**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

<u>A</u>	-01 (11	e zu i	o calendar year, or tax year begin	ning 07/	UL, 2015,	, and endin	g		00/.	30,2016	
Во	heck if a	ošcable:	C Name of organization					D Employer ide	entificat	ion number	
	Addie		UNIVERSITY OF ARIZONA	FOUNDATION				0.6 6056			
$\vdash$	chang		Doing Business As	4 1 82	, 1			86-6050			
<u> </u>	Name	change	Number and street (or P.O. box if mail is		5)	Room/suite		E Telephone n			
_	Initial	return	1111 NORTH CHERRY AVEN					(520) 62	⊥ -33·	40	
	<b>-</b> }	nated	City or town, state or province, country, a	and ZIP or foreign postal code							
	Amen return	1	TUCSON, AZ 85721					G Gross receip		264,543	<del></del>
L_	Applie pend	eation ng	F Name and address of principal officer:	JOHN-PAUL ROC	ZNIAK			H(a) Is this a grou subordinates		for Yes	X No
			SAME AS C ABOVE					H(b) Are all subord	nates inclu	ded? Yes	No
<u>I</u>		empt st		)  (insert no.)	4947(a)(1)	or 527	7	If "No," attac	halist (s	see instructions)	
			WWW.UAFOUNDATION.ORG			<u> </u>		H(c) Group exem		-	
10 × 200	na sana an 100 sana	of organ	nization: X Corporation Trust	Association Other ▶		L Year of	format	ion: 1958 M	State of	legal domicile	: AZ
P	art I		mmary								
	1	Briefly	describe the organization's mission o	r most significant activities	: THE UN	IIV. OF A	AZ F	MOITAGNUC	IS C	OMMITTE	)
ဗ္ဗ		TO S	SUPPORTING AND ENHANCING	THE VISION, MI	SSION AN	ND VALUE	S OF	THE			
nan		UNI	V. OF AZ THROUGH THE DEV	ELOPMENT AND MAI	VAGEMENT	C OF PRI	VATE	SUPPORT.			
Ver	2	Check	cthis box 🕨 🔲 if the organization d	iscontinued its operation	s or dispose	d of more tha	n 25%	of its net assets	3.		
ပိ	3	Numb	er of voting members of the governing	body (Part VI, line 1a)					3		35.
త క	4	Numb	er of independent voting members of t	he governing body (Part \	/I, line 1b)				4		34.
ij	5		number of individuals employed in cale						5		105.
Activities & Governance	6		number of volunteers (estimate if necess						6		124.
Ă	7a	Total 1	unrelated business revenue from Part V						7a	~1,06	9,241.
			nrelated business taxable income from						7b	-1,06	9,241.
Revenue								Prior Year		Current \	'ear
	8	Contri	ibutions and grants (Part VIII, line 1h)				1	23,673,30	7.	75,82	9,110.
	9	Progra	am service revenue (Part VIII, line 2g)		COPY	Y FOR		4,296,37	9.	4,53	2,591.
	10	Invest	ment income (Part VIII, column (A), line	es 3, 4, and 7d)	PUBLIC IN	ISPECTION		37,918,61	5.	32,61	
œ	11		revenue (Part VIII, column (A), lines 5,			•		-534,60	8.		4,080.
	12		revenue - add lines 8 through 11 (must				1	.65,353,69	3.	111,99	7,819.
_	13							91,971,96		72,40	
	14	Grants and similar amounts paid (Part IX, column (A), lines 1-3)  Benefits paid to or for members (Part IX, column (A), line 4)						0.			0
w	145		es, other compensation, employee bene					7,306,78	4.	7,49	9,056.
Expenses	16a		ssional fundraising fees (Part IX, column						0.		0
Ğ	b	Total t	fundraising expenses (Part IX, column (I	D). line 25) ▶ 8,	826,939						
ш	17		expenses (Part IX, column (A), lines 11					19,058,14	3.	19,23	7,283.
	18		expenses. Add lines 13-17 (must equal					.18,336,88		99,13	
	19		nue less expenses. Subtract line 18 fron					47,016,80	_		8,068.
e o		110101	ido teco exportecos ocolidos inte to iron				Begin	ning of Current Y		End of Ye	
Net Assets or Fund Balances	20	Total :	assets (Part X, line 16)					352,629,02		825,18	
Ass	21		liabilities (Part X, line 26)					23,581,82		209,83	
E E	22		ssets or fund balances. Subtract line 21	from line 20				529,047,19	_	615,34	
20.00			gnature Block	100111110 201 1 1 1 1 1	· · · · · ·						
Un	der pe	nalties o	of periury. I declare that have examined the	is return, including accompa	anying schedu	iles and staten	nents, a	and to the best of	my kno	owledge and b	elief, it is
tru	e, corre	ct, and	complete. Declaration of greparer (other than	officer) is based on all infor	nation of whic	ch preparer ha	s any kr	nowledge.			
			10000					3	7-1	17	
Sig			Signature of officer					Date			
He	re		J CRAIG BARKER		SVP, F	INANCIAI	LSVO	cs			
			Type or print name and title		•						
		Print	Type preparer's name	Preparer's signature		Date		Check	if PTI	IN	
Pal	d		VEN T RUTTI	& Tem 8	Titte	03/07/	17	self-employ		00775456	ì
	parer	<b>—</b>	s name ► ERNST & YOUNG U.		440-00					565596	· · · · · · · · · · · · · · · · · · ·
Use	Only		saddress Two north central avenue		95004					322-3000	
Mar	y the I		cuss this return with the preparer show					t hone no.	, , , , ,	X Yes	No
_			Reduction Act Notice, see the separat	<u>·</u>	<del>/                                    </del>		• • •		<del></del>	Form 99	
		AIVIN									- 120101

Par	Checklist of Required Schedules			
	L		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
		1	X	
2		2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	· · · · · · · · · · · · · · · · · · ·	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
		4	Х	
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 Revenue Procedure 98-19? If "Yes," complete Schedule C,			
		5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	l		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
		6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
		7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		.,	
_		8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		İ	
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			.,
		9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		37	
		10	Х	P2005918
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.		450×435.	R.VEL.
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		v	
	· · · · · · · · · · · · · · · · · · ·	1a	Х	
Ð	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	ایرا	Х	
_		1b	^	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			Х
.3	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	l1c		
a		1		Х
_		1d 1e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ı te		
,	•	11f	х	
120	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	111		
12a		2a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	-a		
.,	• • •	2b		Х
13		13		X
		4a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		i	
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
		4b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			<del>-</del>
		15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-		16	1	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
-		17	1	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			•
		18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	$\neg$		
		19		X

Part	Checklist of Required Schedules (continued)	k		·
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			İ
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	1		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			.,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			1.
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			.,
a		28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	001		х
	Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20-		Х
••	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30	х	
31	conservation contributions? If "Yes," complete Schedule M	30		
31	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	•		
<b>3</b> 2	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
<b>V</b> -1	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
~	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			'
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
		Form	990	(2015)

I GU	Check if Schedule O contains a response or note to any line in this Part V			
	Official a confedence of containing a response of flote to any file in this fact visit in the content of the containing a response of flote to any file in this fact visit in the content of the content	• • •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			0.500
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable,			
	Did the organization comply with backup withholding rules for reportable payments to vendors and		5	0.0
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 105	9.0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	BOAN SHIP AVA
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		201256	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		Х
h	account)?	-74	or and the	10 25-10
ы	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).		(1)	9.55.4
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			:
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	l <u>.</u> .		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	7
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	1000		E.S. 1
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	1060/524	a s
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		·
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			S 33 1
a	Initiation fees and capital contributions included on Part VIII, line 12			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]		8.0	95.00
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders		in 165	Side
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	American Marie (	e Geographic conta
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			2012
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	2000		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	2536,607,610,607	man et an et
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 9	990 (2015)		ş	Page 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in	struc	
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <u>1a</u> 31			5.55 E
	If there are material differences in voting rights among members of the governing body, or if the governing		5	60000
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	2 55 5		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 34	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l '		37
	stockholders, or persons other than the governing body?	7b	0255355	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			9 8 1
	the year by the following:		X	ista j
a	The governing body?	8a 8b	Х	
b	Each committee with authority to act on behalf of the governing body?	on	1	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue		<u> </u>	1
0000	ion 211 onotoo (11110 oootion 2 toquoto information about pointed floring and 2) the internal internal		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1 1 1		
.,	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			•
	rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Χ	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	(Ladicara e ties
15	Did the process for determining compensation of the following persons include a review and approval by	10000		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	Section 4
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	12.5		
	with a taxable entity during the year?	16a	100000	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			2007
Soci	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ARIZONA		-1/01	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection, Indicate how you made these available. Check all that apply	: 5U1(¢	3)(3)S	oniy)

Another's website Upon request Other (explain in Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records: ►
RITA WILLIAMS 1111 NORTH CHERRY AVENUE TUCSON, AZ 82721

520-621-3027 20

ACCOUNTS OF SAME	990 (2		· *** ** · · · · · · · · · · · · · · ·				Радв <b>9</b>
Pa	it VII	Statement of Revenue Check if Schedule O contains a respo	nse or note to a	ny line in this Part	VIII		
		Oned in Concado Contanto a respo		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue and Other Similar Amounts	1a b c d e f	Federated campaigns	75,829,110. 10,751,068. Business Code 611710 541900	75,829,110. 2,844,064. 1,688,527.	2,844,064. 1,688,527.		
Program Se	d e f g	All other program service revenue		4,532,591.			
14	3 4 5	Investment income (including divide and other similar amounts)	i proceeds . ▶	20,924,582. 0. 51,656.			20,924,582.
	6a b c d 7a	Gross rents	▶ (ii) Other	43,505.			43,505
ıne	c d 8a	Gain or (loss)		11,685,616.			11,685,616.
Other Revenue	С	Net income or (loss) from fundraising events		0.			
	b						
	10a	Net income or (loss) from gaming activities  Gross sales of inventory, less returns and allowances					
	C	Net income or (loss) from sales of inventory.  Miscellaneous Revenue	Business Code	0.			
	11a b c	K-1 PASS THRU	541900	-1,069,241.		-1,069,241.	

-1,069,241.

111,997,819.

4,532,591.

JSA 5E1051 1.000 32,705,359. Form **990** (2015)

-1,069,241.

### Part IX Statement of Functional Expenses

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

Check if Schedule O contains a resp	onse of hote to any line	sirtins ratery ,		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	72,363,412.	72,363,412.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16	40,000.	40,000.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,960,246.		744,382.	1,215,864.
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	4,213,263.		1,562,282.	2,650,981.
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	163,992.		74,533.	89,459.
9 Other employee benefits	718,817.		296,099.	422,718.
10 Payroll taxes	442,738.		176,279.	266,459.
11 Fees for services (non-employees):				010 · · ·
a Management	212,447.	****	4.60, 640	212,447.
b Legal	169,612.		169,612.	
c Accounting	169,497.		169,497.	
d Lobbying	79,200.		79,200.	
e Professional fundraising services. See Part IV, line 17.	0.	•	0 272 042	
f Investment management fees	8,372,842.		8,372,842.	
g Other. (If line 11g amount exceeds 10% of line 25, column	2 022 711	719,559.	117,847.	1,195,305.
(A) amount, list line 11g expenses on Schedule O.}	2,032,711.	719,339.	111,041.	1,193,303.
12 Advertising and promotion	541,546.	82,157.	212,951.	246,438.
13 Office expenses	1,203,911.	103,150.	865,223.	235,538.
14 Information technology	0.	100/1001	00072201	200,000
15 Royalties	0.			
16 Occupancy	1,211,583.	952,230.	13,665.	245,688.
17 Travel	.,,	,	,	
for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	4,543,668.	2,602,563.	1,672.	1,939,433.
20 Interest	0.	, ,		
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	164,910.		164,910.	
23 Insurance	137,962.		137,962.	
24 Other expenses, Itemize expenses not covered		79 % % % % % % % % % % % % % % % % % % %		
above (List miscellaneous expenses in line 24e. If				
line 24e amount exceeds 10% of line 25, column				a jestina a elit
(A) amount, list line 24e expenses on Schedule O.)				
aFEES AND CHARGES	255,762.		149,153.	106,609.
bREAL PROPERTY HOLDING COSTS	141,632.	28,497.	113,135.	
c				
d				
e All other expenses	00 100 771	76 004 560	10 101 011	0.000.000
25 Total functional expenses. Add lines 1 through 24e	99,139,751.	76,891,568.	13,421,244.	8,826,939.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here		and an analysis of the state of		
following SOP 98-2 (ASC 958-720) , , . , ,				

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Form 990 (2015)
Part X Balance Sheet

Farrex				
	Check if Schedule O contains a response or note to any line in this P	art X	<del></del>	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	0.		0.
2	Savings and temporary cash investments	53,551,013.	2	38,573,016.
3	Pledges and grants receivable, net	27,889,756.	3	23,854,440.
4	Accounts receivable, net	435,000.	4	59,000.
5	Loans and other receivables from current and former officers, directors,			
ļ	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L  Loans and other receivables from other disqualified persons (as defined under section	0.	5	0.
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers			
	and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ارر	organizations (see instructions). Complete Part II of Schedule L	0.		0.
Assets 8	Notes and loans receivable, net	38,566.	7	0.
8   §	Inventories for sale or use	0.	8	0.
9	Prepaid expenses and deferred charges	0.	9	0.
10:	a Land, buildings, and equipment: cost or		:	
	other basis. Complete Part VI of Schedule D 10a 14,646,618.	•		The second of the second
	Less: accumulated depreciation	12,265,857.		
11	Investments - publicly traded securities	348,213,572.		331,706,382.
12	Investments - other securities. See Part IV, line 11	400,203,838.		409,829,874.
13	Investments - program-related. See Part IV, line 11	772,816.	13	255,334.
14	Intangible assets	0.	14	0.
15	Other assets. See Part IV, line 11	9,258,609.	15	9,048,101.
16	Total assets. Add lines 1 through 15 (must equal line 34)		16	825,183,972.
17	Accounts payable and accrued expenses	3,391,850.	17	3,076,654.
18	Grants payable	0.	18	0,
19	Deferred revenue		19	0.
20	Tax-exempt bond liabilities	0.	20	0.
21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
<u>ဖွဲ့</u> 22	Loans and other payables to current and former officers, directors,			
Liabilities	trustees, key employees, highest compensated employees, and		1.511	
.월	disqualified persons. Complete Part II of Schedule L	0.		0.
43	Secured mortgages and notes payable to unrelated third parties	0.	~~	0.
24	Unsecured notes and loans payable to unrelated third parties.	6,762,797.	24	6,574,952.
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X	213,427,181.		200 100 000
امم	of Schedule D	223,581,828.	25	200,188,282. 209,839,888.
26	Total liabilities. Add lines 17 through 25	223,301,020.	26	209,839,888.
ses	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			15 1 TO
<u>ğ</u> 27	Unrestricted net assets	12,234,908.	27	12,419,632.
중 28	Temporarily restricted net assets	122,674,673.	28	118,784,704.
[ 29	Permanently restricted net assets	494,137,618.	29	484,139,748.
Net Assets or Fund Balances  8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			11
के 30	Capital stock or trust principal, or current funds		30	
9 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
₹ 32	Retained earnings, endowment, accumulated income, or other funds		32	
₩ 33	Total net assets or fund balances	629,047,199.	33	615,344,084.
34	Total liabilities and net assets/fund balances	852,629,027.	34	825,183,972.
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Form <b>990</b> (2015)

Form **990** (2015)

orm 98	90 (2015)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	11,9	97,8	319.
2	Total expenses (must equal Part IX, column (A), line 25)	5)				
3	Revenue less expenses. Subtract line 2 from line 1	3		12,8	58,0	)68.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6	629,047,199		
5	Net unrealized gains (losses) on investments	5		-26,883,524		
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3	22,3	341.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	6	15,3	44,0	184.
Part	XII Financial Statements and Reporting					,
	Check if Schedule O contains a response or note to any line in this Part XII		<u>.</u>			
	<b>Learner</b>   Learnery				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				1 1	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	φlain	in		14.	5.1
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed or	ı a			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis		Ī			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of	versi	ght			
	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	in			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in			
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3b		
				Form	990	(2015)

### SCHEDULE A (Form 990 or 990-EZ)

# **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.

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization
UNIVERSITY OF ARIZONA FOUNDATION

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

Pai		Reason for Public Cha	irity Status (All c	organizations must c	complet	e this pa	art.) See instructions	i.
The	org	anization is not a private fou	ndation because it	t is: (For lines 1 through	gh 11, cł	neck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 9	90 or 990	)-EZ).)	
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz		-				(iii). Enter the
		hospital's name, city, and st		,				, <b>(/</b>
5		An organization operated t		a college or universit	y owne	d or ope	erated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	vernment or gove	rnmental unit describe	d in sect	tion 170(	b)(1)(A)(v).	
7	X	An organization that norma	ally receives a sub	ostantial part of its su	ipport fr	om a go	vernmental unit or fr	om the general public
		described in section 170(b)	)(1)(A)(vi). (Compl	ete Part II.)				
8		A community trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	Part II.)			
9		An organization that norma	ally receives: (1) n	nore than 331/3% of	its supp	ort from	contributions, memb	ership fees, and gross
		receipts from activities rela	ated to its exemp	t functions - subject	to certa	in excep	otions, and (2) no mo	re than 331/3% of its
		support from gross invest	tment income an	d unrelated business	taxable	e income	e (less section 511	tax) from businesses
		acquired by the organizatio	n after June 30, 19	975. See section 509(	(a)(2). (C	Complete	Part III.)	
10		An organization organized a	and operated excl	usively to test for publi	c safety.	See sec	tion 509(a)(4).	
11		An organization organized		•	-			rry out the purposes of
		one or more publicly suppo	rted organizations	described in section 8	509(a)(1	) or sect	ion 509(a)(2). See se	ction 509(a)(3). Check
		the box in lines 11a through						
а		Type I. A supporting orga						<del>-</del>
		the supported organization	•	•	•		•	
		organization. You must co				,		
b		Type II. A supporting org			nnection	with its	supported organizati	on(s), by having
		control or management o	-					· · · · · · -
		organization(s). You must		=		•		• • • • • • • • • • • • • • • • • • • •
C		Type III functionally integ	-		ited in c	onnectio	n with, and functional	ly integrated with.
		its supported organization						,,
d		Type III non-functionally		-				ted organization(s)
		that is not functionally inte		· - +	•		• • • • • • • • • • • • • • • • • • • •	
		requirement (see instructi	-	-	-		•	
е		Check this box if the orga	-					I. Type III
	_	functionally integrated, or					•••	., .,,,,,
f	En	ter the number of supported						
g		ovide the following information	=					·
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-9 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
				above (see manucuons))	1 4000	HICHLE	instructions)	nisti ucuons)
					Yes	No		
/٨١								
(A)								
(D)								
(B)								
(C)								
\ <del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>								
(D)								
\- <i>\</i>					ļ			
(E)								
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Tota	ı E		i	1	I	1	l	1

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	66,014,586.	61,981,428.	99,711,904.	123,673,307.	75,829,110.	427,210,335.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge		_				0.
4	Total. Add lines 1 through 3	66,014,586.	61,981,428.	99,711,904.	123,673,307.	75,829,110.	427,210,335.
5	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)						39,405,151.
6	Public support. Subtract line 5 from line 4.				•	Tallina.	387,805,184.
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	66,014,586.	61,981,428.	99,711,904.	123,673,307.	75,829,110.	427,210,335.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	17,524,187.	22,099,851.	18,832,438.	29,541,904.	21,019,743.	109,018,123.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0.	0.	0.	0.	0.	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10					:	536,228,458.
12	Gross receipts from related activities, etc. (s	see instructions)				12	16,825,184.
13	First five years. If the Form 990 is forganization, check this box and stop here			d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup					T	
14	Public support percentage for 2015 (li	ne 6, column (f	) divided by line	11, column (f))		14	72.32 %
15	Public support percentage from 2014						71.22 %
16a	331/3% support test - 2015. If the o	•		•			
	this box and stop here. The organization						
. D	331/3% support test - 2014. If the coheck this box and stop here. The organization						
170	10%-facts-and-circumstances test - 2	-					
174	10% or more, and if the organization Part VI how the organization meets t	meets the "fa- the "facts-and-c	cts-and-circumst circumstances" te	ances" test, ch est. The organi	eck this box a zation qualifies	nd <b>stop here.</b> E as a publicly s	Explain in upported
b	organization	<b>2014.</b> If the organization meets	ganization did n s the "facts-and	ot check a box I-circumstances	on line 13, 16 " test, check t	a, 16b, or 17a, his box and <b>st</b>	and line op here.
18	supported organization Private foundation. If the organization	did not check a	a box on line 13		, or 17b, check	this box and see	.`. ► ´ □
-	instructions		3 1 H K K F H K			Chadule A (Form 9	

Part III

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

(Complete only if you checked the box on line 9 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees	1	:				
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise	1					
	sold or services performed, or facilities						
	furnished in any activity that is related to the	1				]	
	organization's tax-exempt purpose	1					
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	1					
4	Tax revenues levied for the						
	organization's benefit and either paid	1					
	to or expended on its behalf	1					
5	The value of services or facilities	1					
	furnished by a governmental unit to the	1					
	organization without charge	1					
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	1					
b	Amounts included on lines 2 and 3						_
	received from other than disqualified persons that exceed the greater of \$5,000	1					
	or 1% of the amount on line 13 for the year	1					
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)	1					
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6,						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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,	;					
	and 12.)						
14	First five years. If the Form 990 is f	or the organiza	tion's first, seco	and, third, fourth,	, or fifth tax ye	ear as a section	501(c)(3)
	organization, check this box and stop here						▶ 📘
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2015 (line 8					15	%_
16	Public support percentage from 2014 Sche					16	<u></u>
Sec	tion D. Computation of Investmen		····			-	
17	Investment income percentage for 2015 (ii.					17	%
18	Investment income percentage from 2014	Schedule A, Part	III, line 17			18	%
19 a	331/3% support tests - 2015. If the org	ganization did no	ot check the bo	x on line 14, and	d line 15 is more	e than 331/3%, a	and line
	17 is not more than 331/3 %, check th	is box and <b>sto</b> j	here. The org	anization qualifies	s as a publicly	supported organi	zation 🕨 🔃
b	331/3% support tests - 2014. If the orga	anization did not	check a box on	line 14 or line 19	9a, and line 16 is	more than 331/3	s %, and
	line 18 is not more than 331/3 %, check	this box and s	top here. The or	ganization qualifi	es as a publicly	supported organi	zation 🕨 🔃
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this bo	x and see instr	uctions 🕨

### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Par	<u>t V.)</u>		
Secti	ion A. All Supporting Organizations			
		<u> </u>	Yes	No
1	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 class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	1 11 1 4 1	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the			
	organization made the determination.	3b	1 11 1 1	3.44
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 Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <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)			
5а	purposes.  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	4c 5a	1,73, 1,23, 2, 23, 2, 23, 3, 23, 23, 23, 23, 23, 23, 23, 23, 23, 23,	
b c	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
	•		1	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
h	Did the organization have any excess husiness holdings in the tax year? (Use Schedule C. Form 4720, to	1	Ì	

determine whether the organization had excess business holdings.)

Scheat	118 A (FORM 990 OF 99U-EZ) 2015			Page 🥥
Part	Supporting Organizations (continued)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		<u> </u>	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ion B. Type I Supporting Organizations		I	1
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
'	regularly appoint or elect at least a majority of the organization's 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	1.5		
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	١.		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	117, 7	ļ
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	1.50		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	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	550		17,14
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	100		1
	the supported organization(s).	4		
Secti	ion D. All Type III Supporting Organizations	<u> </u>	L	L
0000	1011 D. All Type III Oupporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	10.00		
	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			12.54
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1	+ 3,3	
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 Part VI how		194,41	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's		4	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		-	
	supported organizations played in this regard.	3		
Secti	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	ons):	
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.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	inetru	rtione)	
·	The organization supported a governmental onling. Describe in that writing you supported a government onling (see	monu	P	No
2	Activities Test. Answer (a) and (b) below.		163	140
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
1)	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			ļ
	activities but for the organization's involvement.	2b		
		411		$\vdash$
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	ļ	<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizatio	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust	on Nov. 20, 1970. See ins	tructions. All
other Type III non-functionally integrated supporting organizations must con			
Section A - Adjusted Net Income		(A) Prior Voor	(B) Current Year
Section A - Adjusted Net Income		(A) Prior Year	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):		. :	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		-
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally	v-inted	rated Type III supporting o	rganization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tìons (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		
2	Amounts paid to perform activity that directly furthers exer		ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets		• **	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
			(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015	·		
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С			*	
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years		,	
h	Applied to 2015 distributable amount			
ì	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5	Remaining underdistributions for years prior to 2015, if		,,	
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	PROGRAMMENT OF THE PROGRAMMENT O	The second secon		: : :
b	<u> </u>			
C	Excess from 2013			
d	Excess from 2014			_
e e				
•				

Schedule A (Form 990 or 990-EZ) 2015

### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, Ilne 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.

	e organization answered "Yes," (see separate instructions), ther	on Form 990, Part IV, line 5 (Proxy	Tax) (see separate in	istructions) or Form 990	-EZ, Part V, line 35c (Proxy
•	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	e of organization			Employer id	entification number
UNI.	VERSITY OF ARIZONA F	OUNDATION		86-60	)50388
Par	t I-A Complete if the c	organization is exempt under	section 501(c) or i	is a section 527 orga	anization.
1	Provide a description of the	organization's direct and indirect p	oolitical campaign ac	tivities in Part IV.	
2	Political expenditures			▶ \$	
3					
Par		organization is exempt under s			11.4 111
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5▶\$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 , , 🕨 \$	
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?.		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
Par	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(	3).
1	Enter the amount directly e	expended by the filing organization	n for section 527 ex	cempt function	
	activities			▶\$	
2		ng organization's funds contributed			
		es			
3	Total exempt function expe	enditures. Add lines 1 and 2. En	ter here and on Fo	orm 1120-POL,	
	line 17b			▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5		and employer identification numb			
		s. For each organization listed, en tributions received that were prom			
		nd or a political action committee (f			
		·		Í	1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	
					delivered to a separate
					political organization. If
					none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2015

R	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	l filed Form 5768 (ele	ction under
Α		belongs to an affiliated group (and list in Penses, and share of excess lobbying expen		roup member's
В	Check ▶ if the filing organization	checked box A and "limited control" provis	ions apply.	
		ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals
18	Total lobbying expenditures to influence	public opinion (grass roots lobbying)		
ŀ	Total lobbying expenditures to influence	a legislative body (direct lobbying) ,	79,200.	
C	: Total lobbying expenditures (add lines 1	a and 1b)	79,200.	
C	I Other exempt purpose expenditures		99,060,551.	
		d lines 1c and 1d),	99,139,751.	
		e amount from the following table in both		
	columns.		1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.	the sign than it	
Ę	J Grassroots nontaxable amount (enter 25	5% of line 1f)	250,000.	
ł	Subtract line 1g from line 1a. If zero or le	ess, enter -0- ,	0.	0.
ĵ		ss, enter -0-	0.	0.
j	If there is an amount other than zero	on either line 1h or line 1i, did the organiza	ition file Form 4720	
	reporting section 4911 tax for this year?			Yes X No
	•	4-Year Averaging Period Under section 501(h)		
	(Some organizations that made a	section 501(h) election do not have to comp	lete all of the five colun	nns below.
	See	the separate instructions for lines 2a through	2f.)	

	Lobbying Expend	litures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	71,930.	63,727.	4,200.	79,200.	219,057.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

For each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed description of the folbying activity.  1 During the year, did the filling organization attempt to influence foreign, national, state or local logislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1 to through 1)?  c Media advertisements?  d Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  G Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  B Rallias, demonstrations, semimars, conventions, speeches, lectures, or any similar means?  Other activities?  Total Add lines 1 through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  d If the filling organization incurred a section 4912 tax, did if file Form 4720 for this year?  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying and political expenditures from the prior year?  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying and political expenditures of \$2,000 or less?  Did the organization and the amount of any tax incurred as expenditures of \$2,000 or less?  Did the organization in the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), and If either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Complete if the organization in section 603(e)(1)(A) notices of nondeductible lobbying and political expenditures (do not include amounts of political expenses for which	Par	Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).	T file	d For	m 57	38		
doscription of the lobbying activity.  During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or managoment (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  P Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  1 Other activities?  1 Total Add lines to through 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred under section 4912  d If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Partillad Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization angree to carry over lobbying and political expenditures from the prior year?  3 Did the organization angree to carry over lobbying and political expenditures from the prior year?  3 Dues, assessments and similar amounts from members  1 Dues, assessments and similar amounts from members  2 Dues, assessments and similar amounts from members  3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible bedying and political expenditures (as ensured "No," OR (b) Part III-A, line 3, is answered "Yes."  D Dues, assessments and similar amounts from members  2 Carryover from last year  2 Descri	Enr	and Was recorded as lines to through the bolow provide in Part IV a detailed	(6	1)		(b	)	,
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? J Other activities? J Total. Add lines 1c through 1i 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filling organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part IIIPA Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization and similar amounts from members Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, answered "Yes."  Dues, assessments and similar amounts from members 2 Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, answered "Yes."  Aggregate amount reported in section 6033(e)(1)(A)			Yes	No		Amo	unt	
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization agree to carry over lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  P	1	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization agree to carry over lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  P	_	Volunteers?  Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
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### Part IV Supplemental Information (continued)

SCHEDULE C, PART II-A, LINE 1

THE FOUNDATION ENGAGED DURING FISCAL 2016 ONE PROFESSIONAL SERVICES FIRM TO REPRESENT THE UNIVERSITY OF ARIZONA IN FEDERAL, STATE, AND LOCAL GOVERNMENT AREAS. A PORTION OF THESE SERVICES CONSTITUTE LOBBYING EXPENSES UNDER SECTION 501(H). THE FOUNDATION ALSO DONATED \$75,000 TO SUPPORT YES ON PROPOSITION 123, WHICH CONSTITUTES LOBBYING EXPENSES UNDER SECTION 501(H).

### SCHEDULE D (Form 990)

Department of the Treasury

### Supplemental Financial Statements

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

Attach to Form 990.

2015 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization UNIVERSITY OF ARIZONA FOUNDATION 86-6050388 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . . . . . . . . . . . Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . . Aggregate value at end of year, . . . . . . . . . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply), Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b b Number of conservation easements on a certified historic structure included in (a) . . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register........... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > \_\_\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ĥ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Schedule D (Form 990) 2015

Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Part VI

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?...........

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation 1a Land 2,382,362. 2,382,362. b Buildings ...... 11,052,782. 1,599,673. 9,453,109. c Leasehold improvements d Equipment 1,211,474. 1,189,120 22,354. 11,857,825. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2015

Complete if the organization answered "Y	es" on Form 990 P	art IV line 11b See Form 990	Part X line 12
(a) Description of security or category	(b) Book value	(c) Method of valuat	
(including name of security)	(0) = 00 10.20	Cost or end-of-year mark	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other (A) ABSOLUTE RETURN LP AND FUNDS			
(A) ABSOLUTE RETURN LP AND FUNDS	237,114,913.	FMV	
(B) PRIV CAPITAL LP	68,993,488.	FMV	
(C) REIT FUND REAL ESTATE PTSH	58,841,627.	FMV	
(D) COMMODITIES/NATURAL RES LP	44,879,846.	FMV	
(E)			
(F)			
(G)			
(H)	100 000 074		an Agalang na San
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	409,829,874.		
Part VIII Investments - Program Related.  Complete if the organization answered "Y	/es" on Form 990 P	art IV line 11c See Form 990	Part X line 13
(a) Description of investment	(b) Book value	(c) Method of valual	
(a) Description of investment	(b) Book value	Cost or end-of-year mark	
(1)			
(2)			
(3)		1 114 114 114	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			<del></del>
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	<u> </u>		
Complete if the organization answered "Y	es" on Form 990, P	art IV, line 11d. See Form 990,	Part X, line 15.
(a) Descri	ption		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Y	es" on Form 990, P	art IV, line 11e or 11f. See For	m 990, Part X,
line 25.			
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes			energen er en en en en en en en en en en en en en
(2) TRUST LIABILITIES	22,738,319		0.5000000
(3) FMV OF ENDOWMENT MANAGED FOR UNIV.	177,449,963		
(4)			
(5)		_	
(6)		_	
(7)			en en en en en en en en en en en en en e
(8)			
(9)			5 5 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	200,188,282	•	

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
	Total revenue, gains, and other support per audited financial statements	1	77,073,222.
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains (losses) on investments		
a b	Donated services and use of facilities	1	
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII.)	]	
	Add lines 2a through 2d	2e	-26,883,524.
3	Subtract line 2e from line 1	3	103,956,746.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 8, 363, 414.		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	8,041,073.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		111,997,819.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	90,776,337.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	ļ.	
b	Prior year adjustments		
C	Other losses	.	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	00 776 227
3	Subtract line 2e from line 1	3	90,776,337.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 8, 363, 414.	-	
b	Other (Describe in Part XIII.)	4.	8,363,414.
	Add lines 4a and 4b	4c	99,139,751.
5 Darf	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	U	33/103/1011
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inforr PAGE 5	nation	He 4, Fait A, line
			•••

### Part XIII Supplemental Information (continued)

SCHEDULE D, PART III, LINE 1B

DONATED COLLECTIONS, PRINCIPALLY PHOTOGRAPHS, PRINTS AND NEGATIVES TO BENEFIT THE UNIVERSITY OF ARIZONA'S CENTER FOR CREATIVE PHOTOGRAPHY.

SCHEDULE D, PART III, LINE 4

THE CENTER FOR CREATIVE PHOTOGRAPHY IS AN ARCHIVE AND RESEARCH CENTER

LOCATED ON THE UNIVERSITY OF ARIZONA CAMPUS. THE CENTER PROMOTES RESEARCH

INTO AND APPRECIATION OF THE PHOTOGRAPHIC MEDIUM WHILE SAFEGUARDING

ORIGINAL OBJECTS FOR POSTERITY.

SCHEDULE D, PART V, LINE 4

THE PAYOUT FROM THE FOUNDATION ENDOWMENT PROVIDES SCHOLARSHIP, RESEARCH, PROGRAM AND OTHER SUPPORT TO THE UNIVERSITY OF ARIZONA.

SCHEDULE D, PART X, LINE 2

ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES,

ADDRESSES HOW UNCERTAIN TAX POSITIONS SHOULD BE RECOGNIZED, MEASURED,

PRESENTED, AND DISCLOSED IN THE FINANCIAL STATEMENTS. THE GUIDANCE

REQUIRES THE ACCOUNTING AND DISCLOSURE OF TAX POSITIONS TAKEN, 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 APPLICABLE TAX AUTHORITY. MANAGEMENT OF THE

FOUNDATION IS REQUIRED TO ANALYZE ALL OPEN TAX YEARS, AS DEFINED BY THE

STATUE OF LIMITATIONS, FOR ALL MAJOR JURISDICTIONS, WHICH INCLUDE FEDERAL

AND CERTAIN STATES. THE FOUNDATION HAS NO EXAMINATIONS IN PROGRESS AND

NONE ARE EXPECTED AT THIS TIME. AS OF JUNE 30, 2016, MANAGEMENT OF THE

FOUNDATION HAS REVIEWED ALL OPEN TAX YEARS AND MAJOR JURISDICTIONS AND

### Part XIII Supplemental Information (continued)

CONCLUDED THERE 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 D, PART XI, LINE 4B

CONTRIBUTIONS OF PHOTOGRAPHS, PRINTS AND NEGATIVES \$ 746,900

K-1 FLOW THROUGH OF UNRELATED BUSINESS INCOME \$ (1,069,241)

\$ (322,341)

### **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 Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name (	of the organization				Employer identification	ation number
UNIV	ERSITY OF ARIZONA FOUN	IDATION			86-6050388	3
Part	General Information of Form 990, Part IV, line 14		Outside the l	Jnited States. Complete	if the organization answe	ered "Yes" on
1	For grantmakers. Does the orga	nization mainta	ain records to s	substantiate the amount of	f its grants and other	
;	assistance, the grantees' eligibili	ty for the grant	ts or assistance	e, and the selection criteri		
!	grants or assistance?					X Yes No
2	For grantmakers. Describe in	Part V the or	ganization's pr	ocedures for monitoring	the use of its grants	and other
i	assistance outside the United St	ates.				
_						
3 .	Activities per Region. (The follow	T	T			1
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(1)	CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		250,444,361.
(2)	EUROPE			INVESTMENTS		8,968,495.
(2)						
(3)						
(4)			:			
(5)						
(6)						
(7)						
(8)	•					
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total,					259,412,856.
b	Total from continuation sheets to Part I					

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 5E1274 1.000 20150M 1546

259,412,856. Schedule F (Form 990) 2015

Totals (add lines 3a and 3b)

Schedule F (Form 990) 2015

Page 2

Page 2

Page 2

Page 2

Page 2

Page 1

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
(b)		NORTH AMERICA	FELLOWSHIP	40,000.	WIRE TRANS.			FMV
(2)								
(5)								
(p)				-				
(9)								
(6)								
(01)								
(12)								
(13)								-
(14)								
(SI)								
(16)								

¥	
ities by the foreign country, recognized as tax-exemp	<b>A</b>
anizations listed above that are recognized as charities by the foreign cou	ounsel has provided a section $501(c)(3)$ equivalency letter.
2 Enter total number of recipient organ	by the IRS, or for which the grantee or c

Schedule F (Form 990) 2015

Enter total number of other organizations or entities.... m

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Grants 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.

(a) Type of grant or assistance	(b) Region	(c) Number of	(d) Amount of	(e) Manner of cash	(f) Amount of non-cash	(g) Description of non-cash	(h) Method of valuation
							appraisal, other)
(+)							
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)		-			***************************************		
(10)							
(11)			1.				
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sche	Schedule F (Form 990) 2015

Part	IV 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)	X 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; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X 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)	X 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; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2015

### Part V

Supplemental Information

Complete this part to 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).

SCHEDULE F, PART I, LINE 2

WE RELY ON THE OVERSIGHT OF THE APPLICABLE DEPARTMENT AT THE UNIVERSITY

OF ARIZONA.

SCHEDULE F, PART II, LINE 1

ACCRUAL BASIS RECORDED AS PROGRAM SERVICE EXPENSE.

**SCHEDULE 1** (Form 990)

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

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

▶ Attach to Form 990.

2013	Open to Public Inspection
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86-6050388

OMB No, 1545-0047

Employer identification number	
luspect	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Part General Information on Grants and Assistance

UNIVERSITY OF ARIZONA FOUNDATION

Department of the Treasury Internal Revenue Service Name of the organization

1 Does the organization	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	bstantiate the	e amount of the	grants or assistar	nce, the grantees'	eligibility for the grant	~	Soy X
2 Describe in Part IV th	the selection officers as ward the grants of assistance?	ures for mon	toring the use c	of grant funds in the	United States.			
Part IV. II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	omestic Organit that rece	anizations an	d Domestic Gov in \$5,000. Part II	ernments. Com	plete if the organiza ed if additional spac	ttion answered "Ye	s" on Form
1 (a) Name and address of organization or government	ss of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF ARIZONA								
1111 N. CHERRY AVE TUCSON,	SON, AZ 85721	74-2652689	GOVERNMENT	72,363,412.				UNIV. SUPPORT
(2)								
(3)								
(4)								
(5)								
(9)							Total Control of the	
(2)							11.174.000	
(8)								
(6)	The state of the s							
10)							-	
11)								
12)								
	I Enter total number of section 501(c)(3) and governmer	government	organizations li	t organizations listed in the line 1 table	able			7
3 Enter total number	Enter total number of other organizations listed in the line 1 table	sted in the lin	e 1 table				<b>A</b>	
or Paperwork Reduction Act Notice, see the Instructions for Form	t Notice, see the Instruction		.066				dos.	Schedule I (Form 990) (2015)

JSA 5E1288 1,000

20150M 1546

Page 2

α.	line 22.	
	30, Part IV,	
	luals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	
	ed "Yes" o	
	on answer	
	organizati	
	olete if the	
	ates. Com	
	United Sta	٦.
	uals in the	papaga si ac
	to Individ	rtional anal
	ssistance	Chart if pate
	d Other As	he dining
m 990) (2015)	Grants and Other Assistance to Individua	Dort III and the disciplinated if paditional and
Schedule I (Form 990) (2015		

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					,	
7						
က						
4						
5			-			
ဖ						
7						
PartIV	Supplemental Information. Complete this part to	is part to prov	ide the informat	tion required in	Part I, line 2, Part III,	provide the information required in Part I, line 2, Part III, column (b), and any other additional

SCHEDULE I, PART I, LINE 2

FUNDS ARE DEPOSITED IN PURPOSE SPECIFIC ACCOUNTS. WE RELY ON THE

EXTENSIVE INTERNAL CONTROL SYSTEM OF THE UNIVERSITY OF ARIZONA FINANCIAL

SERVICES OFFICE TO ENSURE CORRECT APPLICATION OF FUNDS ONCE TRANSFERRED

TO THE UNIVERSITY.

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### SCHEDULE M (Form 990)

### Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

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.

Information about Schedule M (Form 990) and its Instructions is at www.irs.gov/form990.

Employer identification number

Name of the organization 86-6050388 UNIVERSITY OF ARIZONA FOUNDATION Types of Property (c) (b) (a) Noncash contribution Method of determining Check if Number of contributions or amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 11. 746,900. **FMV** Art - Works of art. . . . . . . . . 1 2 Art - Historical treasures . . . . . . 3 Art - Fractional interests . . . . . . 4 Books and publications . . . . . . Clothing and household 6 Cars and other vehicles . . . . . . 7 8 7,271,664. Х 146. FMV Securities - Publicly traded . . . . . 9 10 Securities - Closely held stock . . . Securities - Partnership, LLC, or trust interests . . . . . . . . . . . Securities - Miscellaneous . . . . 12 Qualified conservation contribution - Historic structures ........ Qualified conservation contribution - Other . . . . . . . . . Χ 3. 2,732,504. **FMV** Real estate - Residential . . . . . . 15 16 Real estate - Commercial . . . . . 17 Real estate - Other . . . . . . . . Collectibles. . . . . . . . . . . . . . . . . . . 18 19 Food inventory..... 20 Drugs and medical supplies . . . . 21 22 Historical artifacts . . . . . . . . . 23 Scientific specimens..... 24 Archeological artifacts..... 25 Other ▶( 26 Other ▶( 27 Other ▶(\_ 28 Other ▶( 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . . . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required Χ 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2015)

Supplemental Information. Complete this part to 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.

SCHEDULE M, PART I, COLUMN (B)

COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED.

### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2015
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNIVERSITY OF ARIZONA FOUNDATION

Employer identification number 86-6050388

FORM 990, PART VI, LINE 1A

THE BOARD OF TRUSTEES HAS APPOINTED AN EXECUTIVE COMMITTEE WHICH IS

COMPRISED OF THE CHAIR OF THE BOARD, THE VICE CHAIR, THE PRESIDENT OF THE

CORPORATION AND THE UNIVERSITY OF ARIZONA, THE SENIOR VICE PRESIDENT OF

FINANCE OF THE CORPORATION AND THE UNIVERSITY OF ARIZONA, THE SECRETARY

AND THE TREASURER. IN ADDITION, THE BOARD OF TRUSTEES MAY DESIGNATE ONE

OR MORE AT-LARGE EXECUTIVE COMMITTEE MEMBERS. TO THE EXTENT PROVIDED IN

THE EXECUTIVE COMMITTEE CHARTER, THE EXECUTIVE COMMITTEE SHALL HAVE AND

EXERCISE THE AUTHORITY OF THE BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE

REPORTS TO THE BOARD OF TRUSTEES AT EACH OF ITS MEETINGS ON THE ACTIONS

TAKEN SINCE THE LAST MEETING OF THE BOARD OF TRUSTEES AND PROVIDES THE

BOARD OF TRUSTEES WITH ALL INFORMATION NECESSARY FOR THE BOARD OF

TRUSTEES TO CARRY OUT ITS GENERAL DUTY OF OVERSIGHT.

FORM 990, PART VI, LINE 11B

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, MANAGEMENT REVIEWED THE FINAL DRAFT, WHICH WAS THEN SUBMITTED FOR REVIEW BY OUR AUDIT COMMITTEE BEFORE THE FORM WAS FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C

EACH MEMBER OF THE BOARD OF TRUSTEES AND EACH OFFICER-EMPLOYEE OF THE FOUNDATION IS ANNUALLY PROVIDED WITH A CONFLICT OF INTEREST

ACKNOWLEDGMENT AND DISCLOSURE STATEMENT. SUCH INDIVIDUALS ARE REQUIRED TO REVIEW THESE DOCUMENTS, COMPLETE THEM, AND RETURN THEM TO OUR OFFICE OF FIDUCIARY COMPLIANCE FOR REVIEW. ANY CONFLICTS WHICH PRESENT THEMSELVES DURING THE YEAR ARE REVIEWED BY MANAGEMENT AND SUBMITTED TO THE BOARD FOR RESOLUTION.

FORM 990, PART VI, LINES 15A AND 15B

THE FOUNDATION HAS A COMPENSATION COMMITTEE COMPRISED ONLY OF INDEPENDENT TRUSTEES; CONTEMPORANEOUS MINUTES ARE KEPT OF THEIR MEETINGS AND DECISIONS. THE COMMITTEE REVIEWS AND APPROVES THE SALARIES OF ALL OFFICERS AND KEY EMPLOYEES. THE COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PROVIDE COMPARABILITY DATA AND OTHER GUIDANCE. THE PROCESS WAS LAST COMPLETED DECEMBER 15, 2016.

FORM 990, PART VI, LINE 19

THE FOUNDATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF

INTEREST POLICY OR AUDITED FINANCIAL STATEMENTS PUBLICLY AVAILABLE.

FORM 990, PART XI, LINE 9

CONTRIBUTION OF PHOTOGRAPHS, PRINTS AND NEGATIVES \$ (746,900)

K-1 FLOW THROUGH OF UNRELATED BUSINESS INCOME \$ 1,069,241

\$ 322,341

\_\_\_\_\_

Name of the organization
UNIVERSITY OF ARIZONA FOUNDATION

Employer Identification number

ATTACHMENT 1

### 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
RUFFALOCODY HOLDINGS LLC PO BOX 718 DES MOINES, IA 50303-0718	TELEPHONE OUTREACH	358,679.
FUND EVALUATION GROUP, LLC DEPT 781565 P.O. BOX 78000 DETROIT, MI 48278-1565	INVESTMENT SERVICES	344,514.
CAYLOR CONSTRUCTION COMPANY INC 2 E CONGRESS, STE 900 TUCSON, AZ 85701	CONSTRUCTION SVCS	286,020.
BLACKBAUD INC P.O. BOX 930256 ATLANTA, GA 31193-0256	SOFTWARE CONSULTANTS	243,933.
KASPICK & COMPANY, LLC 203 REDWOOD SHORES PARKWAY, SUITE 300 REDWOOD SHORES, CA 94065	ADMIN/ADVISORY SVCS	224,897.

# SCHEDULE R (Form 990)

# Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

ns is at www.irs.gov/form990.	
and its instructions	
990) and	
(Form	
ď	
Schedule	
about	
Information	
A	

OMB No. 1545-0047

Open to Public Employer identification number

86-6050388

ARIZONA FOUNDATION

UNIVERSITY OF

Department of the Treasury Internal Revenue Service Name of the organization

(g) Section 512(b)(13) controlled (f)
Direct controlling
entity ŝ FDN FDN FDN × ∢, кť Þ Yes 년 년 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. О Б OF þ Þ Þ 0 0 (f) Direct controlling 61,285. (e) End-of-year assets entity N/A Public charity status TYPE I (if section 501(c)(3)) 0 Ö 17,666. (d) Total income <u>@</u> Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. 11A, (c) Legal domicile (state or foreign country) (d) Exempt Code section 501(C)(3) ĄΖ ΆZ AΖ Legal domicile (state or foreign country) TECH TRANSFER (b) Primary activity REAL ESTATE RAISE FUNDS AZ Primary activity 86-6050388 86-6050388 86-6050388 SUPPORT AZ 85721 85721 TUCSON, AZ 85721 26-0077306 (a)Name, address, and EIN (if applicable) of disregarded entity TUCSON, AZ TUCSON, AZ 85721 TUCSON, TECHNOLOGIES AND RESEARCH, LLC Name, address, and EIN of related organization (2) UAF ELLER DEVELOPMENT, LLC (1) FOUNDATION OF ARIZONA UNIVERSITIES CHERRY AVE. CHERRY AVE. REALTY, LLC CHERRY AVE. 1111 N. CHERRY AVE. (3) UAF 1111 N. UAF 1111 N. 1111 N. PartII Part 9 (9) 3 3 3 ල 3 3

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

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Schedule R (Form 990) 2015

Schedule R (F	Schedule R (Form 990) 2015										Page 2	N
ParvIII	Identification of Related Organizations Taxable as a Partnership Complete if the organizati because it had one or more related organizations treated as a partnership during the tax year.	ted Organizations more related orga	Taxable anizations		<b>p</b> Complete if I rtnership during	he organization the tax year.	<b>a Partnership</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 34 ated as a partnership during the tax year.	on Form 9	90, Part IV, li	ne 34		
Nam	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	Predominant income (related, unrelated, excluded from tax under some tax under some some some some some some some some	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportorate alisoations?	(f) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or managing partner?	(k) Percentage ownership	
			country)		sections 512-514)			Yes No		Yes No		l
(1)												Ī
(2)												1
(3)												I
(4)												1
(5)												1
(9)												1
(7)												
PartiV	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization ans line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	ted Organizations	Taxable ated organ	as a Corporationizations treated	on or Trust Cor as a corporation	nplete if the org	<b>a Corporation or Trust</b> Complete if the organization answered "Yes" on Form 990, Part IV, itions treated as a corporation or trust during the tax year.	red "Yes" o	n Form 990, I	oart IV,		
	(a) Name, address, and EIN of related organization	) I of related organization		(b) Primary activity	(C) (wity Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ets ownership	tage Section Ship 512(b)(13) controlled entity?	≥ <u>6</u> 39
											Yes No	0
(1) CHARITABLE	ABLE REMAINDER TRUSTS (77)			HOTAGE	ŝ r	10 C					>	
(2)				10041	75	344					<	1
(3)												1
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	***************************************											
(7)				·								
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rganizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	
res" on Form	
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the organizati	
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s With Relate	
Transaction	
PartV	

100	Schedule R (Form 990) 2015	- Cristian Control		(5)
				(5)
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				(3)
				(2)
				(1)
ning	Method of determining amount involved	Amount involved	Transaction type (a-s)	Name of related organization
	ction thresholds.	ered relationships and transac	this line, including cove	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
×	118			
×	7			r Other transfer of cash or property to related organization(s)
×	19			q Reimbursement paid by related organization(s) for expenses
×	1 <sub>p</sub>			p Reimbursement paid to related organization(s) for expenses.
×	10			o Sharing of paid employees with related organization(s)
×	-t			
×	- T			m Performance of services or membership or fundraising solicitations by related organization(s).
× ×	÷ =			<ul> <li>k Lease of facilities, equipment, or other assets from related organization(s)</li> <li>l Performance of services or membership or fundraising solicitations for related organization(s)</li> </ul>
	The state of the s			
×	<b>:</b> -			j Lease of facilities, equipment, or other assets to related organization(s).
×	=			
×	4			
×				
×	1f			f Dividends from related organization(s),
×	- T			e Loans or loan guarantees by related organization(s)
×	19			
×	10			c Giff, grant, or capital contribution from related organization(s).
×	<del>1</del>			b Gift, grant, or capital contribution to related organization(s)
×	1a			a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
2		sted in Parts II-IV?	related organizations lis	Note. Complete line 1 if any entity is listed in Parts II, III, of IV of this schedule.  1. During the fax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
Yes	-			NIACA CAMMINA 4 if any parity is listed in Darts II 111 or IV of this schooling

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Page 4

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

(d) (d) (e) (f) (f) (e) (f) (f) (f) (f) (g) (f) (f) (g) (f) (g) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproportionato allocations?	Code V - UBI amount in box 20 of Schedule K-1 (Form 1085)	(I) General or managing partner?	(k) Percentage ownership
			sections 512-514)	Yes No			Yes No		Yes No	
(1)										
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### Part VII

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see instructions).