization	answered "Yes"	on Form 990,	(c) Two years back	(d) Three years back	(e) Four years back
		(a) Current year	(b) Pilor year	(6)		928,016,739
1a	Beginning of year balance	1,207,149,915	1,102,980,623		<del>                                     </del>	67,141,213
b	Contributions	56,700,760	69,297,51	91,020,170	70,000,	
C	Net investment earnings, gains, and			(70 405 451)	240,968,804	(52,009,727)
•	losses	79,925,756	83,260,79	- 105 106		6,629,732
d	Grants or scholarships	18,373,629	7,739,03	1 8,195,192	0,047,000	
e	Other expenditures for facilities and	•		40.050.40	38,232,876	69,683,655
·	programs	33,233,711	40,649,98	5 42,050,409	30,232,010	
f	Administrative expenses			1 400 000 60	3 1,133,803,500	866,834,838
	_	1,292,169,091	1,207,149,91	5 1,102,980,62		
g 2	End of year balance Provide the estimated percentage of	the current year e	nd balance (line	1g, column (a)) nek	as.	
	Board designated or quasi-endowme	ent 0.00	.%			
a	Permanent endowment 100.0	00 %				
b	Torm andowment 0.00 %					
С		l 2c should equal `	100%.	المصملات المسلمان	administered for the	<b>a</b>
3a	to the and aumont funds not in the	ne possession of t	the organization	that are new and	administered for an	Yes No
Ų.	organization by:					3a(i) 🗸
	m 11 lated organizations?					3a(ii) V
						3b
1.	are the related	organizations liste	d as redamed on	Contoache		00
k 4	Describe in Part XIII the intended us	es of the organizat	tion's endowmer	nt funds.		
4	ri VI Land, Buildings, and Equ	ipment			- Can Earm 000	Part X line 10
	rt VI Land, Buildings, and Equ Complete if the organization	on answered "Ye	s" on Form 990	0, Part IV, line 11	a. See Form 930,	(d) Book value
	Description of property	(a) Cost or	other pasis   (b) Ot	ost or other basis (other)	c) Accumulated depreciation	(a) Dook valoo
	Doggram 4. FF.	(inves	tment)	•		357,898
	a Land			357,898	0.000.004	609,49
1:				3,273,328	2,663,831	003,43
	Buildings					74,76
	c Leasehold improvements			717,804	643,041	14,70
	d Equipment					4.040.46
	e Other	must equal Form	990, Part X, line	10c, column (B))		1,042,158
Tot	al. Add lines 1a through 1e. (Column (d	, made aquai i onii	<u> </u>		Sch	edule D (Form 990) 201

chedule D (Fori				- m 13/ U 40
Part VII	Investments – Other Securities  Complete if the organization answered "Yes" on Fe	orm 990, Part IV, line	e 11b. See Form 99	00, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method Cost or end-of-	of valuation: year market value
) Financial	derivatives	•		
	erd equity interests			CTVALUE
Other	TE EQUITY LIMITED PARTNERSHIPS	272,849,260	END OF YEAR MARK	ET VALUE
(A) PRIVA	Y LONG-ONLY HEDGE FUNDS	130,383,850	END OF YEAR MARK	ET VALUE
(B) EQUIT	RAL RESOURCES LIMITED PARTNERSHIPS	107,108,354	END OF YEAR MARK	ET VALUE
(C) NATO	Y LONG-ONLY SEPARATE ACCOUNTS	106,171,719	END OF YEAR MARK	ET VALUE
(D) EQUIT	I-STRATEGY HEDGE FUNDS	73,800,565	END OF YEAR MARK	CET VALUE
(E) NOL1	MPTIONS IN PROCESS	45,017,985	END OF YEAR MARK	CT VALUE
(F) KEDE	TY LONG/SHORT HEDGE FUNDS	37,639,631	END OF YEAR MARK	ET VALUE
"" /CEE	CTATEMENT)			
(H) (OCL	ımn (b) must equal Form 990, Part X, line 12, col. (B))	. 844,181,122	2	
	Investments—Program Related			on Dart V line 13
Part VIII	Investments—Program Related Complete if the organization answered "Yes" on	Form 990, Part IV, Iir	ne 11c. See Form s	90, Part X, inte 10.
	(a) Description of investment	(b) Book value	(c) Metho Cost or end-o	d of valuation: f-year market value
(1)				
(2)				
(3)				
(4)				
(5)				<u></u>
(6)				
(7)				
(8)				
(0)				
Total. (Co	lumn (b) must equal Form 990, Part X, line 13, col. (B)) .  Other Assets	E OOO Dort IV I	ing 11d See Form	990. Part X. line 15.
	Complete if the organization answered "Yes" or	1 Form 990, Part IV, 1	IIIe 114. 060 FORM	(b) Book value
	(a) Description			
(1)				
(2)				
(3)				
(4)				
(5)		, <u>, , , , , , , , , , , , , , , , , , </u>		
(6)				
(7)				
(8)				
Total (C	olumn (b) must equal Form 990, Part X, line 15, col. (B))		<u> </u>	
Part X		n Form 990, Part IV,	line 11e or 11f. Se	e Form 990, Part X,
	line 25.			(b) Book value
1.	(a) Description of liability			
(1) Feder	al Income taxes			16,995,0
	OT LIADILITIES	( OE ADIZONA		232,712,3
(3) FAIF	ST CIABILITIES  R VALUE OF ENDOWMENT MANAGED FOR THE UNIVERSITY	UF ARIZUNA		
(4)				
(5)				
(6)				
(7)				
(8)				249,707,4
(9) Total (6	Column (b) must equal Form 990, Part X, line 25, col. (B)	<u> </u>		anto that reports the
o Liebilia	Column (b) must equal Form 990, Part X, line 25, col. (B)) by for uncertain tax positions. In Part XIII, provide the text of the	e footnote to the organiz	ation's financial statem	nents that reports the norovided in Part XIII.
organiza	ry for uncertain tax positions. In Part XIII, provide the text of the tion's liability for uncertain tax positions under FASB ASC 740	. Check here if the text o	the loothole has been	
organiza	HOR S HADIBLY FOR GROOT SAIL TON P.			Schedule D (Form 990

nedule D (Form 990) 2023  Part XI Reconciliation of Revenue per Audited Financial Staten	nents With I	Revenue per R	eturn	<del></del>
Reconciliation of Revenue per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990	, Part IV, line	e 12a.	1	255,147,558
	· · · ·	· · · · ·		
1. Jad on ling 1 holf hot off followers of virial into the	4 3			
the decine (losses) on investments	2a	41,904,125		
- I misse and use of facilities				
c Recoveries of prior year grants	2c			
d Other (Describe in Part XIII.)	2d	0		44.004.135
d Other (Describe in Part XIII.)			2e	41,904,125
e Add lines 2a through 2d			3	213,243,433
3 Subtract line 2e from line 1				
Subtract line 2e from line 1.  Amounts included on Form 990, Part VIII, line 12, but not on line 1.	. 4a	12,367,145		
to estment expenses not included on Form 990, Fait Viii, into 72	4b	0		
			4c	12,367,145
c Add lines 4a and 4b	101		5	225,610,578
c Add lines 4a and 4b.  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, Ii  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, Ii	ne iz.)	h Evnances ne	r Return	
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, II  Part XII Reconciliation of Expenses per Audited Financial Statement (Yes" on Form 99)	ements wit	u Exhenses be	) 1 (Olai)	
		16 12a.		156,152,414
and losses per audited financial statements			AUGS VISTS	(00)(00)
2 Amounts included on line 1 but not on 1 standard continues and use of facilities	. 2a			
a Donated services and use of facilities	. 2b			
b Prior year adjustments	2c			
c Other losses	. 2d	(	)   -	
d Other (Describe in Part XIII.)			2e	0
A did times on through 2d			3	156,152,414
a the Alice On from line 1			10010000	
to all dod on Form 990 Part IX. line 25, but not on line 1.	l l	12,367,14	5	
t wastment expenses not included on Form 990, Part viii, into 75	4a		0	
n   m_u VIII \	. 4b			12,367,14
b Other (Describe in Part XIII.)  c Add lines 4a and 4b			4c	168,519,559
<ul> <li>c Add lines 4a and 4b</li> <li>5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part</li> </ul>	I, line 18.)	<u></u>	5	(00,010,000
Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 12; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this SEE STATEMENT	part to provic	de any additional	informatic	
				***************************************
		4		
		<u></u>		
	r			

Schedule D Part V	<b>i</b> n	vestments-Other Securities
	A STATE OF THE PROPERTY OF THE	······································

(a) Description of security or category(including name of security)	(b) Book values	(c) Method of valuation: Cost or end-of-year market value
PRIVATE CREDIT LIMITED PARTNERSHIPS	36,657,291	END OF YEAR MARKET VALUE
PRIVATE REAL ESTATE LIMITED PARTNERSHIPS	34,552,467	END OF YEAR MARKET VALUE
US FIXED INCOME FUNDS	0	END OF YEAR MARKET VALUE
FIXED INCOME HEDGE FUNDS	0	END OF YEAR MARKET VALUE

### Part XIII

Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

	Explanation
Return Reference - Identifier	THE CENTER FOR CREATIVE PHOTOGRAPHY IS AN ARCHIVE AND RESEARCH INTO AND APPRECIATION OF THE
SCHEDULE D, PART III, LINE 4 - COLLECTIONS OF ART - DESCRIPTION OF	UNIVERSITY OF ARIZONA CAMPOS. THE UNIVERSITY OF ARIZONA CAMPOS.
COLLECTIONS	THE PAYOUT FROM THE FOUNDATION ENDOWMENT PROVIDES SCHOLARSHIP, RESEARCH, PROGRAM AND
SCHEDULE D, PART V, LINE 4 - INTENDED USES	TOTHER SUPPORT TO THE DIVINE COLOR OF THE STATE OF THE ST
OF ENDOWMENT FUNDS	ADDRESSES HOW INCERTAIN
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES, ADDRESSES HOW UNCERTAIN ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES, ADDRESSES HOW UNCERTAIN TAX POSITIONS SHOULD BE RECOGNIZED, MEASURED, PRESENTED, AND DISCLOSED IN THE FINANCIAL TAX POSITIONS TAKEN, STATEMENTS. THE GUIDANCE REQUIRES THE ACCOUNTING AND DISCLOSURE OF TAX POSITIONS TO OR EXPECTED TO BE TAKEN, IN THE COURSE OF PREPARING THE FOUNDATION'S TAX RETURNS TO DETERMINE WHETHER THE TAX POSITIONS ARE MORE-LIKELY-THAN-NOT OF BEING SUSTAINED BY THE DETERMINE WHETHER THE TAX POSITIONS ARE MORE-LIKELY-THAN-NOT OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAGEMENT OF THE FOUNDATION IS REQUIRED TO ANALYZE ALL OPEN APPLICABLE TAX AUTHORITY. MANAGEMENT OF THE FOUNDATION HAS HAD NO EXAMINATIONS IN INCLUDE THE FEDERAL AND CERTAIN STATES. THE FOUNDATION HAS HAD NO EXAMINATIONS IN INCLUDE THE FEDERAL AND CENTEND AT THIS TIME. AS OF JUNE 30, 2024, MANAGEMENT OF THE PROGRESS AND NON ARE EXPECTED AT THIS TIME. AS OF JUNE 30, 2024, MANAGEMENT OF THE POUNDATION HAS REVIEWED ALL OPEN TAX YEARS AND MAJOR JURISDICTIONS AND CONCLUDED THERE FOUNDATION HAS REVIEWED ALL OPEN TAX YEARS AND MAJOR JURISDICTIONS AND CONCLUDED THERE FOUNDATION HAS REVIEWED ALL OPEN TAX YEARS AND MAJOR JURISDICTIONS ON UNCERTAIN INCOME IS NO TAX LIABILITY RESULTING FROM UNRECOGNIZED TAX BENEFITS RELATING TO UNCERTAIN INCOME TAX POSITIONS TAKEN, OR EXPECTED TO BE TAKEN, IN FUTURE TAX RETURNS.

## **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.

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.

Inspection Employer identification number

ne of the organization					-6050388
NIVERSITY OF ARIZONA FOUNDATION	N on Activitie	es Outside	the United States. Comp	ete if the organization ar	nswered "Yes" on
Form 990, Part IV, line 14  For grantmakers. Does the other assistance, the grantee award the grants or assistance	organization	maintain rec for the grant	ords to substantiate the ams or assistance, and the se	lection criteria used to	☐ Yes ☐ No
<ol> <li>For grantmakers. Describe in outside the United States.</li> </ol>	n Part V the	e organization	s procedures for monitoring	the use of its grants and	d other assistance
3 Activities per Region. (The foll	lowing Part	I, line 3 table o	can be duplicated if additiona	ıl space is needed.)	Table
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE (INCLUDING (1) ICELAND AND GREENLAND)	0	0	INVESTMENTS		56,611,805
CENTRAL AMERICA AND THE	0	0	INVESTMENTS	\$	266,773,795
(2)					
(3)					
(4)	<u> </u>				
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)		0			323,385,60
3a Subtotal	on 0	0			
sheets to Part I		0			323,385,60
c Totals (add lines 3a and 3	n)   0		Form 990 Cat.	No. 50082W	Schedule F (Form 990) 20

2/14/2025 11:41:49 AM

Schedule F (Form 990) 2023

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

	-			
Se hermonary variance and the second		interior statement	as a tax	

Schedule F (Form 990) 2023

Crants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.	ted if additional space	e is needed.			fo Amount of	(g) Description	(h) Method of
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	noncash assistance	of noncash assistance	(book, FMV, appraisal, other)
(1)							
(2)							
(3)							
	-						
(4)							
(5)							
<u> </u>							
(a)							
(2)							
(8)		_					
(6)							
(10)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
							000) 2003
(18)							Schedule r (roun 350) 25

38

2/14/2025 11:41:49 AM

Pard	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "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	□ 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	✓ 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)	✓ 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	□ 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	□ 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	☑ No

Schedule F (Form 990) 2023

# Part V

Supplemental Information. Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

	Explanation
Return Reference - Identifier	
Return Reletetice - Identition	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL
	CENTRAL AMERICA AND THE CARIBBEAN ACCINOAL
ISCHEDULE F, PART I, LINE	CENTRAL AMERICA AND THE SAME SEED OF THE
3 - METHOD USED TO	EOROSE (INCRODING ICETAND AND CONTRACT AND C
TO COLLET FOR	
ACCOUNT FOR	
EXPENDITURES ON ORG'S	
THE STATEMENTS	
FINANCIAL STATEMENTS	

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

S

# Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Attach to Form 990.

Open to Public Inspection Employer identification number

OMB No. 1545-0047

2023

Schedule 1 (Form 990) 2023 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. UNIVERSITY SUPPORT °N □ GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT ω ☑ Yes 86-6050388 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and noncash assistance (f) Method of valuation (book, FMV, appraisal, Cat. No. 50055P Go to www.irs.gov/Form990 for the latest information. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 15,450 20,000 20,000 6,599 200,394 100,000 117,229,102 72,996 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table GOVERNMENT (c) IRC section (if applicable) 501(C)3 501(C)3 the selection criteria used to award the grants or assistance? 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 47-3724298 94-2545356 86-0931108 81-0594797 86-6053800 86-0307564 74-2652689 81-1131884 (b) EIN UNIVERSITY OF ARIZONA FOUNDATION BANNER HEALTH FOUNDATION (8) BANNER HEALTH FOUNDATION 2901 N CENTRAL AVE, PHOENIX, AZ 85012-2702 (6) ARIZONA ALZHEIMERS RESEARCH CENTER INC 4745 N 7TH STREET, PHOENIX, AZ 85014-3666 RED STAR INTERNATIONAL INC 1718 E SPEEDWAY BLVD, TUCSON, AZ 85732-7271 HIGHWAY 86, MILE 125.5, SELLS, AZ 85634-3129 2455 N CITRUS RD. GOODYEAR, AZ 85395 (2) FLOWERS AND BULLETS 2527 E WINCHESTER VIS, TUCSON, AZ 85713-2134 1245 E 2ND ST, TUCSON, AZ 85719-4959 (4) SPECIAL OLYMPICS ARIZONA 1111 N CHERRY AVE, TUCSON, AZ 85721 1 (a) Name and address of organization (3) HILLEL FDN. AT THE UOFA (1) UNIVERSITY OF ARIZONA (5) TOHONO O'ODHAM CC or government PartII Parti

ε

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

Q

(12)

5

ව

4

Schedule I (Form 990) 2023

Schedule I (Form 990) 2023 (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals, Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance (SEE STATEMENT) Part IV Part III Ŋ ဖ 4 ര Q

42

2/14/2025 11:41:49 AM

			20	Ħ
п	-	тя	۱v	ı
100	-11	l Ga	В.	ž.

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	

# **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Inspection

ame of ti	ne organization					86-605038	3
JNIVER	SITY OF ARIZONA FOUNDATION						
Part I		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash con amounts repo Form 990, Part	orted on I	Method of	(d) f determining ribution amounts
2 3 4 5	Art—Works of art  Art—Historical treasures  Art—Fractional interests  Books and publications  Clothing and household  goods						
6 7 8 9 10 11	Cars and other vehicles Boats and planes		124		12,723,924 [	MARKET VA	ILUE
12 13	Securities—Miscellaneous Qualified conservation contribution—Historic structures						
15 16 17 18 19	contribution—Other Real estate—Residential Real estate—Commercial . Real estate—Other						
20 21 22 23 24	Drugs and medical supplies.  Taxidermy  Historical artifacts  Scientific specimens  Archeological artifacts		4		970,249	MARKET	VALUE
25 26 27 28	Other (	)	The design at the t	ax year for con	ntributions for	29	0
30	which the organization complete  During the year, did the organ  28, that it must hold for at lead  used for exempt purposes for	nization rec st 3 years f the entire	ceive by contribution any p rom the date of the initial c holding period?	roperty reporter ontribution, and	d in Part I, lind I which isn't re	es 1 throug equired to b	308
3 <sup>-</sup>	<ul> <li>b If "Yes," describe the arrange of the organization have contributions?</li> <li>2a Does the organization hire of contributions?</li> </ul>	ment in Pai e a gift a  r use third 	rt II. cceptance policy that re	equires the reverse the reverse the contract of the contract o	view of any , process, or	nonstanda sell nonca	ard 31 /
3	b If "Yes," describe in Part II.	rt an amou	nt in column (c) for a type c	of property for w	hich column (	a) is check	ed, hedule M (Form 990) 2023

Part II

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

	Explanation Explanation
Return Reference - Identifier	SECURITIES - PUBLICLY TRADED - COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED.
SCHEDULE M, PART I -	SECURITIES - PUBLICLY TRADED - COLUMN (b) NET TEST OF CONTRIBUTIONS RECEIVED.
EXPLANATIONS OF	OTHER - CRYPTOCURRENCY - COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED.
REPORTING METHOD FOR	OTHER - CRIT TOOMILE.
NUMBER OF CONTRIBUTIONS	THE AND SELL GIFTS OF CRYPTOCURRENCIES.
SCHEDULE M, PART I,	THE FOUNDATION USES THE GIVING BLOCK TO RECEIVE AND SELL GIFTS OF CRYPTOCURRENCIES.
LINE 32B - THIRD PARTIES	\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{
LUSED TO SOLICIT.	ļ
PROCESS, OR SELL	
NONCASH	
CONTRIBUTIONS	

# SCHEDULE O (Form 990)

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.

Altach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Department of Treasury Internal Revenue Service

Name of the Organization UNIVERSITY OF ARIZONA FOUNDATION

Employer Identification Number 86-6050388

	Explanation	
BRIEF MISSION	THE UNIVERSITY OF ARIZONA FOUNDATION IS COMMITTED TO SUPPORTING AND ENHANCING THE VISION, MISSION AND VALUES OF THE UNIVERSITY OF ARIZONA THROUGH THE DEVELOPMENT AND MANAGEMENT OF PRIVATE SUPPORT.	
DELEGATE BROAD AUTHORITY TO A COMMITTEE	THE BOARD OF TRUSTEES HAS APPOINTED AN EXECUTIVE COMMITTEE WHICH IS COMPRISED OF THE CHAIR OF THE BOARD, THE VICE CHAIR, THE PRESIDENT OF TH CORPORATION AND THE UNIVERSITY OF ARIZONA, THE SENIOR VICE PRESIDENT OF FINANCE OF THE CORPORATION AND UNIVERSITY OF ARIZONA, THE SECRETARY AN TREASURER. IN ADDITION, THE BOARD OF TRUSTEES MAY DESIGNATE ONE OR MOF TREASURER. IN ADDITION, THE BOARD OF TRUSTEES MAY DESIGNATE ONE OR MOF AT-LARGE EXECUTIVE COMMITTEE MEMBERS. TO THE EXTENT PROVIDED IN THE AT-LARGE EXECUTIVE COMMITTEE, THE EXECUTIVE COMMITTEE SHALL HAVE AND EXECUTIVE COMMITTEE CHARTER, THE EXECUTIVE COMMITTEES. THE EXECUTIVE COMMITES THE AUTHORITY OF THE BOARD OF TRUSTEES. THE EXECUTIVE COMMITED THE BOARD OF TRUSTEES AT EACH OF ITS MEETINGS AND PROVIDES BOARD OF TRUSTEES WITH ALL INFORMATION NECESSARY FOR THE BOARD OF TRUSTEES OF TRUSTEES AT EACH OF TRUSTEES WITH ALL INFORMATION NECESSARY FOR THE BOARD OF TRUSTEES TO CARRY OUT ITS GENERAL DUTY OF OVERSIGHT.	TEE THE USTEES
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	MANAGEMENT PREPARED THE FORM 990. WE ENGAGED AN INTERNATIONAL PUBLIC ACCOUNTING FIRM TO REVIEW OUR INTERNALLY-PREPARED FORM 990. AFTER THE INTERNATIONAL PUBLIC ACCOUNTING FIRM COMPLETED THEIR REVIEW, MANAGEM REVIEWED THE FINAL DRAFT, WHICH WAS THEN SUBMITTED FOR REVIEW BY OUR COMMITTEE BEFORE THE FORM WAS FILED WITH THE IRS.	ÄUDIT
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	EACH MEMBER OF THE BOARD OF TRUSTEES AND EACH OFFICER-EMPLOYEE OF I IS ANNUALLY PROVIDED WITH A CONFLICT OF INTEREST ACKNOWLEDGEMENT AN IS ANNUALLY PROVIDED WITH A CONFLICT OF INTEREST ACKNOWLEDGEMENT AN IS ANNUALLY PROVIDED WITH A CONFLICT OF INTEREST THEM TO OUR IN-HOUSE LEGAL COUNSEL FOR REVIEW. ANY OF THEM, AND RETURN THEM TO OUR IN-HOUSE LEGAL COUNSEL FOR REVIEW. ANY OF THE PROSENT THEMSELVES DURING THE YEAR ARE REVIEWED BY MANAGEME SUBMITTED TO THE BOARD FOR RESOLUTION.	CONFLICTS NT AND
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	THE FOUNDATION HAS A COMPENSATION COMMITTEE COMPRISED ONLY OF INDE TRUSTEES; CONTEMPORANEOUS MINUTES ARE KEPT OF THEIR MEETINGS AND D THE COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PROVIDE COMPAI THE COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PROVIDE COMPAI THE COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PROVIDE AUGUST 5, 2	024.
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	THE FOUNDATION HAS A COMPENSATION COMMITTEE COMPRISED ONLY OF INDESTRUCTES; CONTEMPORANEOUS MINUTES ARE KEPT OF THEIR MEETINGS AND DESTRUCTED THE COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PROVIDE COMPATA AND OTHER GUIDANCE. DEPENDING ON THE INDIVIDUAL, THE PROCESS WAS COMPLETED AUGUST 5, 2024.	
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	KY, LA, MA, MD, ME, MI, MN, NH, NJ, NY, OR, UT, WI	INTEREST
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE FOUNDATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF POLICY OR AUDITED FINANCIAL STATEMENTS PUBLICLY AVAILABLE.	(b) Amount
	(a) Description	982,90
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	K-1 FLOW THROUGH OF UNRELATED BUSINESS INCOME/LOSS	982,90

I OMB No. 1545-0047

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.

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

UNIVERSITY OF ARIZONA FOUNDATION

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R (Form 990)

|--|

Open to Public Inspection	Employer identification number
•	Employer ic

86-6050388

Schedule R (Form 990) 2023 (g) Section 512(b)(13) controlled ŝ (f)
Direct controlling
entity 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. Yes (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Exempt Code section (c)
Legal domicile (state
or foreign country) Cat. No. 50135Y (c)
Legal domicile (state or foreign country) **(b)** Primary activity (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization Part II Part <u>හ</u> 9  $\mathbf{E}$ **£** Ð ন Ξ 9 **©** 4 <u>ල</u> Ξ Ø

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

20

2/14/2025 11:41:49 AM

(k) Percentage ownership

> 2/14/2025 11:41:49 AM 51

Schedule R (Form 990) 2023

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. Identification 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 more related organizations treated as a partnership during the tax year. managing partner? Yes No Percentage ownership (f) Code V—UBI amount in box 20 of Schedule K-1 (Forn 1065) (g) Share of end-of-year assets (h)
Disproportionate
allocations? (f) Share of total income Yes (g) Share of end-of- <sup>[1</sup> year assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total ілсоте (d) Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512—514) (state or foreign country) (c) Legal domicile (d)
Direct controlling
entity Primary activity (c) Legal domicile (state or foreign country) Primary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization (1)(SEE STATEMENT) Schedule R (Form 990) 2023 Part IV Part III 4 Ø ල E  $\Xi$ 3 හ **E** 9 9

(i) Section 512(b)(13) controlled

ž

Yes

entity?

8

9

9

თ	
202(	
066	
(Form	
α	
redule	
-	

	Yes No	ns listed in Parts II-IV?	· ·		10			Section 1		7 dt	\ \frac{1}{2}	3		TRANSPORTER	7	TH.	7 ut	10 1		10 P	19	The control of the co	- - -	18	including covered relationships and transaction thresholds.	(b) (c) (c) (c) (d)	Amount involved   Memou of determine							2023	Schedule 7 (2010)	2/14/2025 11:41:49 AM
	Transactions With Related Organizations, Complete if the organization answered	In it is a frame antity is listed in Parts II, III, or IV of this schedule.	e organization engage in any of the following transactions with one of the contraction engage in any of the following transactions.	During the tax year, the annuities, (iii) royalties, or (iv) rent from a controlled ellury	Receipt of (1) included (2) in capital contribution to related organization(s)	City, grant, or capital contribution from related organization(s)	only, grant, or carrow for related organization(s)	Loans of loan granntees by related organization(s)		ganization(s)	organization(s)	elated organization(s)	related organization(s)	Livering of more assets to related organization(s)		I ease of facilities, equipment, or other assets from related organization(s)	Performance of services or membership or fundraising sollolitation by related organization(s)		charing of facilities, equipment, mailing lists, or other assets with reachers.	Sharing of paid employees with related organization(s)	Supplied the state of the state	Reimbursement paid to related organization(s) for expenses	Reimbursement paid by related organization(s) to expense			Other transfer of cash of property non-regard to the instructions for information on who must complete tills life, income to any of the above is "Yes," see the instructions for information on who must complete tills life, income to any of the above is "Yes," see the instructions for information on who must complete tills life, income to any of the above is "Yes," see the instructions for information on who must complete tills life, income to any of the above is "Yes," see the instructions for information on who must complete tills life, income to any of the above is "Yes," see the instructions for information on who must complete tills life, income to any of the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the above is	TEXT.	Name of related organization type (as)								52
Schedule R (Form 990) 2023	Transactions With		Note: Complete line 1 if ally controls.						e Logis of logis gamman	related organization(s)			: Exchange of assets with related organization(s)			k I ease of facilities, equip		m Performance of services		Sharing of paid employ		p Reimbursement paid to		•	r Other transfer of cash of	,,	I THE BISMOID OF			(1)	(5)	(3)	3	(5)	Q	

Schedule R (Form 990) 2023

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

Schedule R (Form 990) 2023 (k) Percentage ownership 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. (i) General or managing partner? å Yes (0) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) Disproportionate allocations? Yes (g) Share of end-of-year assets (f) Share of total income (d) Are all partners income (related, carcluded from tax under section 710 (3) from tax under sections 512—514) Yes No Predominant An income (related, unrelated, excluded (c)
Legal domicile
(state or foreign
country) (b) Primary activity (a) Name, address, and EIN of entity (16) (14) (15) **E** (13) (10) (12) 9 8 E 9 <u>N</u> ව ₹ 9 Ξ

dation
a Foun
f Arizona
sity o
Univer

	ige (i) Section	512(b)(13) controlled entity?	Yes No	>		
	(h) Percenta	ownership				
	(n) Share of	end-of-year assets				
	(f) Chara of	total income				
	1411	(e) Type of entity (C-corp, S-corp of trust)				
				TINIVERSITY	OF ARIZONA FOUNDATION	
polation of the		(c) Legal · domicile (state or foreign country)			AZ	
axable as a cor		(b) Primary activity			TRUST	
		(a) Name, address and EIN of related organization			CHARITABLE REMAINDER TRUSTS (46)	
	Pari IV Identification of Related Organizations Taxable as a Corporation of Identification of Related Organizations Taxable as a Corporation of Identification of Related Organizations Taxable as a Corporation of Identification of Related Organizations (Identification of Identification of Identificat	Identification of Related Organizations Taxable as a Corporation of Related Organizations (n) Share of (n) Percentage	me, ad	Identification of Related Organizations 1 axable as a composition of Related Organizations 1 axable as a composition (c) Legal (d) Direct (e) Type of entity (f) Share of activity domicile (state or address and EIN of related organization activity (f) Primary (c) Legal (d) Direct (e) Type of entity (f) Share of (g) Share of (h) Percentage (i) Section (f) Section (f) Section (f) Share of (h) Percentage (i) Section (f) Share of (h) Percentage (f) Section (f	Identification of Related Organizations 1 axable as a composition of Related Organizations 1 axable as a composition (c) Legal (d) Direct (e) Type of entity (f) Share of activity domicile (state or address and EIN of related organization activity foreign country) (c) Legal (d) Direct (e) Type of entity (f) Share of (g) Share of (h) Percentage (i) Section (c) Legal (d) Direct (e) Type of entity (f) Share of (g) Share of (h) Percentage (i) Section (c) Legal (d) Direct (e) Type of entity (f) Share of (h) Percentage (i) Section (f) Section (f) Share of (h) Percentage (i) Section (f) Section (f) Section (f) Share of (h) Percentage (i) Section (f) Sect	Identification of Related Organizations 1 axable as a comporation of Related Organizations 1 axable as a comporation of Related Organization (b) Primary activity domicile (state or address and EIN of related organization activity (c) Legal (d) Direct (e) Type of entity (f) Share of (g) Share of (h) Percentage (i) Section (c) C-corp. S-corp or total income assets (ii) Section (organization activity foreign country) (c) Legal (d) Direct (e) Type of entity (f) Share of (g) Share of (h) Percentage (i) Section (c) C-corp. S-corp or total income assets (ii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) Section (c) C-corp. S-corp or total income assets (iii) S-corp or total inco