

CLIENT COPY

For the tax year ended: June 30, 2022

Sent via email on May 12, 2023

Dear Melanie,

Please use the link to download electronic copies of the following returns for the year ended **June 30, 2022**:

- Form 990-PF, Return of Private Foundation
- Form 990-T, Exempt Organization Business Income Tax Return

 $\frac{\text{https://app.suralink.com/reportDelivery/views/12390346070436/1824879/608293-a764b974967a51e257b3b5d16b9177f0-1935488974/128134581099}$

The Form 990-PF was transmitted electronically and accepted by the Internal Revenue Service on May 11, 2023.

The Form 990-T was transmitted electronically and accepted by the Internal Revenue Service on May 11, 2023.

Additionally, a copy of the Foundation's Form 990-PF has been mailed to the Florida Attorney General Office on May 11, 2023.

Also available for download is a file containing the public inspection copy of the returns.

As communicated to you previously, **we recommend the Foundation make a fourth quarter estimated tax payment of \$8,000** in connection with the Form 990-T for the year ending 06/30/2023. The payment should be made using the Treasury Department's Electronic Federal Tax Payment System (EFTPS) **no later than 8:00 p.m. on Wednesday, June 14th**. The payment should be coded to the 2022 (6/30/2023) Form 990-T (4th quarter).

We will communicate with you separately regarding the fourth quarter estimated tax payment for the Form 990-PF.

Additionally, please note, there is an excess distribution carryover of $\frac{\$500,342}{4}$ reported on the 2021 Form 990-PF. Therefore, the Foundation is not required to make any additional distributions during the year ending June 30, 2023 in order to meet its minimum distribution requirement.

As you requested, we have not prepared any state income tax returns for the June 30, 2022 year, based on the Board's decision (under the advice of the Foundation's legal counsel) to not file state returns due to the lack of information from the partnerships necessary to make complete and accurate state filings.

Copies of Forms 990-PF and 990-T and related schedules (excluding those marked "Not Open to Public Inspection") must be available for inspection by the public during regular office hours for a period of three years from the date filed. Copies of Forms 990-PF and 990-T (for any of the past three years) must be provided to anyone who requests it in person or in writing unless you elect to make such copies "widely available" through the use of the Internet. If the request is made in person, the copy must generally be provided the same business day. If the request is made in writing, you must generally provide the copy within 30 days after receiving the request. Federal law allows you to charge those who request copies a "reasonable" amount for copying costs and postage. You may require clear payment in advance. For your convenience, electronic public inspection copies of Forms 990-PF and 990-T have been in the download link above. Guidelines describing the details of federal regulations regarding providing copies of your Forms 990-PF and 990-T have been included with your client copy of these returns.

Please note that any documentation substantiating income and deductions reported on your returns should be maintained for a minimum of seven years should the Internal Revenue Service select your return for audit. Your copy of the returns should be filed with other permanent records you maintain.

If you have any questions concerning the above or if I can be of any assistance, please contact me at your convenience. As always, we appreciate the opportunity to be of service to you.

Sincerely,

Kaylyn A. Varnum, CPA
Partner • Assistant National Director - Tax Services



Batts Morrison Wales & Lee, P.A. Certified Public Accountants

801 North Orange Avenue, Suite 800 Orlando, FL 32801

Keeping Watch for Nonprofits Across the United States® Offices | Orlando • Dallas

www.NonprofitCPA.com • 800.960.0803 ext. 322

The information contained in this message is privileged and confidential information and protected from disclosure. If the reader of this message is not the intended recipient or an employee or agent responsible for delivering this message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately and permanently delete the message from your devices and systems. Thank you. Batts Morrison Wales & Lee, P.A.

TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

FOR THE YEAR ENDING

June 30, 2022

Prepared for	McKnight Brain Research Foundation 333 S. Garland Avenue, 17th Floor Orlando, FL 32801
Prepared by	Batts Morrison Wales & Lee, P.A. 801 North Orange Avenue, Suite 800 Orlando, FL 32801
Amount due or refund	An overpayment of \$5,973. The entire overpayment has been applied to the estimated tax payments.
Make check payable to	No amount is due.
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has been electronically filed. Do not mail a paper copy of the return to the IRS.
	Please note that the Form 990-PF return contains excess distribution carryover of \$500,342. This may be applied to tax year 2022 and subsequent years.

Form **990-PF**Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 **2021**Open to Public Inspection

For calendar year 2021 or tax year beginning JUL 1, 2021 JUN 30, 2022 , and ending A Employer identification number Name of foundation McKnight Brain Research Foundation 65-6301255 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 407-237-4485 333 S. Garland Avenue, 17th Floor City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Orlando, FL 32801 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 55,525,497. (Part I, column (d), must be on cash basis.) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income 0. N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 847,247. 839,030. Statement 2 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 4,704,854. Statement 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 30,393,833. 7 Capital gain net income (from Part IV, line 2) 4,504,004. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) 5,389. 571,304. Statement 3 11 Other income 5,557,490 5,914,338. Total. Add lines 1 through 11 295,325. 295,325. 590,651 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ______ 15 Pension plans, employee benefits 10,969. 2,194. 6,581. 16a Legal fees Stmt 4 17,645. 6,176. 6,176. **b** Accounting fees Stmt 5 73,739. 14,748. 44,243. c Other professional fees Stmt 6 Administrative 17 Interest Taxes Stmt 7 104,500. 0. 0. 18 Depreciation and depletion 19 20 Occupancy 21 Travel, conferences, and meetings 175,308. 0. 175,308. 22 Printing and publications 4,315. 78,144. 86,506. 23 Other expenses Stmt 8 Operating 24 Total operating and administrative 1,059,318. 322,758. 605,777. expenses. Add lines 13 through 23 2,097,815. 2,097,815. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 3,157,133 322,758. 2,703,592. Add lines 24 and 25 27 Subtract line 26 from line 12: 2,400,357 **8** Excess of revenue over expenses and disbursements 5,591,580. **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

For	m 99	0-PF(2021) McKnight Brain Research		65-6	6301255 Page 2
П	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of	,
Г			(a) Book Value	(b) Book Value	(c) Fair Market Value
			455 040	0.016.551	0.016.551
		Savings and temporary cash investments	177,942.	2,846,754.	2,846,754.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
Ś	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	, c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
	l ''	Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 9	42,254,760.	41,986,305.	52,678,743.
	14	Land, buildings, and equipment: basis ▶	12/231/7001	11/300/3031	32/0/0//130
	'*	Land, buildings, and equipment, basis			
	15	Less: accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	12 122 702	11 022 050	55,525,497.
_	47	instructions. Also, see page 1, item I)	42,432,702.	44,033,033.	33,323,431.
		Accounts payable and accrued expenses			
		Grants payable			
ies		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
<u>=</u>		Mortgages and other notes payable			
_	22	Other liabilities (describe)			
			0	_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here ►			
Ses		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions			
Ва	25	Net assets with donor restrictions			
Ē		Foundations that do not follow FASB ASC 958, check here			
ŕ		and complete lines 26 through 30.	42,432,702.	44 922 050	
SO		Capital stock, trust principal, or current funds	42,432,702.	44,833,059.	
set		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	1	Retained earnings, accumulated income, endowment, or other funds	* ·	• •	
Net Assets or Fund Balances	29	Total net assets or fund balances	42,432,702.	44,833,059.	
_			40 400 700	44 022 050	
_	30	Total liabilities and net assets/fund balances	42,432,702.	44,833,059.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
•		st agree with end-of-year figure reported on prior year's return)		1	42,432,702.
2		amount from Part I, line 27a			42,432,702.
		u incurrence not included in line O (itemains).			0.
		lines 1, 2, and 3		[]	44,833,059.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II. cr	olumn (h) line 29	6	44,833,059.

Part IV Capital Gains an	d Losses for Tax on In	vestment l	ncon	ne					
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation		(c) Date a (mo., da		(d) Date sold (mo., day, yr.)			
1a									
b See Attached S	Statements								
С									
d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost plus exp						in or (loss (f) minus	
a									
b									
С									
d									
e 30,393,833.				9,82	9.				4,504,004.
Complete only for assets showing of	gain in column (h) and owned by	the foundation o	on 12/3	1/69.		(I)) Gains (Co	ol. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce				col.	. (k), but n Losses (ot less tha from col. (n -0-) or (h))
a									
b									
С									
d									
е									4,504,004.
	(If gain, also enter	in Part I line 7			7				
2 Capital gain net income or (net capit	al loss) $ \begin{cases} If gain, also enter \\ If (loss), enter -0. \end{cases} $	in Part I, line 7			<u>}</u>				4,504,004.
3 Net short-term capital gain or (loss)									
If gain, also enter in Part I, line 8, co					\downarrow			3T / 3	
Part I, line 8	d on Investment Incom	o (Cootion	4040		3 40(b)	or 4049	ooo in	N/A	
				• • •			See in	Structio	ons)
1a Exempt operating foundations des	, , , ,								55 50 50
Date of ruling or determination let		ach copy of lett		_	- see inst	ructions)	1		77,723.
b All other domestic foundations en									
enter 4% (0.04) of Part I, line 12,	col. (b)					······			
2 Tax under section 511 (domestic s	section 4947(a)(1) trusts and taxa	able foundations	only; o	others, en	ter -0-)				0.
									77,723.
4 Subtitle A (income) tax (domestic									0.
5 Tax based on investment income	. Subtract line 4 from line 3. If ze	ro or less, enter	-0				. 5		77,723.
6 Credits/Payments:			_						
a 2021 estimated tax payments and	2020 overpayment credited to 20)21	6a			53,794	•		
b Exempt foreign organizations - tax	withheld at source		6b			0	- I		
c Tax paid with application for exten	nsion of time to file (Form 8868)		6с			30,000			
d Backup withholding erroneously w			6d			0			
7 Total credits and payments. Add li							7		83,794.
8 Enter any penalty for underpayme	ent of estimated tax. Check here	X if Form 22	20 is at	ttached			1 . 1		98.
9 Tax due. If the total of lines 5 and							9		
10 Overpayment. If line 7 is more that							10		5,973.
11 Enter the amount of line 10 to be:			•	5,	973.	Refunded			0.

	990-PF (2021) McKnight Brain Research Foundation 65-6303	1255		Page 4
	rt VI-A Statements Regarding Activities		127	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			- V
	Did the foundation file Form 1120-POL for this year?	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •			
_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0 •			
9	managers. ► \$ 0 . Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2	If "Yes," attach a detailed description of the activities.			22
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
10	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Х	22
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		1	Х
J	If "Yes," attach the statement required by General Instruction T.	-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
·	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► www.tmbrf.org			
	The books are in care of ▶ Truist Bank Telephone no. ▶ (407)			5
14	Located at ▶333 S. Garland Ave., 17th Floor, Orlando, FL ZIP+4 ▶32			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
15	and enter the amount of tax-exempt interest received or accrued during the year 15		/A	
15				No
15	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?			No X
15	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,	N		_

	5-63012	55	ı	Page s
Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required				
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year, did the foundation (either directly or indirectly):				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<u>l1</u>	a(1)		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqualified person?		a(2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		a(3)		Х
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<u>1</u>	a(4)	Х	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?				
(6) Agree to pay money or property to a government official? (Exception. Check "No"		a(5)		Х
if the foundation agreed to make a grant to or to employ the official for a period after				
termination of government service, if terminating within 90 days.)	<u>1</u> :	a(6)		X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		1b		X
c Organizations relying on a current notice regarding disaster assistance, check here				
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
before the first day of the tax year beginning in 2021?		1d		Х
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines				
6d and 6e) for tax year(s) beginning before 2021?		2a		Х
If "Yes," list the years 🛌 , , , ,				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
statement - see instructions.)	N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the year?		3a		Х
b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,				
Schedule C, to determine if the foundation had excess business holdings in 2021.)		3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t	hat			
had not been removed from jeopardy before the first day of the tax year beginning in 2021?		4h		Х

3 3	_	. (/			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section				5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); o				F = /0\		v
any voter registration drive?				5a(2) 5a(3)		X
(3) Provide a grant to an individual for travel, study, or other similar purposes				Ja(3)		
(4) Provide a grant to an organization other than a charitable, etc., organizatio 4945(d)(4)(A)? See instructions				5a(4)		Х
(5) Provide for any purpose other than religious, charitable, scientific, literary,				J G G (1)		
the prevention of cruelty to children or animals?				5a(5)		Х
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		
c Organizations relying on a current notice regarding disaster assistance, check l						
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it mainta	ained				
expenditure responsibility for the grant?			N/A	5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
$\textbf{6a} \ \ \text{Did the foundation, during the year, receive any funds, directly or indirectly, to} \\$						
a personal benefit contract?				6a		<u> </u>
${f b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a ${f p}$	personal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.				_		
7a At any time during the tax year, was the foundation a party to a prohibited tax s				7a		X
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration o	or				37
excess parachute payment(s) during the year? Part VII Information About Officers, Directors, Truste	Foundation Ma	manaya Ulabb		8		Х
Paid Employees, and Contractors	es, roundation wa	nagers, nigniy				
List all officers, directors, trustees, and foundation managers and t	heir compensation.					
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions t)	(е) Ехр	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions t employee benefit pla and deferred compensation	is a	ccount, allowai	
	·	, , , , , , , , , , , , , , , , , , ,	compondation			
See Statement 10		590,652.	0			0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "				
	(b) Title, and average	CITTE NONE.	(d) Contributions t		(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit pla and deferred	is a	count, allowai	other
NONE	ucvoted to position		compensation		anowai	1003
110112						
		1		+		
				\top		
			_			
Fotal number of other employees paid over \$50,000			>			0

Form 990-PF (2021) McKnight Brain Research Foundation	65-6301255 Page 7
Part VII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)	, Highly
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Ty	ype of service (c) Compensation
NONE	
	▶ 0
Total number of others receiving over \$50,000 for professional services Part VIII-A Summary of Direct Charitable Activities	> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	1 as the Expenses
1	
'	
See Statement 11	175,308.
2	
3	
4	
Dowt VIII D I O	
Part VIII-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
NT / N	Amount
1N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

Form 990-PF (2021)

P	art IX Minimum Investment Return (All domestic foundations mu	ust complete	this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purpose	s:		
а	Average monthly fair market value of securities			1a	63,345,582.
	Average of monthly cash balances			1b	1,204,753.
	Fair market value of all other assets (see instructions)			1c	· · · · · · · · · · · · · · · · · · ·
	Total (add lines 1a, b, and c)			1d	64,550,335.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	64,550,335.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater am	ount, see instr	uctions)	4	968,255.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3			5	63,582,080.
6	Minimum investment return. Enter 5% (0.05) of line 5			6	3,179,104.
Р	art X Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations, check here ▶ ☐ and do not complete this part.)			d certain	
1	Minimum investment return from Part IX, line 6			1	3,179,104.
2a	Tax on investment income for 2021 from Part V. line 5	2a	77,723.		
b	Income tax for 2021. (This does not include the tax from Part V.)	2b	77,723. 85,987.		
C	Add lines 2a and 2b			2c	163,710.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	3,015,394.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	3,015,394.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X			7	3,015,394.
Р	art XI Qualifying Distributions (see instructions)			·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	oses:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	2,703,592.
b	Program-related investments - total from Part VIII-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable			2	
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4			4	2,703,592.

Part XII Undistributed Income (see instructions)

Form 990-PF (2021)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X,				3,015,394.
line 7 2 Undistributed income, if any, as of the end of 2021:				3,013,354.
a Enter amount for 2020 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2021:				
a From 2016 1,266,263.				
b From 2017 372,156.				
c From 2018				
dFrom 2019 128,186.				
e From 2020	1 766 605			
f Total of lines 3a through e	1,766,605.			
4 Qualifying distributions for 2021 from Part XI, line 4: ►\$ 2,703,592.				
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2021 distributable amount				2,703,592.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	311,802.			311,802.
6 Enter the net total of each column as	, , , , , , , , , , , , , , , , , , ,			722,772
indicated below:	1,454,803.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract	1,434,003.			
line 4b from line 2b		0.		
c Enter the amount of prior years'		-		
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2020. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2021. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2022				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2016	-			
not applied on line 5 or line 7	954,461.			
9 Excess distributions carryover to 2022.	•			
Subtract lines 7 and 8 from line 6a	500,342.			
10 Analysis of line 9:				
a Excess from 2017 372,156.				
b Excess from 2018				
c Excess from 2019 128,186.				
d Excess from 2020				
e Excess from 2021				

123581 12-10-21 Form **990-PF** (2021)

		search Found		65-63	01255 Page 10
Part XIII Private Operating F	oundations (see ir	nstructions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter th	at it is a private operating			
foundation, and the ruling is effective fo	r 2021, enter the date o	f the ruling			
b Check box to indicate whether the found	dation is a private opera	ting foundation described	in section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
investment return from Part IX for					
each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XIV Supplementary Info	rmation (Comple	ete this part only	if the foundation	had \$5.000 or mo	re in assets
at any time during t	he year-see inst	ructions.)		. ,	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		e than 2% of the total con	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed r			·		•
None					
b List any managers of the foundation who ther entity) of which the foundation ha			(or an equally large port	tion of the ownership of a p	partnership or
None					
2 Information Regarding Contribut	ion, Grant, Gift, Loar	n. Scholarship, etc., P	rograms:		
Check here ► if the foundation of				not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num	ber or email address of	the person to whom appli	cations should be addre	ssed: See Sta	tement 13
See Statement 12					
b The form in which applications should be	e submitted and inform	ation and materials they s	should include:		
c Any submission deadlines:					
d Δην restrictions or limitations on award	e euch ae hy geographi	cal areas charitable fields	kinde of inetitutione of	r other factors	

123601 12-10-21 Form **990-PF** (2021)

Supplementary Information (continued) Part XIV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year American Brain Foundation ÞС Funding scholarship in 201 Chicago Ave cognitive aging and Minneapolis, MN 55415-1126 memory loss 330,000. American Federation for Aging РC Funding of research Research 55 West 39th Street,16th Floor New York, NY 10018 534,500. Foundation for the NIH РC Funding of research 11400 Rockville Pike, Suite 600 North Bethesda, MD 20852 1,000,000. Grand Canyon Conservancy РC Funding of research P.O. Box 399 Grand Canyon, AZ 86023 250. University of Alabama, Birmingham Funding of the Evelyn ÞС 1530 3rd Avenue South F. McKnight Brain Birmingham, AL 35294 Institute at UAB 32,005. See continuation sheet(s) Total ➤ 3a 2,097,815. **b** Approved for future payment None Total

Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated b	ousiness income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	0000				
h					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	847,247.	
 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 					
6 Net rental income or (loss) from personal property 7 Other investment income					
7 Other investment income	901101	34,452.	18		
8 Gain or (loss) from sales of assets other than inventory	001101	588,683.	18	4,087,108.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e		CO2 125	\vdash	4 024 255	
12 Subtotal. Add columns (b), (d), and (e)		623,135.		4,934,355.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	5,557,490.
(See worksheet in line 13 instructions to verify calculations.)					

Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2021) 123621 12-10-21

1) McKnight Brain Research Foundation 65-6301255 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVI **Exempt Organizations**

	D:44			- (1) - (- 1) 1	*********************************		P 504/-)		/aal Nia
1		•			ng with any other organizat		tion 501(c)		res No
					g to political organizations?	?			
а	Transfer	s from the reporting found	ation to a noncharita	ble exempt or	ganization of:				
	(1) Casi	h	• • • • • • • • • • • • • • • • • • • •					1a(1)	X
	(2) Othe	er assets					•••••	1a(2)	X
b		insactions;							
	(1) Sale	s of assets to a noncharita	ble exempt organizat	tion				1b(1)	X
	(2) Pur	chases of assets from a no	ncharitable exempt o	rnanization			***************************************	1b(2)	X
	(3) Ren	tal of facilities, equipment.	or other assets			•••••	***************************************	1b(3)	X
	(4) Reir	nhursement arrangements	or other 2000to				•••••	1b(4)	X
	(5) Loa	ns or loan quarantees	***************************************				• • • • • • • • • • • • • • • • • • • •	1b(5)	X
	(6) Peri	formance of services or me	mhershin or fundrai	eina ealiaitatia	ons			1b(6)	X
									$\frac{x}{x}$
					nployees				
u			· ·	-	edule. Column(b) should alv	-	-	•	us,
					ed less than fair market val	ue in any transactio	n or snaring arrangem	ient, snow in	
/2\	ine no.	(d) the value of the goods, (b) Amount involved			e exempt organization	/d\ =			
(a)	ille no.	(B) Amount involved	(c) Name of		s exempt organization	(u) Description	of transfers, transactions,	, and snaring arra	ngements
				N/A					
							no. no.		

	<u> </u>								
	<u> </u>								
		***************************************		****		***************************************			

					·			Marining .	
		V							
							n-		
	i								
2a					e or more tax-exempt orgar				
	in sectio	n 501(c) (other than sectio	n 501(c)(3)) or in se	ction 527?			•••••	Yes	X No
b		complete the following sch							
		(a) Name of org	anization		(b) Type of organization		(c) Description of relat	tionship	
		N/A						******	
						1-7444			
	1				g accompanying schedules and			May the IRS dis	cuss this
Si	gn 👢	TMSt Bank as	Low Poyact	TVU ST	n taxpayer) is based on all inform & OF Har MB24		has any knowledge.	return with the shown below?	oreparer
He	ere	by Meda	eda lian	House	511/2023	Truste	ee	X Yes	No.
	Šią	nature of officer or trustee)		Date	Title			
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if P	TIN	
					. /		self- employed		
Pa	aid	Kaylyn A.	Varnum	Kanlı	n Varnim	04/24/23		P016919	75
Pr	eparer			on Wal	es & Lee, P.	A.	Firm's EIN ▶ 20		
Us	se Only					-	, and care p 20		
	-	Firm's address ▶ 80	1 North O	range	Avenue, Suit	e 800		,	
			lando, FL		, Dull		Phone no. 407	-770-60	0.0
							TI HOHE HO. =U/	Form 990 -	
									(2021

Capital Gains and Losses for Tax on Investment Income (**b)** How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a Fed Hermes Trsy Oblig MMKT-I #68 FFS P b Fed Hermes Trsy Oblig MMKT-I #68 P C Ishares S&P Smallcap 600/Val ETF P d Ishares Core MSCI Emerging Mkts ETF P e Vanguard Total Bond Market P f Vanguard Midcap Value Index ETF P q Vanguard Small Cap Growth ETF P h Vanguard Value ETF P | Edgewood Growth Fund-Ins P j Alger Small Cap Focus-Z P k Artisan Intl Value Fund-Ins P | Calvert Emerg Mrkts Eqty-R6 P m Dodge & Cox Income Fund P n Eaton Vance-Atlanta SMID-R6 P 0 Hartford Dvdnd & Grwth-F P (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 179,361. 179,361. 0. a 0. 6,425,984. 6,425,984. b 7,213. 7,473. $\overline{260}$. С 1,895. 1,776.<u>119.</u> d 915,220. 930,013. -14,793.е 3,708. 3,058. 650. 942,769 -176,802. 1,119,571. 182,549. 143,762. 38,787. h 5,392,941. 4,341,160. 1,051,781. 924,130. 1,200,553. -276,423. 111,047. 4,683. 106,364. 1,850. 1,374. 476. 45,075. 38,882. 6,193. m 229,386. 5,921. 223,465. n 343,907. 116,748. 227,159. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 0. а Ō. b 260. С $\overline{119}$. -14,793.е 650. -176,802. 38,787. h 1,051,781. -276,423. 106,364. 476. 6,193. m 223,465. n 227,159. 0 2 Capital gain net income or (net capital loss) \dots { If gain, also enter in Part I, line 7 } According to the capital loss), enter "-0-" in Part I, line 7 } 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 3

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a Hartford Dividend and Grth-Y P b T Rowe Price Large/Cap GRW-I P c Vanguard Intl Growth-ADM P d Vanguard Inst Index-Inst P e Vanguard Russel 1000 GR-Ins P f Vanguard Russel 1000 VA-Ins P g Virtus Ceredex L/C Val Equity P h Western Asset Core Plus BD-IS P | Harbourvest 2015 Global Fd LP P Harbourvest 2016 Global Fd LP P k Harbourvest 2017 Global Fd LP P | Harbourvest Access-2018 Glb1-Cayman P m Harbourvest 2019 Global Fd LP P n Harbourvest 2020 Global Fd LP P O HCP Private Equity Master Fd V P (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 1,590. 1,600. 10. a 5,406,087. 2,714,287. 2,691,800. b 901,504. -18,489.883,015. С 2<mark>05,987.</mark> 250,732. 456,719. d 85,610. 67,990. 17,620. е 95,538. 86,757. 8,781. 4,501,680 3,982,726. 518,954. 2,321,814 2,611,471. -289,657. h 167,550. 69,789. 97,761. 89,949. 89,949. 138,584 138,584. 0. 56,299. 56,299. 0. 40,510. 40,510. m 10,890. 23,576. 12,686. n 4,337. 242,183. 237,846. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <u>10.</u> a 2,691,800. b -18,489. С 250,732. 17,620. е 8,781. 518,954. -289,657. h 97,761. Ō. m 12,686. n 237,846. 0 2 Capital gain net income or (net capital loss) \dots { If gain, also enter in Part I, line 7 } According to the capital loss), enter "-0-" in Part I, line 7 } 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 3

N/A

3

Page Part IV Capital Gains and Losses for Tax on Investment Income **(b)** How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a Springharbour 2013 Priv Equity LP P b Reversal of Partnership Redemptions per Books P c Asset Adjustments P е m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 175,824 18,735. 157,089. a 200,850. -200,850. b 167,515. -167,515. h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 157,089. a -200,850. b -167,515. С е m n 0 2 Capital gain net income or (net capital loss) \cdots { If gain, also enter in Part I, line 7 } Part I, line 7 4,504,004. 2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

201,060.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient University of Arizona - Evelyn F. РC Funding of the Evelyn McKnight Brain Institute F. McKnight Brain P.O. Box 245115 Institute at the Tucson, AZ 85724 University of Arizona 1,232. University of Florida PC Funding of research P.O. Box 14425 Gainesville, FL 32604 49,828. University of Miami PC Funding of research P.O. Box 248106 Coral Gables, FL 33124 150,000.

Total from continuation sheets

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

Form 990-PF ► Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123 2021

McKnight Brain Research Foundation

Employer identification number 65-6301255

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment							
	T							77,723.
1	Total tax (see instructions)						1	11,143.
2 :	a Personal holding company tax (Schedule PH (Form 1120), lir	ne 261	included on line 1	1	2a			
	Look-back interest included on line 1 under section 460(b)(2	,		·····				
	contracts or section 167(g) for depreciation under the income				2b			
(Credit for federal tax paid on fuels (see instructions)				2c			
(1 Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not c	omplete or file this form.	The corpora	tion			
	does not owe the penalty						3	77,723.
4	Enter the tax shown on the corporation's 2020 income tax ret							107 000
	or the tax year was for less than 12 months, skip this line and	i ente	r the amount from line 3	on line 5			4	127,032.
E	Required annual payment. Enter the smaller of line 3 or line	/ If	the corneration is require	ad to okin line	. 1			
ð	enter the amount from line 3			-			5	77,723.
F	Part II Reasons for Filing - Check the boxes belo	w tha	at apply. If any boxes are	checked, the	corporatio	n must file Form 2		77,725•
_	even if it does not owe a penalty. See instructions.		, p.yy 25/105 ard					
6	The corporation is using the adjusted seasonal install	ment	method.					
7	X The corporation is using the annualized income instal							
8	X The corporation is a "large corporation" figuring its fir	st rec	uired installment based (on the prior y	ear's tax.			
F	Part III Figuring the Underpayment					_		
			(a)	(t)	(c)		(d)
9	Installment due dates . Enter in columns (a) through (d) the							
	15th day of the 4th (Form 990-PF filers: Use 5th month),		11 /15 /01	10/1	F / O 1	02/15	, , ,	06/15/00
	6th, 9th, and 12th months of the corporation's tax year	9	11/15/21	12/1	5/21	03/15/	22	06/15/22
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,	10	13,441.	Q	,526.	33,9	325	
11	enter 25% (0.25) of line 5 above in each column Estimated tax paid or credited for each period. For	10	13,441.		, 520 •	33,3	,,,,,,	
••	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11	43,794.			10,0	000.	
	Complete lines 12 through 18 of one column	Н						
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12			,353.			
13	Add lines 11 and 12	13		30	,353.	30,8	327.	
14	Add amounts on lines 16 and 17 of the preceding column	14						
15	Subtract line 14 from line 13. If zero or less, enter -0	15	43,794.	30	,353.	30,8	327.	
16	If the amount on line 15 is zero, subtract line 13 from line				^		_	
,_	14. Otherwise, enter -0-	16			0.		0.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next	ا_ر				2 1	ا م	
40	column. Otherwise, go to line 18	17				3,1	108.	
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then so to line 12 of the post solumn.	,	30,353.	20	,827.			
Go	from line 15. Then go to line 12 of the next column to Part IV on page 2 to figure the penalty. Do not go to Part I	18 V			•			
<u> </u>	to rait iv on page 2 to rigure the penalty. Do not go to Pait i	v 11 l	ioro are no circies dil III	iic ii - iio pe	many 15 UW	rou.		

Form 2220 (2021)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations; Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2021 and before 7/1/2021	21				
22	Underpayment on line 17 x Number of days on line 21 x 3% (0.03)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23				
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25				
26	Underpayment on line 17 x Number of days on line 25 x 3% (0.03)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	See	Attached W	orksheet	
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29				
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31				
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35				
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns					8 \$ 98 .

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2021)

Form 2220 (2021) Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2018	l 1a				
b Tax year beginning in 2019	1b				
- · · · · · · · · · · · · · · · · · · ·					
c Tax year beginning in 2020	1c				
2 Enter taxable income for each period for the tax year beginning in					
2021. See the instructions for the treatment of extraordinary items	2				
		First Assessed	First Consorth	First Organiths	FK
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2018	3a				
b Tax year beginning in 2019	3b				
c Tax year beginning in 2020	3c				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
O Divide line 7 hy 0 0					
8 Divide line 7 by 3.0	8 9a				
9a Divide line 2 by line 8 b Extraordinary items (see instructions)	9a 9b				
	9c				
c Add lines 9a and 9b 10 Figure the tax on the amt on In 9c using the instr for Form	36				
1120, Sch J, line 2, or comparable line of corp's return	10				
11a Divide the amount in columns (a) through (c) on line 3a	10				
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b	' ' a				
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c	'''				
by the amount in column (d) on line 3c	11c				
12 Add lines 11a through 11c	12				
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10	1				
by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax (trusts only) for each	· · ·				
payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17				
18 For each period, enter the same type of credits as allowed	\vdash				
on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits. Subtract line 18 from line 17. If					
zero or less, enter -0-	19				

Form 2220 (2021) Form 990-PF Page 4
Part II Annualized Income Installment Method

P	art II Annualized Income Installment M	etno	a			
			(a)	(b)	(c)	(d)
			First 2	First 3	First 6	First 9
	Annualization periods (see instructions)	20	months	months	months	months
21	Enter taxable income for each annualization period. See					
	instructions for the treatment of extraordinary items	21	644,642.	826,136.	2,729,112.	3,039,633.
22	Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
00	Appualized tayable income. Multiply line 04 by line 00	222	3 867 852	3 304 544	5 458 224	4,052,834.
	a Annualized taxable income. Multiply line 21 by line 22 Dextraordinary items (see instructions)	23a 23b	5,007,052.	J,JU4,J44•	J, 4JU, 444•	±,002,004•
	c Add lines 23a and 23b	23c	3.867.852.	3.304.544.	5.458.224.	4,052,834.
	Figure the tax on the amount on line 23c using the	200	2,007,002.	-,1,-11	-,,	_, 002,004.
	instructions for Form 1120, Schedule J, line 2,					
	or comparable line of corporation's return	24	53,763.	45,933.	75,869.	56,334.
25	Enter any alternative minimum tax (trusts only) for each		, -	, ,	, -	· · · · · · · · · · · · · · · · · · ·
	payment period (see instructions)	25				
	, , , , , , , , , , , , , , , , , , , ,					
26	Enter any other taxes for each payment period. See instr.	26				
	Total tax. Add lines 24 through 26	27	53,763.	45,933.	75,869.	56,334.
28	For each period, enter the same type of credits as allowed					
	on Form 2220, lines 1 and 2c. See instructions	28				
29	Total tax after credits. Subtract line 28 from line 27. If		F2 F62	45 000	75 060	56 224
	zero or less, enter -0-	29	53,763.	45,933.	75,869.	56,334.
30	Applicable percentage	30	25%	50%	75%	100%
50			2070	3070	. 070	10070
31	Multiply line 29 by line 30	31	13,441.	22,967.	56,902.	56,334.
	art III Required Installments					
- (,	,		
	Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
	before completing the next column.		installment	installment	installment	installment
32	If only Part I or Part II is completed, enter the amount in					
	each column from line 19 or line 31. If both parts are					
	completed, enter the smaller of the amounts in each	32	13,441.	22,967.	56,902.	56,334.
22	column from line 19 or line 31	٥ <u>۷</u>	13,441.	44,307.	30,302.	50,554.
33	One the two offers	33		13,441.	22,967.	56,902.
34	Adjusted seasonal or annualized income installments.	- 00		10, 111 ·	22,501	30,302.
J-7	Subtract line 33 from line 32. If zero or less, enter -0-	34	13,441.	9,526.	33,935.	0.
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in		=3,	2,0200	23,2230	
	each column. Note: "Large corporations," see the					
	instructions for line 10 for the amounts to enter	35	19,431.	19,431.	19,430.	19,431.
36	Subtract line 38 of the preceding column from line 37 of					· ·
	the preceding column	36		5,990.	15,895.	1,390.
37	Add lines 35 and 36	37	19,431.	25,421.	35,325.	20,821.
38	Required installments. Enter the smaller of line 34 or					
	line 37 here and on page 1 of Form 2220, line 10.					_
	See instructions	38	13,441.	9,526.	33,935.	0.

Form **2220** (2021)

** Annualized Income Installment Method Using Standard Option

Form 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Nu	umber
McKnight B	rain Research	Foundation		65-63	01255
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			,
11/15/21	13,441.	13,441.			
11/15/21	-43,794.	-30,353.			
12/15/21	9,526.	-20,827.			
02/08/22	-10,000.	-30,827.			
03/15/22	33,935.	3,108.	16	.000082192	
03/31/22	0.	3,108.	91	.000109589	3
06/30/22	0.	3,108.	92	.000136986	3
09/30/22	0.	3,108.	46	.000164384	2
enalty Due (Sum of Coli	umn F).				9

^{*} Date of estimated tax payment, withholding credit date or installment due date.

Form 99	0-PF G	Gain or (Loss) f	rom Sale	of A	ssets		Sta	tement	: 1
Descrip	(a) tion of Property	7			anner quired		te ired	Date	Sold
Fed Her	mes Trsy Oblig N	— MKT-I #68 FFS		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	a		(f) or Lo	ng g
	179,361.	179,361.		0.		0.			0.
Descrip	(a) tion of Property	7			anner quired	_	te ired	Date	Sold
Fed Her	mes Trsy Oblig N	— MKT-I #68		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e)		Gain	(f) or Lo	n a a
	6,425,984.			0.		0.	————		0.
Descrip	(a) tion of Property	,			anner quired	-	te ired	Date	Sold
Ishares	S&P Smallcap 60	— 00/Val ETF		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre		Gain	(f) or Lo	oss
	7,473.	7,213.		0.		0.			260.

Descript	(a) tion of Property	-			lanner quired		te ired	Date S	old
Ishares	Core MSCI Emerg	ing Mkts ETF		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	~ .	Gain	(f) or Los	ı q
-	1,895.	1,776.		0.		0.			19.
Descript	(a) tion of Property	•			lanner quired		te ired	Date S	old
Vanguard	d Total Bond Mar	- ket		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	.	Gain	(f) or Los	ss
-	915,220.	930,013.		0.		0.		-14,7	93.
	(a) tion of Property			Ac	Manner equired		te ired	Date S	sold
Vanguard	d Midcap Value I	ndex ETF		Pur	chased				
	(b) Gross	(c) Cost or	(d) Expense	of	(e)			(f)	
_	Sales Price	Other Basis	Sale		Depre	c.	Gain	or Los	s
	3,708.	3,058.		0.		0.		6	50.
Descript	(a) tion of Property				lanner quired	Da Acqu		Date S	old
Vanguard	d Small Cap Grow	 th ETF		Pur	chased				
	(b) Gross	(c) Cost or	(d) Expense	of	(e)	_	Cain	(f) or Los	a d
	Sales Price	Other Basis	Sale		Depre	٠.	Gain	L OT HOS	5

Descrip	(a) tion of Property				fanner cquired	Da Acqu	te ired	Date Sold
Vanguar	d Value ETF			Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or Loss
-	182,549.	143,762.		0.		0.		38,787.
Descrip	(a) tion of Property				Manner Equired	Da Acqu	te ired	Date Sold
Edgewoo	d Growth Fund-In	s		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or Loss
-	5,392,941.	4,341,160.		0.		0.		1,051,781.
Descrip	(a)			1/	fanner	Da	+ 6	
	tion of Property	•			quired		ired	Date Sold
	tion of Property mall Cap Focus-Z	_		Ac				Date Sold
	mall Cap Focus-Z (b) Gross	(c) Cost or	(d) Expense	Ac Pur	equired echased (e)	Acqu	ired	(f)
	mall Cap Focus-Z (b) Gross Sales Price	(c) Cost or Other Basis		Ac Pur of	equired chased	Acqu	ired	(f)
	mall Cap Focus-Z (b) Gross	(c) Cost or	Expense	Ac Pur	equired echased (e)	Acqu	ired	(f)
Alger S	mall Cap Focus-Z (b) Gross Sales Price	(c) Cost or Other Basis 1,200,553.	Expense	Pur of 0.	equired echased (e)	Acqu O. Da	Gair Gair	(f)
Alger S	mall Cap Focus-Z (b) Gross Sales Price 924,130.	(c) Cost or Other Basis 1,200,553.	Expense	Pur of	cquired chased (e) Depre	Acqu O. Da	Gair Gair	(f) n or Loss -276,423.
Alger S	mall Cap Focus-Z (b) Gross Sales Price 924,130. (a) tion of Property	(c) Cost or Other Basis 1,200,553.	Expense	of M Acc Pur	danner	Da Acqu	Gain te	(f) n or Loss -276,423.

Descrip	(a) tion of Property				lanner quired		te ired	Date Sold
Calvert	Emerg Mrkts Eqt	_ у-R6		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
-	1,850.	1,374.		0.		0.		476.
Descrip	(a) tion of Property				lanner quired		te ired	Date Sold
Dodge &	Cox Income Fund	-		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
-	45,075.	38,882.		0.		0.		6,193.
Descrip	(a) tion of Property				lanner quired		te ired	Date Sold
Eaton Va	ance-Atlanta SMI	D-R6		Pur	chased			
	(b) Gross	(c) Cost or	(d) Expense	of	(e)	~	Coim	(f)
-	Sales Price	Other Basis	Sale		Depre		———	or Loss
	229,386.	5,921.		0.		0.		223,465.
Descrip	(a) tion of Property				Manner equired	Da Acqu		Date Sold
Hartford	d Dvdnd & Grwth-	- F		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
-		116,748.		0.		0.		227,159.

Descrip	(a) tion of Property				anner quired		ite iired	Date Sold
Hartfor	d Dividend and G	rth-Y		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gair	(f) n or Loss
	1,600.	1,590.		0.		0.		10.
Descrip	(a) tion of Property				anner quired		ite iired	Date Sold
T Rowe	Price Large/Cap	GRW-I		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gair	(f) n or Loss
-	5,406,087.	2,714,287.		0.		0.		2,691,800.
Descrip	(a) tion of Property				lanner quired		ite iired	Date Sold
Vanguar	d Intl Growth-AD	M		Pur	chased			
	(b) Gross	(c) Cost or	(d) Expense	٥f	(e)			(f)
	Sales Price	Other Basis	Sale	OI	Depre	c.	Gair	n or Loss
	883,015.	901,504.		0.		0.		-18,489.
Descrip	(a) tion of Property				anner quired		ite iired	Date Sold
Vanguar	d Inst Index-Ins	t		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gair	(f) n or Loss
-								

Descript	(a) ion of Property				Manner cquired		te ired	Date Sold
Vanguard	l Russel 1000 GR	_ -Ins		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	a	Cain	(f) or Loss
_	 .			0.		0.	Gain	
	85,610.	67,990.				· · · · · · · · · · · · · · · · · · ·		17,620.
Descript	(a) ion of Property				Manner cquired	Da Acqu	te ired	Date Sold
Vanguard	l Russel 1000 VA	-Ins		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
_	95,538.	86,757.		0.		0.		8,781.
Descript	(a) ion of Property				Manner cquired	Da Acqu	te ired	Date Sold
Virtus C	Ceredex L/C Val	— Equity R6		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e)	a	Cain	(f) or Loss
_	 .				Depre		Gain	
	4,501,680.	3,982,726.		0.		0.		518,954.
Descript	(a) ion of Property				Manner cquired	Da Acqu		Date Sold
Western	Asset Core Plus	- BD-IS		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
_	2,321,814.	2,611,471.		0.		0.		-289,657.

(a) Description of Property				Manner cquired		te ired	Date	Sold
Harbourvest 2015 Global	— Fd LP		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or L	oss
167,550.	69,789.		0.		0.			,761.
(a) Description of Property	_			Manner cquired		te ired	Date	Sold
Harbourvest 2016 Global	Fd LP		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or Lo	oss
89,949.	89,949.		0.		0.			0.
(a) Description of Property				Manner Date Acquired Acquired Date			Sold	
Harbourvest 2017 Global	— Fd LP		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	C.	Gain	(f) n or Lo	oss
138,584.	138,584.		0.		0.			0.
(a) Description of Property			 1	Manner cquired	Da	te ired	Date	
Harbourvest Access-2018	— Glbl-Cayman		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or L	oss
56,299.	56,299.		0.		0.			0.

(a) Description of P	roperty				Manner cquired		te ired	Date	Sold
Harbourvest 2019	Global	- Fd LP		Pu	rchased				
(b) Gros Sales P	s	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	a	Cain	(f) or Lo	va a
				0.					
	0,510.	40,510.				0.			0.
(a) Description of P	roperty				Manner cquired		te ired	Date	Sold
Harbourvest 2020	Global	- Fd LP		Pu	rchased				
(b) Gros Sales P	s	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Lo	oss
	3,576.	10,890.		0.		0.			686.
(a) Description of Property				Manner Date Acquired Acquired Date		Date	Sold		
HCP Private Equi	ty Maste	- er Fd V LP		Pu	rchased				
(b) Gros	s	(c) Cost or	(d) Expense	of	(e)		- 1	(f)	
Sales P		Other Basis	Sale		Depre		Gain ———	or Lo	
24	2,183.	4,337.		0.		0.		237, 	846.
(a) Description of P	roperty				Manner cquired		te ired	Date	Sold
Springharbour 20	13 Priv	- Equity LP		Pu	rchased				
(b) Gros Sales P	s	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Lo	oss
	5,824.	18,735.		0.		0.			089.

(a) Description of Prop	erty			Mann Acqui	-	Date quired	Date	Sold
Reversal of Partner	ship Redempt	ions per	Books	Purcha	sed			
(b)	(c)		(d)	٠.٤	(e)		(f)	
Gross Sales Pric	Cost e Other E		xpense Sale		eprec.	Gai	n or Lo	oss
	0.	0.		0.	0).		0.
(a) Description of Prop	erty			Mann Acqui	_	Date quired	Date	Sold
Asset Adjustments				Purcha	sed			
(b) Gross Sales Pric	(c) Value e Time of	at E	(d) xpense Sale		(e)	Cai	(f) n or Lo	266
								
	0. 16	57,515. 		0.) .	-107	,515.
Capital Gains Divid	ends from Pa	ırt IV						0.
Total to Form 990-P	F, Part I, 1	ine 6a					4,704	,854.
Form 990-PF	Dividends	and Inter	est fro	m Secur	ities	St	atement	t 2
Source	Gross Amount	Capital Gains Dividend	Re	(a) evenue Books	(b Net In ment I	vest-	(c Adjus Net In	sted
Dividends and Interest	847,247.		0. 8	47,247.	839	,030.		
•								

Form 990-PF	Other I	ncome		Statement 3
Description		(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Income/Loss from partnerships		0.	258,370.	
Income from PFIC Distribution Miscellaneous Income	ıs	0. 5,389.	307,545. 5,389.	
Total to Form 990-PF, Part I,	line 11	5,389.	571,304.	·
Form 990-PF	Legal	Fees		Statement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal fees	10,969.	2,194		6,581
To Fm 990-PF, Pg 1, ln 16a =	10,969.	2,194	· ·	6,581
Form 990-PF	Accounti	ng Fees		Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting fees	17,645.	6,176	,	6,176
To Form 990-PF, Pg 1, ln 16b	17,645.	6,176		6,176
Form 990-PF C	ther Profes	sional Fees		Statement (
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Consulting fees	73,739.	14,748	•	44,243

Form 990-PF	Taxes				Statement 7			
Description	(a) Expense Per Boo		(b) Net Inv	est-	(c) Adjusted Net Incom			
Federal taxes	104,5	500.		0.		0.		
To Form 990-PF, Pg 1, ln 18	104,500.		0.			0.		
Form 990-PF	Othe	er E	xpenses			Statement 8		
Description	(a) Expense Per Boo		(b) Net Inv	est-	(c) Adjusted Net Incom			
Miscellaneous expenses Website Development Investment Expense Insurance	65,6 3,5	698. 681. 502. 625.	3	0. 0. ,502. 813.		11,650. 65,681. 0. 813.		
To Form 990-PF, Pg 1, 1n 23	86,5	506.	4	,315.		78,144.		
Form 990-PF	Other	Inv	estments			Statement 9		
Description			luation ethod	Вос	ok Value	Fair Market Value		
Accrued Interest INVESCO QQQ TRUST SERIES 1 ISHARES CORE US AGGREGATE BO ISHARE RUSSELL 2000 ETF ARTISAN INTERNATIONAL VALUE CALVERT EMERGING MARKETS EQU	FD		COST COST COST COST COST COST	1 1	8,218. 8,466,061. 1,450,452. 1,446,231. 1,782,278.	8,218. 2,938,736. 1,432,976. 1,237,514. 1,625,461.		
FUND EATON VANCE ATLANTA CAPITAL SMID-CAP HARTFORD DIVIDEND & GROWTH 1			COST	2	596,230. 2,061,885.	548,661. 2,000,873.		
CL F DODGE & COX INCOME FD HARBOURVEST 2015 GLOBAL FD I HARBOURVEST 2016 GLOBAL FD I HARBOURVEST 2017 GLOBAL FD I HARBOURVEST ACCESS-2018 GLOBAL HARBOURVEST 2019 GLOBAL FD I HARBOURVEST 2020 GLOBAL FD I	LP PFIC LP PFIC LP PFIC BAL FD LP		COST COST COST COST COST COST		4,665,976. 1,653,069. 87,025. 94,478. 145,086. 278,258. 223,301. 289,058.	4,242,700. 1,512,003. 504,112. 496,956. 483,446. 476,740. 397,879. 355,907.		

McKnight Brain Research Foundation			65-6301255
HARBOURVEST 2021 GLOBAL FD LP	COST	102,500.	109,739.
HCP PRIVATE EQUITY MASTER FD V	COST	18,093.	1,025,528.
ISHARES S&P SMALL CAP 600/VAL ETF	COST	2,272,680.	2,047,868.
ISHARES CORE MSCI EMERGING MARKETS	COST		
ETF		702,155.	580,135.
LIGHTHOUSE CREDIT OPPORTUNITIES FD	COST	1,111,912.	1,931,366.
LIGHTHOUSE DIVERSIFIED FD QP II LP	COST	917,051.	2,568,735.
LIGHTHOUSE GLOBAL LONG/SHORT FD LP	COST	1,091,487.	2,943,923.
SPRINGHARBOUR 2013 PRIVATE EQUITY	COST	52,151.	465,255.
SVB CAPITAL-STRATEGIC INVESTORS FD	COST	•	·
X		297,950.	359,026.
VANGUARD INSTITUTIONAL INDEX FUND	COST	5,101,148.	8,694,546.
VANGUARD INTERNATIONAL GROWTH FUND	COST	518,810.	641,477.
VANGUARD MID-CAP VALUE INDEX ETF	COST	965,310.	1,063,100.
VANGUARD RUSSELL 1000 GROWTH INDEX	COST	1,744,030.	2,400,191.
VANGUARD RUSSELL 1000 VALUE INDEX	COST	3,239,375.	3,252,135.
VANGUARD VALUE ETF	COST	5,604,047.	6,333,537.
Total to Form 990-PF, Part II, line 13	3	41,986,305.	52,678,743.

				=
Form 990-PF	Part VII - List	of Officers, Directors	Statement 1	. 0
	Trustees and	Foundation Managers		

Name and Address	Title and Avrg Hrs/Wk		Employee Ben Plan Contrib	Expense
Dr. J. Lee Dockery 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee Emerit	us 40,000.	0.	0.
Dr. Michael Dockery 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		40,813.	0.	0.
Dr. Robert Wah 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee (ended 6.00	8/21) 23,291.	0.	0.
Dr. Madhav Thambisetty 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		0.	0.	0.
Dr. Richard Isaacson 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		40,000.	0.	0.

McKnight Brain Research Foundati	on		65-6301	255
Dr. Susan Pekarkse 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee 6.00	40,000.	0.	0.
Truist Bank 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee 15.00	194,789.	0.	0.
Amy Porter 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Executive Dire		0.	0.
Allison Brashear 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		40,000.	0.	0.
Patricia Boyle 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee 6.00	40,000.	0.	0.
Dr. John Brady 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee (began	n 1/22) 20,000.	0.	0.
Totals included on 990-PF, Page 6,	Part VII	590,652.	0.	0.
Form 990-PF Summary of Dire	ect Charitable A	Activities	Statement	11

Activity One

The Foundation hosts an annual conference and other events for the purpose of fostering the necessary collaboration between research scientists in each of the four McKnight Brain Institutes to achieve successful outcomes in the understanding of cognitive aging and the problems of learning and memory in the aging with the emphasis on cognitive health, prevention and treatment of cognitive decline and loss. This year's conference was designed to foster and emphasize the collaboration between the research scientists in three main areas: epigenetics, neuroimaging, and standardization of cognitive assessment measures.

See Statement 14 for additional information regarding the Foundation's activities.

To Form 990-PF, Part VIII-A, line 1 175,308.

Form 990-PF

Grant Application Submission Information Part XIV, Lines 2a through 2d

Statement

12

Name and Address of Person to Whom Applications Should be Submitted

Foundations and Endowments Specialty Practice c/o Truist Bank, 333 S. Garland Avenue, 17th Floor Orlando, FL 32801

Telephone Number

202-879-6319

Form and Content of Applications

No required format.

Any Submission Deadlines

None.

Restrictions and Limitations on Awards

The following guidelines will be used in review of applications:

- Innovative and efficient approaches to fundamental medical research of the brain on the mechanisms underlying the formation, storage and retrieval of memories, the impairment of these processes associated with aging, and the development of therapeutic strategies for the prevention and/or alleviation of these impairments in humans, intended principally for clinical application.
- Seed grants to initiate promising new projects for medical research of the brain in age related memory loss.

Form 990-PF Grant Application Submission Information Statement 13
Part XIV, Lines 2a - 2d (Continuation)

Restrictions and Limitations on Awards

- Grants to charitable organizations or institutions involved in the medical research of the brain in age related memory loss.
- Proposals for collaborative support between individual research scientists of different institutions and organizations in age related memory loss.

General Explanation

Statement 14

Additional information regarding the Foundation's activities:

The Foundation ("MBRF") has created a consortium of medical schools that work to assist MBRF to carry out its mission to alleviate age related memory loss. The schools are the medical schools at the University of Miami, University of Florida, University of Alabama at Birmingham and the University of Arizona ("MBRF Schools"). The Trustees monitor programs at the MBRF Schools and encourage and facilitate cooperation of research programs conducted at the Schools.

The Trustees also monitor grants made to the National Institute of Health and other organizations devoted to understanding and alleviating age related memory loss. See list of Grants in Part XV.

All Trustees are either MDs or PhDs. The Trustee's educational background is required to carry out Trustee duties. The Trustees are expected to understand the science being researched and applied at the MBRF Schools as well as other grantees. The Trustees estimate they spend on average a minimum of 200 hours per year monitoring and working on behalf of MBRF programs.

The nature of Trustee work continues to emphasize the research grant support relative to the programs funded to date in fulfilling the mission of the MBRF. The scientific research being funded by the MBRF is producing more research outcomes, which the Trustees must review and monitor. The review of currently funded research projects, requests for new grant support, on site visits by the trustees and review of scientific reports for each of the MBRF funded programs are very important functions of the Trustees and require continual monitoring. In order to fulfill the purpose and the mission of the MBRF, the Trustees must continuously educate themselves as to the current status and future direction of the research initiatives in learning and memory loss in the aging. The Trustees continue to expand and develop research partnerships to encourage increased interest and support of research in learning and memory in the aging.

In addition to the mission related work, the Trustees monitor and direct the investment of the MBRF endowment. This requires constant updates on economic matters and working with the MBRF investment advisor. The Trustees review monthly financial reports and set policy and asset allocation annually.

https://efile.prosystemfx.com/

Product: Exempt Name: McKnight Brain Research Foundation FEIN: *****1255

Bank Info:

Fiscal Year Begin Date: 7/1/2021

IRS Message:

Category:

IRS Center: **Ogden** e-Postmark: **5/11/2023 12:59 PM**

Notification:

eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
04/24/2023	21X:1353.0:V1	Upload Started				
04/24/2023	21X:1353.0:V1	Ready to Release by Customer				
05/11/2023	21X:1353.0:V1	Released for Transmission - Validation in Progress			136453	
05/11/2023	21X:1353.0:V1	Ready to transmit - Validation Complete				
05/11/2023	21X:1353.0:V1	Transmitted to FD	59536020231310386e37			
05/11/2023	21X:1353.0:V1	Accepted by FD on 5/11/2023				

State Category FBAR BSA ID ID Status Date Status State/Other FBAR

Plan Number:

Fiscal Year End Date: 6/30/2022

1/1 about:blank

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning JUL 1 , 2021, and ending JUN 30

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879TE for the latest information. Name of filer

65-6301255

EIN or SSN

McKnight Brain Research Foundation Melanie Cianciotto Name and title of officer or person subject to tax Trustee

Type of Return and Return Information Part I

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I

i idi i Oi					
1a	Form 990 check here ►	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)		1b
2a	Form 990-EZ check here >	b	Total revenue, if any (Form 990-EZ, line 9)		2b
За	Form 1120-POL check here	b	Total tax (Form 1120-POL, line 22)		3b
4a	Form 990-PF check here > X		Tax based on investment income (Form 990-PF, Part V, line 5)		4b 77,723
5a	Form 8868 check here >	b	Balance due (Form 8868, line 3c)		5b
6a	Form 990-T check here >	þ	Total tax (Form 990-T, Part III, line 4)		6b
7a	Form 4720 check here >	b	Total tax (Form 4720, Part III, line 1)		7b
8a	Form 5227 check here >	b	FMV of assets at end of tax year (Form 5227, Item D)		8b
9a	Form 5330 check here >	b	Tax due (Form 5330, Part II, line 19)		9b
10a	Form 8038-CP check here		Amount of credit payment requested (Form 8038-CP, Part III, line	; 22)	10b
Part	II Declaration and Signat	ure	Authorization of Officer or Person Subject to Tax		
Jnder	penalties of perjury, I declare that $oxed{X}$	l aı	m an officer of the above entity or 🔲 I am a person subject to tax v	with resp	ect to (name
of entit	y)		, (EIN) and that	at I have	examined a copy of the
comple	te. I further declare that the amount in	Pa	ules and statements, and, to the best of my knowledge and belief, th rt I above is the amount shown on the copy of the electronic return. I tronic return originator (ERO) to send the return to the IRS and to rec	l consent	to allow my

acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

ERO firm name

-				
PIN:	check	one	DOX	oniv

À	l authorize	Dalls	MOLLISON	wares	Œ	цее,	P.A.

to enter my PIN

32538

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the

IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

THIS FED TO SELECTION OF THE SELECTION 5111

Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

59536032006

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date > 04/24/23

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print McKnight Brain Research Foundation 65-6301255 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 333 S. Garland Avenue, 17th Floor return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions Orlando, FL 32801 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 1041-A 80 Form 4720 (other than individual) Form 4720 (individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) 07 Truist Bank The books are in the care of ► 333 S. Garland Ave., 17th Floor - Orlando, FL 32801 Telephone No. \blacktriangleright (407)237-4485 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this __l. If it is for part of the group, check this box ▶ ____ and attach a list with the names and TINs of all members the extension is for. May 15, 2023 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or ightharpoonup | X | tax year beginning JUL 1, 2021 , and ending JUN 30, 2022 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 83,794. any nonrefundable credits. See instructions. За

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

estimated tax payments made. Include any prior year overpayment allowed as a credit.

Form **8868** (Rev. 1-2022)

3b

53,794.

https://efile.prosystemfx.com/

Product: Exempt Extension
Name: McKnight Brain Research Foundation
FEIN: *****1255

Bank Info:

Fiscal Year Begin Date: 7/1/2021

IRS Message:

Category:

IRS Center: **Ogden** e-Postmark: **10/11/2022 8:08 AM**

Notification:

eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
10/10/2022	21X:1353.0:V1	Upload Started				
10/10/2022	21X:1353.0:V1	Ready to Release by Customer				
10/11/2022	21X:1353.0:V1	Released for Transmission - Validation in Progress			kvarnum	
10/11/2022	21X:1353.0:V1	Ready to transmit - Validation Complete				
10/11/2022	21X:1353.0:V1	Transmitted to FD	5953602022284032ee09	(\$30,000.00)		
10/11/2022	21X:1353.0:V1	Accepted by FD on 10/11/2022				

ID Status Date Status State/Other State Category FBAR FBAR BSA ID

Plan Number:

Fiscal Year End Date: 6/30/2022

about:blank 1/1

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

June 30, 2022

McKnight Brain Research Foundation 333 S. Garland Avenue, 17th Floor Orlando, FL 32801
Batts Morrison Wales & Lee, P.A. 801 North Orange Avenue, Suite 800 Orlando, FL 32801
Overpayment of \$50,303. The entire overpayment has been applied to the estimated tax payments.
No amount is due.
Not applicable
Not applicable
This return has been electronically filed. Do not mail a paper copy of the return to the IRS.

Form 990-T	ո	OMB No. 1545-0047		
	(and proxy tax under section 6033(e))	、	2021	
	For calendar year 2021 or other tax year beginning $\frac{JUL~1,~2021}{}$, and ending $\frac{JUN~30,~202}{}$	<u>''</u> ·	ZUZ I	
Department of the Treasury Internal Revenue Service	 ▶ Go to www.irs.gov/Form990T for instructions and the latest information. ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) 		Open to Public Inspection for 501(c)(3) Organizations Only	
A Check box if address changed.	Name of organization (Check box if name changed and see instructions.)	DEmpl	loyer identification number	
B Exempt under section	Print McKnight Brain Research Foundation	6	5-6301255	
X 501(c)(3)	or Number, street, and room or suite no. If a P.O. box, see instructions.		p exemption number instructions)	
408(e) 220(e)	Type 333 S. Garland Avenue, 17th Floor	(300)	mad dedona)	
408A 530(a)	City or town, state or province, country, and ZIP or foreign postal code	1	N/A	
529(a) 529A	Orlando, FL 32801	F 🗀	Check box if	
	C Book value of all assets at end of year	1	an amended return.	
G Check organization	type ▶ 501(c) corporation X 501(c) trust 401(a) trust Other trust			
H Check if filing only to	Claim credit from Form 8941 Claim a refund shown on Form 2439			
Check if a 501(c)(3)	organization filing a consolidated return with a 501(c)(2) titleholding corporation			
	attached Schedules A (Form 990-T)		1	
	was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	▶∟	Yes X No	
	ame and identifying number of the parent corporation.			
	re of ▶ Truist Bank Telephone number ▶ (407)237-4485	
Part I Total Unr	elated Business Taxable Income			
1 Total of unrelated	business taxable income computed from all unrelated trades or businesses (see		600 000	
instructions)		1	600,899.	
2 Reserved		2	600 000	
3 Add lines 1 and 2		3	600,899.	
	utions (see instructions for limitation rules) Stmt 15 Stmt 16	4	359,939.	
5 Total unrelated but	siness taxable income before net operating losses. Subtract line 4 from line 3	5	240,960.	
	operating loss. See instructions	6		
7 Total of unrelated	business taxable income before specific deduction and section 199A deduction.		0.40 0.60	
Subtract line 6 fro		7	240,960.	
8 Specific deduction	n (generally \$1,000, but see instructions for exceptions)	8	1,000.	
9 Trusts. Section 19	99A deduction. See instructions	9	4 000	
	Add lines 8 and 9	10	1,000.	
11 Unrelated busine	ss taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7,		000 000	
		11	239,960.	
Part II Tax Com			1	
	kable as corporations. Multiply Part I, line 11 by 21% (0.21)	1		
	trust rates. See instructions for tax computation. Income tax on the amount on		05 007	
Part I, line 11 from			85,987.	
3 Proxy tax. See ins		3		
	s. See instructions	4		
	um tax (trusts only)	5		
-	liant facility income. See instructions	6	QE 007	
	through 6 to line 1 or 2, whichever applies	7	85,987.	
LHA For Paperwork F	Reduction Act Notice, see instructions.		Form 990-T (2021)	

Part	III Tax and Payments						
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a					
b	Other credits (see instructions)	1b					
С	General business credit. Attach Form 3800 (see instructions)						
d	Credit for prior year minimum tax (attach Form 8801 or 8827)						
e	Total credits. Add lines 1a through 1d	·····		1e			
2	Subtract line 1e from Part II, line 7			2	8	5,9	87.
3	Other amounts due. Check if from: Form 4255 Form 8611 For	m 8697	 Form 8866	1		- , -	
Ū	Other (attach statement)			3			
4	Total tax. Add lines 2 and 3 (see instructions). Check if includes tax pr			•			
7		•	under	4	8	5 9	87.
_	section 1294. Enter tax amount here Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (5		5 , 5	0.
5			41,790				••
6a	Payments: A 2020 overpayment credited to 2021		94,500				
b	2021 estimated tax payments. Check if section 643(g) election applies		94,300	-			
С.	Tax deposited with Form 8868			-			
d	Foreign organizations: Tax paid or withheld at source (see instructions)			-			
е	Backup withholding (see instructions)			-			
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		_			
g	Other credits, adjustments, and payments: Form 2439	-					
_	Form 4136 Other Total				1 2	<i>c</i> 2	0.0
7	Total payments. Add lines 6a through 6g					6,2	90.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached			8			
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			9		~ ~	<u> </u>
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount over the state of the st			10		0,3	03.
11 Part	Enter the amount of line 10 you want: Credited to 2022 estimated tax ► IV Statements Regarding Certain Activities and Other Inform			11			<u> </u>
1	At any time during the 2021 calendar year, did the organization have an interest in	ŭ		•	+	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," to	-	•				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter	the name of the	foreign countr	У			v
_	here •				—— l		X
2	During the tax year, did the organization receive a distribution from, or was it the	-			ŀ		X
	foreign trust?						
•	If "Yes," see instructions for other forms the organization may have to file.		. •				
3	Enter the amount of tax-exempt interest received or accrued during the tax year				— I		
4	Enter available pre-2018 NOL carryovers here \$ Do not				,		
_	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here			art I, line	4.		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017	•					
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17						
	Business Activity Code		ost-2017 NOL	carryove	r		
		\$					
	Bull a second se	\$					Х
6a	Did the organization change its method of accounting? (see instructions)				····· }		
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 99	90-PF, or Form 1	128? If "No,"				
Dort	explain in Part V V Supplemental Information						Ь
Part							
Provide	the explanation required by Part IV, line 6b. Also, provide any other additional info	ormation. See ins	tructions.				
-							
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules	and statements, and to	the best of my kno	wledge and	belief, it is tr	rue.	
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which p				,		
Here	Trust	-ee			discuss this		with
	Signature of officer Date Title				shown below? X Ye		No
		Data	Check			<u> </u>	
	Print/Type preparer's name Preparer's signature	Date		if PTIN ₁			
Paid	Kaylyn A. Varnum Kaylon Vannum	04/24/23	self- employed		1691	Q 7 F	
Prepa	rer Finders > Patta Marriago Wallog C Loo D				(-419)		
Use C	only Firm's name ▶ Batts Morrison Walles & Lee, P.		Firm's EIN	- 40	, - 4 19.	20T	
	801 North Orange Avenue, Sui	LLE 000	Dhana	407 5	170 <i>6</i>	000	
100=:::	Firm's address ► Orlando, FL 32801		Phone no.	4 U / - /	770-6		
123711 0	I-3 I-2Z				Form 99	7U-1 ((2021)

Form 990-T	Contributions	Statement	15
Description/Kind of Property	Method Used to Determine FMV	Amount	
American Brain Foundation American Federation for Aging Foundation for the NIH	N/A N/A N/A	330,0 534,5 1,000,0	00.
Total to Form 990-T, Part I, 1:	ine 4	1,864,5	00.

Form 990-T	Co	ontributions Summary	У	Statement	16
Carryover of 1	Prior Years Un	used Contributions	- 60% Limit		
For Tax Year For Tax Year For Tax Year	r 2019	1,351,009 921,527			
Total Carryove	er Year 60% Cont	ributions	2,272,536 1,864,500		
	utions Availab e Limitation as		4,137,036 359,939		
Excess 60% Cor Total Excess (3,777,097 3,777,097		
Allowable Cont	tributions Ded	uction		359,	939
Taxable Income	e for limitation	on after 60% contri	butions		0
Carryover of l	Prior Years Un	used Contributions	- 50% Limit		
For Tax Year	r 2017 r 2018 r 2019	3,198,793 2,191,526 1,632,253			
Total Carryove	er Year 50% Cont	ributions	7,022,572		
	utions Availab e Limitation as	_	7,022,572		
Excess 50% Cor Total Excess (7,022,572		
Allowable Cont	tributions Ded	uction			0
Taxable Income	e for limitation	on after 50% Contri	bution		0
Qualified Cash	h Contributions	s - 100% Limit			
	Year 100% Cont e Limitation as		239,960		
Excess 100% Co	ontributions		0		
Allowable Cont	tribution Deduc	ction			0
Total Contribu	ution Deduction	ı		359,	939

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

A 1	lame of the organization McKnight Brain Research Foundati	on		65-63		ation number 55
<u>ς</u> ι	Jnrelated business activity code (see instructions) ▶ 90110	1		D Sequence	e: Î	L of 1
<u>E [</u>	Describe the unrelated trade or business Investment i	n pa	rtnerships			
Pa	Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowances c Balance ▶	1c				
2	Cost of goods sold (Part III, line 8)	2				
3	Gross profit. Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Sch D (Form 1041 or Form					
	1120)). See instructions	4a	588,683.			588,683.
	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach		24 452			0.4.450
	statement) Statement 17	5	34,452.			34,452.
6	Rent income (Part IV)	6				
7	Unrelated debt-financed income (Part V)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8				
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9				
10	Exploited exempt activity income (Part VIII)	10				
11	Advertising income (Part IX)	11				
12	Other income (see instructions; attach statement)	12	602 125			623,135.
<u>13</u>	Total. Combine lines 3 through 12	13	623,135.			023,133.
Pa	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in		r limitations on ded	ductions. Ded	uction	s must be
1	Compensation of officers, directors, and trustees (Part X)				1	
2	Salaries and wages				2	
3	Repairs and maintenance				3	
4	Bad debts				4	
5	Interest (attach statement). See instructions				5	
6	Taxes and licenses				6	
7	Depreciation (attach Form 4562). See instructions		7			
8	Less depreciation claimed in Part III and elsewhere on return		<u>8a</u>		8b	
9	Depletion				9	
10	Contributions to deferred compensation plans				10	
11	Employee benefit programs				11	
12	Excess exempt expenses (Part VIII)				12	
13	Excess readership costs (Part IX)		Coc C+-+		13	22 226
14	Other deductions (attach statement)				14	22,236.
15					15	22,236.
16	Unrelated business income before net operating loss deduction. S					600 000
4-	column (C)				16	600,899.
17	Deduction for net operating loss. See instructions				17	<u> </u>
18	Unrelated business taxable income. Subtract line 17 from line 16	·			18	600,899.

Part	III Cost of Goods Sold Enter met	thod of inventory valuation	on 🕨		
1	Inventory at beginning of year			1	
2	Purchases			1 2 1	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter				
9	Do the rules of section 263A (with respect to property	produced or acquired for	or resale) apply to the	e organization?	Yes No
Part	IV Rent Income (From Real Property an	d Personal Proper	ty Leased with F	Real Property)	
1	Description of property (property street address, city,	state, ZIP code). Check	if a dual-use. See ins	tructions.	
	A 🔛				
	В 🔲				
	c 🔲				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				_
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns	A through D. Enter here	and on Part I, line 6,	column (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through D. E		ine 6, column (B)	>	0.
Part '	V Unrelated Debt-Financed Income (s	see instructions)			
1	Description of debt-financed property (street address,	city, state, ZIP code). C	heck if a dual-use. Se	ee instructions.	
	A <u> </u>				
	В				
	c <u> </u>				
	D 📖				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5		%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). Enter here and on Par	t I, line 7, column (A)	>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A th				0.
11	Total dividends-received deductions included in line	e 10		▶	0.

Page 3

Part	VI Interest, Annu	iities, R	oyalties, and Re	ents fror	m Contro	led O	rganization	S (see ir	struct	ions)	<u> </u>
	Exempt Controlled Organization							izatior	ns		
	1. Name of controlle	d	2. Employer	3. Net	unrelated	4. Tota	al of specified	5. Part o			Deductions directly
	organization		identification		ne (loss)	payn	nents made	that is inc			connected with
			number	(see ins	structions)			tion's gro			income in column 5
<u>(1)</u>											
(2)											
(3)											
<u>(4)</u>			<u> </u>	L		L					
	. Tavabla laggera	0			Controlled O		1	- f l	0	44 5	Na ali cadi a sa ali ca addi c
′	. Taxable Income		Net unrelated ncome (loss)		otal of specif yments mad		that is inc	of column luded in th			eductions directly onnected with
			e instructions)	l pa	ymems mau	-	controlling		on's		ome in column 10
/4\		(00)					gross	income			
(1) (2)											
(3)											
(4)											
(- /				•			Add colum	ns 5 and	10.	Add	columns 6 and 11.
							Enter here		rt I,		here and on Part I,
							line 8, c	olumn (A)		lin	e 8, column (B)
Totals						>			0.		0.
Part	VII Investment	ncome	of a Section 50	1(c)(7), (1		nization (s	ee instruct	tions)		
	1. Desc	ription of	income		2. Amou		3. Deduction			asides	5. Total deductions and set-asides
					incon	ie	directly connotated (attach states		ach si	atement	(add cols 3 and 4)
/4\											
(1) (2)											
(3)											
(4)											
('/					Add amou	ınts in					Add amounts in
					column 2.						column 5. Enter
					here and or line 9, colu						here and on Part I, line 9, column (B)
Totals					,	Ò.					0.
Part	VIII Exploited E	xempt A	Activity Income	Other 7	Than Adv	ertisin	g Income (see instru	ctions)		
1	Description of exploite	ed activity:									
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	er here and c	n Part I,	, line 10, colun	nn (A)		2	
3	Expenses directly con	nected wi	th production of unr	elated bus	iness incom	e. Enter	here and on F	art I,			
	line 10, column (B)									3	
4	Net income (loss) from										
_	lines 5 through 7									4	
5	Gross income from ac									5	
6	Expenses attributable									6	
7	Excess exempt expen									_	
	4. Enter here and on F	art II, IINE	12							7	

Schedule A (Form 990-T) 2021

Part	IX Advertising Income				
1	Name(s) of periodical(s). Check box if report	ing two or more periodicals on a	consolidated bas	sis.	
	A 🔲				
	В				
	c 🗆				
	D				
Enter a	amounts for each periodical listed above in the	e corresponding column.			
	·	Α Α	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and o		•		0.
а	G	, , , , , , , , , , , , , , , , , , , ,			
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and o		•		0.
	G	, , , , , , , , , , , , , , , , , , , ,			
4	Advertising gain (loss). Subtract line 3 from	ine			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column	in			
	line 4 showing a loss or zero, do not comple				
	lines 5 through 7, and enter zero on line 8	I			
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less that				
	line 5, subtract line 6 from line 5. If line 5 is I	ess			
	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain	on			
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the	greater of the line 8a, columns to	otal or zero here a	nd on	
	Part II, line 13			>	0.
Part	X Compensation of Officers, D	rectors, and Trustees (s	ee instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
(1)				%	
(2)				%	
(3)				%	
(4)				%	
					•
	Enter here and on Part II, line 1				0.
Part	XI Supplemental Information (s	ee instructions)			

Form 990-T (A)	Income (Loss) from Partnerships	Statement 17
Description		Net Income or (Loss)
Lighthouse Global Long Lighthouse Credit Oppo Lighthouse Diversified HCP Private Equity Fur Harbourvest 2019 Globa Harbourvest 2020 Globa Harbourvest 2021 Globa Strategic Investors Fu	ortunities Fund, L.P. d Fund (QP) II, L.P. nd V, LP al Fund LP al Fund LP al Fund LP	52,668. -20,460. 10,124. -315. -2,057. -1,379. -4,391. 262.
Total Included on Sche	edule A, Part I, line 5	34,452.
Form 990-T (A)	Other Deductions	Statement 18
Description		Amount
Legal fees Accounting fees Other Professional fee	es	2,194. 5,294. 14,748.
Total to Schedule A, H	Part II, line 14	22,236.

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses ► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2021

Employer identification number Name of estate or trust

McKnight Brain Research Foundation 65-6301255 Yes X No Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Note: Form 5227 filers need to complete only Parts I and II.

Par	t I Short-Term Capital Gains and Losses-Gen	erally Assets H	eld One Year o	r Less (see	instrı	uctions)
	tructions for how to figure the amounts to enter on the lines below. rm may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	ts from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1 a	Totals for all short-term transactions reported on Form 1099-B for					
	which basis was reported to the IRS and for which you have no					
	adjustments (see instructions). However, if you choose to report all					
	these transactions on Form 8949, leave this line blank and go to line 1b					
	Totals for all transactions reported on Form(s) 8949 with					
	Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	4			4	
5	Net short-term gain or (loss) from partnerships, S corporations, and othe	ar actatae or tructe	See Statem	ent 19	5	582,119.
	Short-term capital loss carryover. Enter the amount, if any, from line 9 of			10110 15	J	302,113.
	Carryover Worksheet	•			6	(
	Net short-term capital gain or (loss). Combine lines 1a through 6 in colu				-	<i></i>
	column (3), on page 2	` '	•	•	7	582,119.
Par					-	
See ins	tructions for how to figure the amounts to enter on the lines below.	(d)	(e)	(g)		(h) Gain or (loss)
This fo	rm may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, l line 2, columi	from Part II,	Sùbtract column (é) from column (d) and combine the result with column (g)
8 a	Totals for all long-term transactions reported on Form 1099-B for					
,	which basis was reported to the IRS and for which you have no					
	adjustments (see instructions). However, if you choose to report all					
	these transactions on Form 8949, leave this line blank and go to line 8b					
	Totals for all transactions reported on Form(s) 8949 with					
	Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with					
	Box E checked					
	Totals for all transactions reported on Form(s) 8949 with					
	Box F checked					
	Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and				11	6 564
	Net long-term gain or (loss) from partnerships, S corporations, and other				12	6,564.
	Capital gain distributions				13	
14	Gain from Form 4797, Part I				14	
	Long-term capital loss carryover. Enter the amount, if any, from line 14 o					
	Carryover Worksheet				15	()
	Net long-term capital gain or (loss). Combine lines 8a through 15 in col	` '	•	_		C 5 C 4
	column (3), on page 2				16	6,564.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2021

Schedule D (Form 1041)	2021 Investment	in	partnerships
------------------------	-----------------	----	--------------

65-	63	301	125	5

Page 2

F		Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
		Caution: Read the instructions before completing this part.			or trust's	
17	Net short-t	erm gain or (loss)	17		582,119.	582,119.
18		erm gain or (loss):				
	a Total for ye	ar	18a		6,564.	6,564.
	b Unrecaptur	ed section 1250 gain (see line 18 of the worksheet)	18b			
	c 28% rate ga	ain	18c			
19	Total net g	ain or (loss). Combine lines 17 and 18a	19		588,683.	588,683.

Note: If line 19, col (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, col (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

Part IV | Capital Loss Limitation

20	Enter here and enter as a (loss) on Forn	n 1041, line	e 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:		
;	a The loss on line 19, column (3) or	b \$3,000)	20	

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if:

- Either line 18b, col. (2), or line 18c, col. (2), is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero, or
- There are amounts on lines 4e and 4g of Form 4952.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2), or line 18c, col. (2), is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 9	990-T,	21				
22	Enter the smaller of line 18a or 19 in column (2)						
	but not less than zero	22					
23	Enter the estate's or trust's qualified dividends from						
	Form 1041, line 2b(2) (or enter the qualified dividends						
	included in income in Part I of Form 990-T)	23					
24	Add lines 22 and 23	24					
	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g; otherwise, enter -0-	25					
26	Subtract line 25 from line 24. If zero or less, enter -0			26			
27	Subtract line 26 from line 21. If zero or less, enter -0			27			
28	Enter the smaller of the amount on line 21 or \$2,700			28			
29	Enter the smaller of the amount on line 27 or line 28			29			
30	Subtract line 29 from line 28. If zero or less, enter -0 The	his am	ount is taxed at 0%		<u></u>	30	
31	Enter the smaller of line 21 or line 26			31			
32	Subtract line 30 from line 26			32			
33	Enter the smaller of line 21 or \$13,250			33			
	Add lines 27 and 30						
35	Subtract line 34 from line 33. If zero or less, enter -0			35			
36	Enter the smaller of line 32 or line 35			36			
	Multiply line 36 by 15% (0.15)				>	37	
38	Enter the amount from line 31			38			
39	Add lines 30 and 36			39			
40	Subtract line 39 from line 38. If zero or less, enter -0			40			
41	Multiply line 40 by 20% (0.20)				>	41	
42	Figure the tax on the amount on line 27. Use the 2021 Ta	ax Rate	Schedule for Estates				
	and Trusts (see the Schedule G instructions in the Instru	ctions	for Form 1041)	42			
43	Add lines 37, 41, and 42			43			
44	Figure the tax on the amount on line 21. Use the 2021 Ta	ax Rate	Schedule for Estates				
	and Trusts (see the Schedule G instructions in the Instru	ctions	for Form 1041)	44			
45	Tax on all taxable income. Enter the smaller of line 43 of	or line	44 here and on Form 1041	, Schedule	e		
	G, Part I, line 1a (or Form 990-T, Part II, line 2)					45	

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

McKnight Brain Research Foundation

65-6301255

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II

Income or Loss From Partnerships and S Corporations - Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on

	computation. If you report a loss f line 28 and attach Form 6198. Se	•	·		` '			•		
27	Are you reporting any loss not allowed in passive activity (if that loss was not reposee instructions before completing this s	rted on Form 8582), or un	reimburse	d partners		swered "		X No		
28	(a) Name		(b) _{Enter} P for partnership; S for S corporation	(C) Check if foreign	(d) Employer identification number	(e basi	Check if s computation is required	(f) Check if any amount is not at risk		
Α	See Statement 21									
В										
С										
D										
	Passive Income and Lo		(i) Noor	annius Inna	Nonpassive Income					
	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	allov	passive loss ved (see dule K-1)	(j) Section 179 expendeduction from Form 4		() Nonpassi from Sche			
Α										
В										
C										
<u>D</u>	Takala	63,054.								
29a	Totals 28,602									
b 30						30	<u> </u>	3,054.		
31	Add columns (g), (i), and (j) of line 29b						(2	8,602.		
32	Total partnership and S corporation in						3	4,452.		
	rt III Income or Loss From Esta							•		
33								nployer on number		
Α		+								
В										
	Passive Incom	e and Loss			Nonpassive	Income	and Loss			
	(c) Passive deduction or loss allowe (attach Form 8582 if required)		(e) Deduction or loss from Schedule K-1			((f) Other income from Schedule K-1			
Α										
В										
34a	Totals									
b	Totals									
35						35	1,			
36	Add columns (c) and (e) of line 34b					36	(
37 Do	Total estate and trust income or (loss). rt IV Income or Loss From Real			nt Conc	huite (DEMICe) - Da	37	Holder			
га	TETY INCOME OF LOSS From Near	(b) Employer		ss inclusio			(e) Incom	o from		
38	(a) Name	identification number	from Sch	edules Q, nstruction	line (net loss) from	9	Schedules			
39 Do	Combine columns (d) and (e) only. Enter	the result here and includ	le in the to	tal on line	41 below	39				
	rt V Summary	4005 41				1	1			
40 41	Net farm rental income or (loss) from For Total income or (loss). Combine lines 26, 32,	, ,				<u>40</u> 41	7	4,452.		
41 42	Reconciliation of farming and fishing income					41		-, - , -, -, -, -, -, -, -, -, -, -, -, -, -,		
42	reported on Form 4835, line 7; Schedule K-1 (_							
	(Form 1120-S), box 17, code AD; and Schedul				42					
43	Reconciliation for real estate profession			SUUCUONS.	-					
		•		ywhere						
		professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities								

in which you materially participated under the passive activity loss rules .

SCHEDULE I (Form 1041)

Alternative Minimum Tax - Estates and Trusts

► Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

Department of the Treasury Internal Revenue Service Name of estate or trust

Employer identification number

Mc	Knight Brain Research Foundation	65-6	65-6301255		
Pá	art I Estate's or Trust's Share of Alternative Min	imum Taxable Inc	ome	•	
1	Adjusted total income or (loss) (from Form 1041, line 17). ESB1	Ts, see instructions		1	240,960.
2	Interest			2	
3					
4	Refund of taxes)
5	Depletion (difference between regular tax and AMT)	5			
6	Net operating loss deduction. Enter as a positive amount				
7	Interest from specified private activity bonds exempt from the				
8	Qualified small business stock (see instructions)				
9	Exercise of incentive stock options (excess of AMT income over	er regular tax income)		9	
10	Other estates and trusts (amount from Schedule K-1 (Form 10-	41), box 12, code A)		10	
11	Disposition of property (difference between AMT and regular to	ax gain or loss)		11	
12	Depreciation on assets placed in service after 1986 (difference	e between regular tax an	d AMT)	12	
13	Passive activities (difference between AMT and regular tax inc	13			
14	Loss limitations (difference between AMT and regular tax inco	14			
15	Circulation costs (difference between regular tax and AMT)			15	
16	Long-term contracts (difference between AMT and regular tax				
17	Mining costs (difference between regular tax and AMT)			17	
18	Research and experimental costs (difference between regular	tax and AMT)		18	
19	Income from certain installment sales before January 1, 1987			19 ()
20	Intangible drilling costs preference			20	
21	Other adjustments, including income-based related adjustmen	ts		21	
22	Alternative tax net operating loss deduction (See the instruction	ons for the limitation that	t applies.)	22 (
23	Adjusted alternative minimum taxable income. Combine lines	1 through 22		23	240,960.
	Note: Complete Part II below before going to line 24.				
24		N/A	24		
25	Estate tax deduction (from Form 1041, line 19)	N/A	25		
26	Add lines 24 and 25			26	
27	Estate's or trust's share of alternative minimum taxable income	e. Subtract line 26 from	line 23	27	240,960.
	If line 27 is:				

- \$25,700 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax.
- Over \$25,700, but less than \$188,450, go to line 43.
- \$188,450 or more, enter the amount from line 27 on line 49 and go to line 50.
- FSRTs see instructions

Pa	rt II Income Distribution Deduction on a Minimum Tax Basis N/A		
28	Adjusted alternative minimum taxable income (see instructions)	. 28	
29	Adjusted tax-exempt interest (other than amounts included on line 7)	. 29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-		
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable		
	purposes (from Form 1041, Schedule A, line 4)	. 31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)		
33	Capital gains computed on a minimum tax basis included on line 23	. 33 ()
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount		
35	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero		
	or less, enter -0-	. 35	
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	. 36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	. 37	
38	Total distributions. Add lines 36 and 37	. 38	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)		·
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38.	. 40	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) 2021

66

6,564.

66 Enter the smaller of line 64 or line 65. This amount is taxed at 0%

67 Subtract line 66 from line 65

Schedule I (Form 1041) 2021 Page **3**

Pa	art IV Line 50 Computation Using Maximum Capital Gains Ra	ates (con	tinued)		
	Maximum amount subject to rates below 20%		\$13,250		
69	Enter the amount from line 64	. 69			
	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the				
	Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax				
	Worksheet, whichever applies (as figured for the regular tax). If you				
	didn't complete Schedule D or either worksheet for the regular tax, enter				
	the amount from Form 1041, line 23; if zero or less, enter -0-	70	233,396.		
71	Add line 69 and line 70	. 71	233,396.		
	Subtract line 71 from line 68. If zero or less, enter -0-				
73	Enter the smaller of line 67 or 72	. 73			
	Multiply line 73 by 15% (0.15)		>	74	
75	Add lines 66 and 73	. 75			
	If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81.		go to line 76.		
76	Subtract line 75 from line 65	. 76	6,564.		
	Multiply line 76 by 20% (0.20)		>	77	1,313.
	If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Other				
78	Add lines 60, 75, and 76	78			
	Subtract line 78 from line 55				
	Multiply line 79 by 25% (0.25)		>	80	
	Add lines 61, 74, 77, and 80			81	62,946.
	If line 55 is \$199,900 or less, multiply line 55 by 26% (0.26). Otherwise, multiply				
	and subtract \$3,998 from the result			82	63,471.
83	Enter the smaller of line 81 or line 82 here and on line 50			83	62,946.

Schedule I (Form 1041) 2021

Schedule D Net S	Statement	19		
Description of Activity			Gain or I	css
Lighthouse Global Long/S Lighthouse Credit Opport Lighthouse Diversified D Harbourvest 2019 Global Harbourvest 2020 Global	tunities Fund, L. Fund (QP) II, L.P Fund LP		145,8 289,1 145,1	789.
Total to Schedule D, Par	rt I, line 5		582,3	119.
	Long-Term Gain or Loss from tnerships and S-Corporations		Statement	20
Description of Activity		Gain or Loss	28% Ga	in
HCP Private Equity Fund Harbourvest 2019 Global Harbourvest 2020 Global Harbourvest 2021 Global	Fund LP Fund LP	78. 5,169. 1,252. 65.		
Total to Schedule D, Par				

Schedule	E I	ncome or	(Loss) fro	m Partners	hips and S C	orps Sta	atement 21
Name							
Emp ID N	Io .						
X if Code Fr	Basis Comp n Req	Any Not at Risk	Passive Loss	Passive Income	Nonpassive Loss	Sec. 179 Deduction	
Harboury	rest 2019	Global	Fund LP				
P Harbourv	rest 2020	Global	2,057. Fund LP				
P Harbourv	rest 2021	Global	1,379. Fund LP				
P HCP Priv	ate Equi	ty Fund	4,391. V, LP				
P Lighthou	ıse Credi	t Opport	315. cunities Fun	ıd, L.P.			
P Lighthou	ıse Diver	sified H	20,460. Fund (QP) II	., L.P.			
P Lighthou	ıse Globa	l Long/S	Short Fund,	10,124. L.P.			
P Strategi	.c Invest	ors Fund	l X, L.P.	52,668.			
P				262.			
Totals t	o Sch. E	, ln. 29	28,602.	63,054.			

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2021

Employer identification number Name of estate or trust

Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (see instructions)

McKnight Brain Research Foundation

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

65-6301255

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Yes X No

Note: Form 5227 filers need to complete only Parts I and II.

	structions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustmento gain or loss	ıts	(h) Gain or (loss) Subtract column (e) from column (d) and
This f	orm may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum	Part I,	combine the result with column (g)
1 a	Totals for all short-term transactions reported on Form 1099-B for					
	which basis was reported to the IRS and for which you have no					
	adjustments (see instructions). However, if you choose to report all					
	these transactions on Form 8949, leave this line blank and go to line 1b					
1 _b	Totals for all transactions reported on Form(s) 8949 with					
	Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with					
	Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with					
	Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 882-	4			4	
7	onort term capital gain of (1033) from 1 orins 4004, 0232, 0701, and 002	-			-	
5	Net short-term gain or (loss) from partnerships, S corporations, and other	er estates or trusts	See Statem	ment 22	5	582,119.
6	Short-term capital loss carryover. Enter the amount, if any, from line 9 of			, ,		
-	Carryover Worksheet		6	()		
7	Net short-term capital gain or (loss). Combine lines 1a through 6 in colu		/			
	· · · · · · · · · · · · · · · · · · ·				7	582,119.
Pa	rt II Long-Term Capital Gains and Losses-General	erally Assets He	eld More Than	One Year (s	ee in	structions)
	structions for how to figure the amounts to enter on the lines below.	(d)	(e)	(g)		(h) Gain or (loss)
		Proceeds	Cost	Adjustmen to gain or loss		Sùbtract column (é) from column (d) and
This f	orm may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Form(s) 8949,	Part II,	combine the result
				line 2, colum	n (g)	with column (g)
8 a	Totals for all long-term transactions reported on Form 1099-B for					
	which basis was reported to the IRS and for which you have no					
	adjustments (see instructions). However, if you choose to report all					
	these transactions on Form 8949, leave this line blank and go to line 8b					_
8 b	Totals for all transactions reported on Form(s) 8949 with		1	1		
	Totals for all transactions reported on Form(s) 0343 with					
	Box D checked					
9						
9	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked					
9	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with					
	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked					
	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an				11	
10	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked				11 12	6,564.
10	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an	r estates or trusts	See Statem	ment 23		6,564.
10 11 12	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an Net long-term gain or (loss) from partnerships, S corporations, and othe Capital gain distributions Gain from Form 4797, Part I	r estates or trusts	See Statem	ment 23	12	6,564.
10 11 12 13	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an Net long-term gain or (loss) from partnerships, S corporations, and othe Capital gain distributions	r estates or trusts	See Statem	ment 23	12 13	6,564.
10 11 12 13 14	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an Net long-term gain or (loss) from partnerships, S corporations, and othe Capital gain distributions Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of Carryover Worksheet	r estates or trusts of the 2020 Capital Los	See Staten	nent 23	12 13	6,564.
10 11 12 13 14	Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an Net long-term gain or (loss) from partnerships, S corporations, and othe Capital gain distributions Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 or	r estates or trusts of the 2020 Capital Los	See Staten	nent 23	12 13 14	6,564.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2021

Schedule) (Form 1041) 2021 McKnight Brain Research Fou	ndat	ion	65-63	01255 Page 2
Part I			(1) Beneficiaries	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this part.			or trust's	. ,
17 Net	short-term gain or (loss)	17		582,119	. 582,119.
18 Net	long-term gain or (loss):				
a Tota	for year	18a		6,564	6,564.
b Unre	captured section 1250 gain (see line 18 of the worksheet)	18b			
c 28%	rate gain	18c			
19 Tota	I net gain or (loss). Combine lines 17 and 18a	19		588,683	. 588,683.
	ne 19, col (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule				
gains, go	to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, co.	mplete F	Part IV and the Capita	I Loss Carryover W	orksheet, as necessary.
Part I	V Capital Loss Limitation				
20 Ente	r here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part	I, line 4c	, if a trust), the smalle i	of:	_
a The	loss on line 19, column (3) or b \$3,000			20 ()
Note: If the	e loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, yover Worksheet in the instructions to figure your capital loss carryover.	line 23 (or Form 990-T, Part I	, line 11), is a loss,	complete the Capital
Part \	Tax Computation Using Maximum Capital Gains Ra	ates			
Form 104	1 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or		nt is entered in Part I o	or Part II and there is	an entry on Form 1041.
	and Form 1041, line 23, is more than zero.	a a			
	Skip this part and complete the Schedule D Tax Worksheet in the instructions	if:			
	r line 18b, col. (2), or line 18c, col. (2), is more than zero, or				
	Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero, or				
• There	e are amounts on lines 4e and 4g of Form 4952.				
Form 990	-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified div	idends ar	e included in income ir	Part I of Form 990-	T,and Form 990-T, Part I,
	more than zero. Skip this part and complete the Schedule D Tax Worksheet in the				
21 Enter	taxable income from Form 1041, line 23 (or Form 990-T, Part I, line11)	21	239,	960.	
22 Enter	the smaller of line 18a or 19 in column (2)				
but n	ot less than zero 22 6, 56	4.			
23 Enter	the estate's or trust's qualified dividends from				
Form	1041, line 2b(2) (or enter the qualified dividends				
includ	led in income in Part I of Form 990-T)23				
24 Add li	nes 22 and 23 24 6 , 5 6	4.			
	estate or trust is filing Form 4952, enter the				
amou	nt from line 4g; otherwise, enter -0 ≥ 25	0.			
26 Subtr	act line 25 from line 24. If zero or less, enter -0-	26		564.	
27 Subtr	act line 26 from line 21. If zero or less, enter -0-	27			
28 Enter	the smaller of the amount on line 21 or \$2,700	28	2,	700.	
			2	700	

	but not less than zero	22	6,564	•			
23	Enter the estate's or trust's qualified dividends from						
	Form 1041, line 2b(2) (or enter the qualified dividends						
	included in income in Part I of Form 990-T)	23					
24	Add lines 22 and 23	24	6,564	•			
	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g; otherwise, enter -0-	25	0 .	•			
26	Subtract line 25 from line 24. If zero or less, enter -0			26	6,564.		
27	Subtract line 26 from line 21. If zero or less, enter -0			27	233,396.		
28	Enter the smaller of the amount on line 21 or \$2,700			28	2,700.		
29	Enter the smaller of the amount on line 27 or line 28			29	2,700.		
30	Subtract line 29 from line 28. If zero or less, enter -0 The	his amo	ount is taxed at 0%		>	30	0.
31	Enter the smaller of line 21 or line 26			31	6,564.		
32	Subtract line 30 from line 26			32	6,564.		
33	Enter the smaller of line 21 or \$13,250			33	13,250.		
34	Add lines 27 and 30			34	233,396.		
35	Subtract line 34 from line 33. If zero or less, enter -0				0.		
36	Enter the smaller of line 32 or line 35			36			
37	Multiply line 36 by 15% (0.15)					37	
38	Enter the amount from line 31			38	6,564.		
39	Add lines 30 and 36						
40	Subtract line 39 from line 38. If zero or less, enter -0- $_{\rm}$			40	6,564.		
41	Multiply line 40 by 20% (0.20)				>	41	1,313.
42	Figure the tax on the amount on line 27. Use the 2021 Ta	ax Rate	Schedule for Estates				
	and Trusts (see the Schedule G instructions in the Instru	ctions	for Form 1041)	42	84,674.		
43	Add lines 37, 41, and 42			43	85,987.		
44	Figure the tax on the amount on line 21. Use the 2021 Ta	ax Rate	Schedule for Estates				
	and Trusts (see the Schedule G instructions in the Instru	ctions	for Form 1041)	44	87,103.		
45	Tax on all taxable income. Enter the smaller of line 43	or line ·	44 here and on Form 1041, S	Schedule	}		

G, Part I, line 1a (or Form 990-T, Part II, line 2)

	Short-Term Gain or Loss from tnerships and S-Corporations		Statement	22
Description of Activity			Gain or 1	css
Lighthouse Global Long/S Lighthouse Credit Opport Lighthouse Diversified D Harbourvest 2019 Global Harbourvest 2020 Global	tunities Fund, L. Fund (QP) II, L.P Fund LP		145,8 289, 145,	789.
Total to Schedule D, Pa	rt I, line 5		582,3	L19.
	Long-Term Gain or Loss from tnerships and S-Corporations		Statement	23
Description of Activity		Gain or Loss	28% Ga:	in
HCP Private Equity Fund Harbourvest 2019 Global Harbourvest 2020 Global Harbourvest 2021 Global	Fund LP Fund LP	78. 5,169. 1,252. 65.		
Total to Schedule D, Par				

Form **8582**

Department of the Treasury

Internal Revenue Service

Passive Activity Loss Limitations

See separate instructions.

► Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2021

Attachment Sequence No. 858

Identifying number Name(s) shown on return McKnight Brain Research Foundation 65-6301255 2021 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) 1a **b** Activities with net loss (enter the amount from Part IV, column (b)) c Prior years' unallowed losses (enter the amount from Part IV, column (c)) 1c d Combine lines 1a, 1b, and 1c **All Other Passive Activities** 63,054. 2a Activities with net income (enter the amount from Part V, column (a)) 2a 28,602, **b** Activities with net loss (enter the amount from Part V, column (b)) 2b c Prior years' unallowed losses (enter the amount from Part V, column (c)) 34,452. d Combine lines 2a, 2b, and 2c 2d Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the 34,452. losses on the forms and schedules normally used 3 If line 3 is a loss and: • Line 1d is a loss, go to Part II. Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Part II Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 Enter \$150,000. If married filing separately, see instructions 5 Enter modified adjusted gross income, but not less than zero. See instructions 6 Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions Enter the smaller of line 4 or line 8 9 **Total Losses Allowed** Add the income, if any, on lines 1a and 2a and enter the total Total losses allowed from all passive activities for 2021. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return 11 Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c)

LHA For Paperwork Reduction Act Notice, see instructions.

Total. Enter on Part I, lines 1a, 1b, and 1c ..

Form **8582** (2021)

Part V	Complete This Part Befor	e P	art I, Lines 2	a, 2b,	and 2c. S	See instru	ctions.				
	Name of activity		Currer	nt year		Prior ye	ears	Overall gain or loss			
	Name of activity	(;	a) Net income (line 2a)		Net loss ne 2b)	(c) Unall loss (line		(d) Gain		(e) Loss	
		+									
		s	ee Attac	hed	Statem	ent fo	r Pa	rt V			
Total. Enter o	n Part I, lines 2a, 2b, and 2c ▶		63,054.		8,602.						
Part VI	Use This Part if an Amou	nt Is					ctions.				
	Name of activity Form or schedule and line number to be reported on (see instructions)		(a	(a) Loss		tio	(c) Special allowance		(d) Subtract column (c) from column (a)		
		-									
		+									
		+									
Total			>								
Part VII	Allocation of Unallowed L	_OS	ses. See instr	uction	S.						
	Name of activity		Form or sche and line nun to be reporte (see instructi	ımber ted on (a) L		Loss		(b) Ratio		(c) Unallowed loss	
Total			•	•							
Part VIII	Allowed Losses. See instr	ucti	ons.								
Name of activity		Form or sche and line nun to be reporte (see instructi	nber ed on	(a) L	_OSS	(b) ∪	(b) Unallowed loss		(c) Allowed loss		
Total			•	_							

Part IX Activities With Losses Reported on Two or More Forms or Schedules. See instructions.						
Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss	
Form or schedule and line number to be reported on (see instructions):						
1a Net loss plus prior year unallowed loss from form or schedule						
b Net income from form or schedule						
c Subtract line 1b from line 1a. If zero or less, er	nter -0					
Form or schedule and line number to be reported on (see instructions):						
1a Net loss plus prior year unallowed loss from form or schedule						
b Net income from form or schedule						
c Subtract line 1b from line 1a. If zero or less, er	nter -0					
Form or schedule and line number to be reported on (see instructions):						
1a Net loss plus prior year unallowed loss from form or schedule						
b Net income from form or schedule						
c Subtract line 1b from line 1a. If zero or less, er	nter -0					
Total	.					

Form **8582** (2021)

Form 8582	Other 1	Passiv	re Ac	tivitie	s - Part V	Stat	ement	24
	Ct	urrent	Yea	r	Prior Year Unallowed	Overall Gai	in or I	coss
Name of Activity	Net I	ncome	Net	Loss	Loss	Gain	Loss	5
Lighthouse Global Long/Short Fund, L.P Lighthouse Credit	. 52	,668.		0.		52,668.		
Opportunities Fund, L.P. Lighthouse	\	0.	-	20,460.			-20,4	160.
Diversified Fund (QP II, L.P.		,124.		0.		10,124.		
HCP Private Equity Fund V, LP		0.		-315.			-3	315.
Harbourvest 2019 Global Fund LP Harbourvest 2020 Global Fund LP Harbourvest 2021 Global Fund LP Strategic Investors Fund X, L.P.		0.		-2,057.			-2,0	057.
		0.		-1,379.			-1,3	379.
		0.		-4,391.			-4,3	391.
		262.		0.		262.		
Totals	63	,054.		28,602.		63,054.	-28,6	502.
Form 8582	Sui	mmary	of P	assive A	Activities	Stat	ement	25
R R	Form							
E	or	Gain	Loss/	Prior Year C	Net /O Gain/Loss	Unallowed Loss	Allov Loss	
Lighthouse GlobalS Long/Short Fund, L.P. Lighthouse CreditS		52	,668.		52,668			
3	ch E	-20	460.		-20,460		20,4	160.
Diversified Fund (QP) II, L.P.	ah ⊡	10	,124.		10,124			
HCP Private S Equity Fund V, LP	ch E	-	-315.		-315	.	3	315.

McKnight Brain Research	Foundation		65-6301255
Harbourvest 2019 Sch E Global Fund LP	-2,057.	-2,057.	2,057.
Harbourvest 2020 Sch E Global Fund LP	-1,379.	-1,379.	1,379.
Harbourvest 2021 Sch E Global Fund LP Strategic Sch E	-4,391.	-4,391.	4,391.
<pre>Investors Fund X, L.P.</pre>	262.	262.	
Totals	34,452.	34,452.	28,602.
Prior year carryovers allo	wed due to curren	t year net activity inc	ome
Total			28,602.

McKnight Brain Research Foundation

EIN: 65-6301255 6/30/2022

Charitable Contribution Carryforward Schedule

50% Deductible Charitable Contributions

Year of	Contributions	Contributions Taken	Contributions Expired	Carryover	Cumulative Carryover
Contributions	Available	During Tax Year:	During Tax Year:	Amounts	Amount
6/30/2017	3,198,793	-	(3,198,793)	-	-
6/30/2018	2,191,526	-	-	2,191,526	2,191,526
6/30/2019	1,632,253	-	-	1,632,253	3,823,779
50%	3,823,779				

60% Deductible Charitable Contributions

Year of	Contributions	Contributions Taken	Contributions Expired	Carryover	Cumulative Carryover
Contributions 6/30/2020	Available 1,351,009	During Tax Year:	During Tax Year:	Amounts 1,351,009	Amount 1,351,009
6/30/2021	921,527	-	-	921,527	2,272,536
6/30/2022	1,864,500	(359,939)	-	1,504,561	3,777,097
60%	3.777.097				

https://efile.prosystemfx.com/

Product: Exempt Name: McKnight Brain Research Foundation FEIN: *****1255

Bank Info:

Fiscal Year Begin Date: 7/1/2021

IRS Message:

Category: 990-T

Fiscal Year End Date: 6/30/2022

Plan Number:

IRS Center: **Ogden** e-Postmark: **5/11/2023 12:59 PM**

Notification:

eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
04/24/2023	21X:1353.0:V1	Upload Started				
04/24/2023	21X:1353.0:V1	Ready to Release by Customer				
05/11/2023	21X:1353.0:V1	Released for Transmission - Validation in Progress			136453	
05/11/2023	21X:1353.0:V1	Ready to transmit - Validation Complete				
05/11/2023	21X:1353.0:V1	Transmitted to FD - 990-T	59536020231310386e38			
05/11/2023	21X:1353.0:V1	Accepted by FD - 990-T on 5/11/2023				

State Category FBAR FBAR BSA ID ID Status Date Status State/Other

1/1 about:blank

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning	JUL	1	,	, 2021, and ending	JUN	30	, 20 2 2

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. Keep for your records. ► Go to www.irs.gov/Form8879TE for the latest information.

Name of filer | EIN or SSN

McKnight Brain Research Foundation	65-6301255						
Name and title of officer or person subject to tax Melanie Cianciotto							
Trustee							
Part I Type of Return and Return Information							
Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, if Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box o or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2 whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the application one line in Part I.	n line1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a o, 3b, 4b, 5b, 6b, 7b, 8b, 9b,or 10b, ble line below. Do not complete more						
1a Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b						
2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)							
3a Form 1120-POL check here ▶ b Total tax (Form 1120-POL, line 22)							
4a Form 990-PF check here > Land b Tax based on investment income (Form 990-PF, Part V, line 5	i) 4b						
5a Form 8868 check here ▶ b Balance due (Form 8868, line 3c) 6a Form 990-T check here ▶ X b Total tax (Form 990-T, Part III, line 4)	5b						
6a Form 990-T check here ► Lotal tax (Form 990-T, Part III, line 4)	6b 85,987.						
7a Form 4720 check here b Total tax (Form 4720, Part III, line 1)	7b						
8a Form 5227 check here b FMV of assets at end of tax year (Form 5227, item D)	8b						
9a Form 5330 check here ▶ b Tax due (Form 5330, Part II, line 19)	9b						
10a Form 8038-CP check here b Amount of credit payment requested (Form 8038-CP, Part III							
Part II Declaration and Signature Authorization of Officer or Person Subject to Ta Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to							
of entity)							
with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.							
Part III Certification and Authentication	f Date ► 5 11 2023						
ERO's EFIN/PIN. Enter your six-digit electronic filing identification							
number (EFIN) followed by your five-digit self-selected PIN. 5953603200 Do not enter all zero:							
I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indic submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (MeF) Information for Business Returns. ERO's signature Date Date	Authorized IRS e-file Providers for						
ERO's signature ► Muly VWMM Date ► 04	/24/23						

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print McKnight Brain Research Foundation 65-6301255 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 333 S. Garland Avenue, 17th Floor return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions Orlando, FL 32801 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 1041-A 80 Form 4720 (other than individual) Form 4720 (individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) 07 Truist Bank The books are in the care of ► 333 S. Garland Ave., 17th Floor - Orlando, FL 32801 Telephone No. \blacktriangleright (407)237-4485 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this __l. If it is for part of the group, check this box ▶ ____ and attach a list with the names and TINs of all members the extension is for. May 15, 2023 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or ightharpoonup | X | tax year beginning JUL 1, 2021 , and ending JUN 30, 2022 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 66,916. any nonrefundable credits. See instructions. За b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 136,290. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2022)

instructions.

https://efile.prosystemfx.com/

Product: Exempt Extension
Name: McKnight Brain Research Foundation
FEIN: *****1255

Bank Info:

Fiscal Year Begin Date: 7/1/2021

IRS Message:

Category: 990-T Extension

Plan Number:

IRS Center: **Ogden** e-Postmark: **10/11/2022 8:08 AM**

Notification:

Fiscal Year End Date: 6/30/2022 eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
10/10/2022	21X:1353.0:V1	Upload Started				
10/10/2022	21X:1353.0:V1	Ready to Release by Customer				
10/11/2022	21X:1353.0:V1	Released for Transmission - Validation in Progress			kvarnum	
10/11/2022	21X:1353.0:V1	Ready to transmit - Validation Complete				
10/11/2022	21X:1353.0:V1	Transmitted to FD - 990-T Extension	5953602022284032ee10			
10/11/2022	21X:1353.0:V1	Accepted by FD - 990-T Extension on 10/11/2022				

State Category ID Status Date Status State/Other FBAR FBAR BSA ID

about:blank 1/1

TAX RETURN FILING INSTRUCTIONS

FORM 990-PF FLORIDA ATTORNEY GENERAL COPY

FOR THE YEAR ENDING

June 30, 2022

Prepared for	McKnight Brain Research Foundation 333 S. Garland Avenue, 17th Floor Orlando, FL 32801
Prepared by	Batts Morrison Wales & Lee, P.A. 801 North Orange Avenue, Suite 800 Orlando, FL 32801
Amount due or refund	No amount is due.
Make check payable to	No amount is due.
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	The return has been mailed on your behalf. Do not send a paper copy of this return.
	Proof of filing has been included with your copy.

Form **990-PF**Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 **2021**Open to Public Inspection

For calendar year 2021 or tax year beginning JUL 1, 2021 JUN 30, 2022 , and ending A Employer identification number Name of foundation McKnight Brain Research Foundation 65-6301255 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 407-237-4485 333 S. Garland Avenue, 17th Floor City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Orlando, FL 32801 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 55,525,497. (Part I, column (d), must be on cash basis.) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income 0. N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 847,247. 839,030. Statement 2 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 4,704,854. Statement 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 30,393,833. 7 Capital gain net income (from Part IV, line 2) 4,504,004. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) 5,389. 571,304. Statement 3 11 Other income 5,557,490 5,914,338. Total. Add lines 1 through 11 295,325. 295,325. 590,651 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages _____ 15 Pension plans, employee benefits 10,969. 2,194. 6,581. 16a Legal fees Stmt 4 17,645. 6,176. 6,176. **b** Accounting fees Stmt 5 73,739. 14,748. 44,243. c Other professional fees Stmt 6 Administrative 17 Interest Taxes Stmt 7 104,500. 0. 0. 18 Depreciation and depletion 19 20 Occupancy 21 Travel, conferences, and meetings 175,308. 0. 175,308. 22 Printing and publications 4,315. 78,144. 86,506. 23 Other expenses Stmt 8 Operating 24 Total operating and administrative 1,059,318. 322,758. 605,777. expenses. Add lines 13 through 23 2,097,815. 2,097,815. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 3,157,133 322,758. 2,703,592. Add lines 24 and 25 27 Subtract line 26 from line 12: 2,400,357 **8** Excess of revenue over expenses and disbursements 5,591,580. **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

For	m 99	0-PF(2021) McKnight Brain Research		65-6	6301255 Page 2
П	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of	,
Г			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		455 040	0.046.554	0.016.551
		Savings and temporary cash investments	177,942.	2,846,754.	2,846,754.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
Ś	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	, c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
	l ''	Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 9	42,254,760.	41,986,305.	52,678,743.
	14	Land, buildings, and equipment: basis ▶	12/231/7001	11/300/3031	32/0/0//130
	'*	Land, buildings, and equipment, basis			
	15	Less: accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	12 122 702	11 022 050	55,525,497.
_	47	instructions. Also, see page 1, item I)	42,432,702.	44,033,033.	33,323,431.
		Accounts payable and accrued expenses			
		Grants payable			
ies		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
<u>=</u>		Mortgages and other notes payable			
_	22	Other liabilities (describe)			
			0	_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here ►			
Ses		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions			
Ва	25	Net assets with donor restrictions			
Ē		Foundations that do not follow FASB ASC 958, check here			
ŕ		and complete lines 26 through 30.	42,432,702.	44 922 050	
SO		Capital stock, trust principal, or current funds	42,432,702.	44,833,059.	
set		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	1	Retained earnings, accumulated income, endowment, or other funds	* ·	• •	
Net Assets or Fund Balances	29	Total net assets or fund balances	42,432,702.	44,833,059.	
_			40 400 700	44 022 050	
_	30	Total liabilities and net assets/fund balances	42,432,702.	44,833,059.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
•		st agree with end-of-year figure reported on prior year's return)		1	42,432,702.
2		amount from Part I, line 27a			42,432,702.
		u incurrence not included in line O (itemains).			0.
		lines 1, 2, and 3		[]	44,833,059.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II. cr	olumn (h) line 29	6	44,833,059.

Part IV Capital Gains an	d Losses for Tax on In	vestment l	ncon	ne						
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					(c) Date acquired (mo., day, yr.)		(d) Date sold (mo., day, yr.)			
1a										
b See Attached S	Statements									
С										
d										
е										
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost plus exp						in or (loss (f) minus		
a										
b										
С										
d										
e 30,393,833.				9,82	9.				4,504,004.	
Complete only for assets showing of	gain in column (h) and owned by	the foundation o	on 12/3	1/69.		(I)) Gains (Co	ol. (h) gain	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce				col.	. (k), but n Losses (ot less tha from col. (n -0-) or (h))	
a										
b										
С										
d										
е									4,504,004.	
	(If gain, also enter	in Part I line 7			7					
2 Capital gain net income or (net capit	al loss) $ \begin{cases} If gain, also enter \\ If (loss), enter -0. \end{cases} $	in Part I, line 7			<u>}</u>			4,504,004.		
3 Net short-term capital gain or (loss)										
If gain, also enter in Part I, line 8, co					\downarrow			3T / 3		
Part I, line 8	d on Investment Incom	o (Cootion	4040		3 40(b)	or 4049	ooo in	N/A		
				• • •			See in	Structio	ons)	
1a Exempt operating foundations des	, , , ,								55 50 50	
Date of ruling or determination let		ach copy of lett		_	- see inst	ructions)	1		77,723.	
b All other domestic foundations en										
enter 4% (0.04) of Part I, line 12,	col. (b)					······				
2 Tax under section 511 (domestic s	section 4947(a)(1) trusts and taxa	able foundations	only; o	others, en	ter -0-)				0.	
									77,723.	
4 Subtitle A (income) tax (domestic									0.	
5 Tax based on investment income	. Subtract line 4 from line 3. If ze	ro or less, enter	-0				. 5		77,723.	
6 Credits/Payments:			_							
a 2021 estimated tax payments and	2020 overpayment credited to 20)21	6a			53,794	•			
b Exempt foreign organizations - tax withheld at source 6b					0	- I				
					30,000					
d Backup withholding erroneously withheld 6d 0.										
7 Total credits and payments. Add li							7		83,794.	
8 Enter any penalty for underpayme	ent of estimated tax. Check here	X if Form 22	20 is at	ttached			1 . 1		98.	
• • • • • • • • • • • • • • • • • • •						9				
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						10		5,973.		
11 Enter the amount of line 10 to be:			•	5,	973.	Refunded			0.	

	990-PF (2021) McKnight Brain Research Foundation 65-6303	1255		Page 4
	rt VI-A Statements Regarding Activities		127	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			- V
	Did the foundation file Form 1120-POL for this year?	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •			
_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0 •			
9	managers. ► \$ 0 . Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2	If "Yes," attach a detailed description of the activities.			22
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
10	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Х	22
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		1	Х
J	If "Yes," attach the statement required by General Instruction T.	-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
·	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► www.tmbrf.org			
	The books are in care of ▶ Truist Bank Telephone no. ▶ (407)			5
14	Located at ▶333 S. Garland Ave., 17th Floor, Orlando, FL ZIP+4 ▶32			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
15	and enter the amount of tax-exempt interest received or accrued during the year 15		/A	
15				No
15	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?			No X
15	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,	N		_

	5-63012	55	ı	Page s
Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required				
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year, did the foundation (either directly or indirectly):				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<u>l1</u>	a(1)		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqualified person?		a(2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		a(3)		X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<u>1</u>	a(4)	Х	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?				
(6) Agree to pay money or property to a government official? (Exception. Check "No"		a(5)		Х
if the foundation agreed to make a grant to or to employ the official for a period after				
termination of government service, if terminating within 90 days.)	<u>1</u> :	a(6)		X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		1b		X
c Organizations relying on a current notice regarding disaster assistance, check here				
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
before the first day of the tax year beginning in 2021?		1d		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines				
6d and 6e) for tax year(s) beginning before 2021?		2a		Х
If "Yes," list the years 🛌 , , , ,				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
statement - see instructions.)	N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the year?		3a		Х
b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,				
Schedule C, to determine if the foundation had excess business holdings in 2021.)		3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t	hat			
had not been removed from jeopardy before the first day of the tax year beginning in 2021?		4h		Х

3 3	_	. (/				
5a During the year, did the foundation pay or incur any amount to:				5a(1)	Yes	No X	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?							
				5a(3)		Х	
(4) Provide a grant to an organization other than a charitable, etc., organizatio 4945(d)(4)(A)? See instructions				5a(4)		Х	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				J G G (1)			
the prevention of cruelty to children or animals?				5a(5)		Х	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations					
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b			
c Organizations relying on a current notice regarding disaster assistance, check l							
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it mainta	ained					
expenditure responsibility for the grant?			N/A	5d			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).							
$\textbf{6a} \ \ \text{Did the foundation, during the year, receive any funds, directly or indirectly, to} \\$							
a personal benefit contract?				6a		<u> </u>	
${f b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a ${f p}$	personal benefit contract?			6b		X	
If "Yes" to 6b, file Form 8870.				_			
7a At any time during the tax year, was the foundation a party to a prohibited tax s				7a		X	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration o	or				37	
excess parachute payment(s) during the year? Part VII Information About Officers, Directors, Truste	Foundation Ma	manaya Ulabb		8		Х	
Paid Employees, and Contractors	es, roundation wa	nagers, nigniy					
List all officers, directors, trustees, and foundation managers and t	heir compensation.						
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions t)	(е) Ехр	ense	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions t employee benefit pla and deferred compensation	account, oti allowance			
	·	, , , , , , , , , , , , , , , , , , ,	compondation				
See Statement 10		590,652.	0			0.	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "					
	(b) Title, and average	CITTE NONE.	(d) Contributions t		(e) Exp	ense	
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit pla and deferred	is a	count, allowai	other	
NONE	ucvoted to position		compensation		anowai	1003	
110112							
		1		+			
			_				
Total number of other employees paid over \$50,000			>			0	

Form 990-PF (2021) McKnight Brain Research Foundation	65-6301255 Page 7
Part VII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)	, Highly
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Ty	ype of service (c) Compensation
NONE	
	▶ 0
Total number of others receiving over \$50,000 for professional services Part VIII-A Summary of Direct Charitable Activities	> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	1 as the Expenses
1	
'	
See Statement 11	175,308.
2	
3	
4	
Dowt VIII D I O	
Part VIII-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
NT / N	Amount
1N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

Form 990-PF (2021)

P	art IX Minimum Investment Return (All domestic foundations mu	ust complete	this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purpose	s:		
а	Average monthly fair market value of securities			1a	63,345,582.
	Average of monthly cash balances			1b	1,204,753.
	Fair market value of all other assets (see instructions)			1c	· · · · · · · · · · · · · · · · · · ·
	Total (add lines 1a, b, and c)			1d	64,550,335.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	64,550,335.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater am	ount, see instr	uctions)	4	968,255.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3			5	63,582,080.
6	Minimum investment return. Enter 5% (0.05) of line 5			6	3,179,104.
Р	art X Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations, check here ▶ ☐ and do not complete this part.)			d certain	
1	Minimum investment return from Part IX, line 6			1	3,179,104.
2a	Tax on investment income for 2021 from Part V. line 5	2a	77,723.		
b	Income tax for 2021. (This does not include the tax from Part V.)	2b	77,723. 85,987.		
C	Add lines 2a and 2b			2c	163,710.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	3,015,394.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	3,015,394.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X			7	3,015,394.
Р	art XI Qualifying Distributions (see instructions)			·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	oses:			
а	a Expenses, contributions, gifts, etc total from Part I, column (d), line 26				2,703,592.
b	Program-related investments - total from Part VIII-B	1b	0.		
2					
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4				4	2,703,592.

Part XII Undistributed Income (see instructions)

Form 990-PF (2021)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X,				3,015,394.
line 7 2 Undistributed income, if any, as of the end of 2021:				3,013,354.
a Enter amount for 2020 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2021:				
a From 2016 1,266,263.				
b From 2017 372,156.				
c From 2018				
dFrom 2019 128,186.				
e From 2020	1 766 605			
f Total of lines 3a through e	1,766,605.			
4 Qualifying distributions for 2021 from Part XI, line 4: ►\$ 2,703,592.				
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2021 distributable amount				2,703,592.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	311,802.			311,802.
6 Enter the net total of each column as	, , , , , , , , , , , , , , , , , , ,			722,772
indicated below:	1,454,803.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract	1,434,003.			
line 4b from line 2b		0.		
c Enter the amount of prior years'		-		
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2020. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2021. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2022				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2016	-			
not applied on line 5 or line 7	954,461.			
9 Excess distributions carryover to 2022.	•			
Subtract lines 7 and 8 from line 6a	500,342.			
10 Analysis of line 9:				
a Excess from 2017 372,156.				
b Excess from 2018				
c Excess from 2019 128,186.				
d Excess from 2020				
e Excess from 2021				

123581 12-10-21 Form **990-PF** (2021)

		search Found		65-63	01255 Page 10
Part XIII Private Operating F	oundations (see ir	nstructions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter th	at it is a private operating			
foundation, and the ruling is effective fo	r 2021, enter the date o	f the ruling			
b Check box to indicate whether the found	dation is a private opera	ting foundation described	in section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
investment return from Part IX for					
each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XIV Supplementary Info	rmation (Comple	ete this part only	if the foundation	had \$5.000 or mo	re in assets
at any time during t	he year-see inst	ructions.)		. ,	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		e than 2% of the total con	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed r			·		•
None					
b List any managers of the foundation who ther entity) of which the foundation ha			(or an equally large port	tion of the ownership of a p	partnership or
None					
2 Information Regarding Contribut	ion, Grant, Gift, Loar	n. Scholarship, etc., P	rograms:		
Check here ► if the foundation of				not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num	ber or email address of	the person to whom appli	cations should be addre	ssed: See Sta	tement 13
See Statement 12					
b The form in which applications should be	e submitted and inform	ation and materials they s	should include:		
c Any submission deadlines:					
d Δην restrictions or limitations on award	e euch ae hy geographi	cal areas charitable fields	kinde of inetitutione of	r other factors	

123601 12-10-21 Form **990-PF** (2021)

Supplementary Information (continued) Part XIV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year American Brain Foundation ÞС Funding scholarship in 201 Chicago Ave cognitive aging and Minneapolis, MN 55415-1126 memory loss 330,000. American Federation for Aging РC Funding of research Research 55 West 39th Street,16th Floor New York, NY 10018 534,500. Foundation for the NIH РC Funding of research 11400 Rockville Pike, Suite 600 North Bethesda, MD 20852 1,000,000. Grand Canyon Conservancy РC Funding of research P.O. Box 399 Grand Canyon, AZ 86023 250. University of Alabama, Birmingham Funding of the Evelyn ÞС 1530 3rd Avenue South F. McKnight Brain Birmingham, AL 35294 Institute at UAB 32,005. See continuation sheet(s) Total ➤ 3a 2,097,815. **b** Approved for future payment None Total

Part XV-A **Analysis of Income-Producing Activities**

enter gross amounts unless otherwise indicated.	Unrelated b	ousiness income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	0000				
h					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	847,247.	
 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 					
6 Net rental income or (loss) from personal property 7 Other investment income					
7 Other investment income	901101	34,452.	18		
8 Gain or (loss) from sales of assets other than inventory	001101	588,683.	18	4,087,108.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e		CO2 125	\vdash	4 024 255	
12 Subtotal. Add columns (b), (d), and (e)		623,135.		4,934,355.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	5,557,490.
(See worksheet in line 13 instructions to verify calculations.)					

Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2021) 123621 12-10-21

1) McKnight Brain Research Foundation 65-6301255 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVI **Exempt Organizations**

	D:44			- (1) - (- 1) 1	****		P 504/-)		/aal Nia
1		•			ng with any other organizat		tion 501(c)		res No
					g to political organizations?	?			
а	Transfer	s from the reporting found	ation to a noncharita	ble exempt or	ganization of:				
	(1) Casi	h	• • • • • • • • • • • • • • • • • • • •					1a(1)	X
	(2) Othe	er assets					•••••	1a(2)	X
b		insactions;							
	(1) Sale	s of assets to a noncharita	ble exempt organizat	tion				1b(1)	X
	(2) Pur	chases of assets from a no	ncharitable exempt o	rnanization			***************************************	1b(2)	X
	(3) Ren	tal of facilities, equipment.	or other assets			•••••	***************************************	1b(3)	X
	(4) Reir	nhursement arrangements	or other 2000to				•••••	1b(4)	X
	(5) Loa	ns or loan quarantees	***************************************				• • • • • • • • • • • • • • • • • • • •	1b(5)	X
	(6) Peri	formance of services or me	mhershin or fundrai	eina ealiaitatia	ons			1b(6)	X
									$\frac{x}{x}$
					nployees				
u			· ·	-	edule. Column(b) should alv	-	-	•	us,
					ed less than fair market val	ue in any transactio	n or snaring arrangem	ient, snow in	
/2\	ine no.	(d) the value of the goods, (b) Amount involved			e exempt organization	/d\ =			
(a)	ille no.	(B) Amount involved	(c) Name of		s exempt organization	(u) Description	of transfers, transactions,	, and snaring arra	ngements
				N/A					
							no. no.		

	<u> </u>								
	<u> </u>								
		***************************************				***************************************			

					·			Marriero -	
		V							
							n-		
	i								
2a					e or more tax-exempt orgar				
	in sectio	n 501(c) (other than sectio	n 501(c)(3)) or in se	ction 527?			•••••	Yes	X No
b		complete the following sch							
		(a) Name of org	anization		(b) Type of organization		(c) Description of relat	tionship	
		N/A						******	
						1-7444			
	1				g accompanying schedules and			May the IRS dis	cuss this
Si	gn 👢	TMSt Bank as	Low Poracl	TVU ST	n taxpayer) is based on all inform & OF Har MB24		has any knowledge.	return with the shown below?	oreparer
He	ere	by Meda	eda lian	House	511/2023	Truste	ee	X Yes	No.
	Šią	nature of officer or trustee)		Date	Title			
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if P	TIN	
					. /		self- employed		
Pa	aid	Kaylyn A.	Varnum	Kanlı	n Varnim	04/24/23		P016919	75
Pr	eparer			on Wal	es & Lee, P.	A.	Firm's EIN ▶ 20		
Us	se Only					-	, and care p 20		
	-	Firm's address ▶ 80	1 North O	range	Avenue, Suit	e 800		,	
			lando, FL		, Dull		Phone no. 407	-770-60	0.0
							TI HOHE HO. =U/	Form 990 -	
									(2021

Capital Gains and Losses for Tax on Investment Income (**b)** How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a Fed Hermes Trsy Oblig MMKT-I #68 FFS P b Fed Hermes Trsy Oblig MMKT-I #68 P C Ishares S&P Smallcap 600/Val ETF P d Ishares Core MSCI Emerging Mkts ETF P e Vanguard Total Bond Market P f Vanguard Midcap Value Index ETF P q Vanguard Small Cap Growth ETF P h Vanguard Value ETF P | Edgewood Growth Fund-Ins P j Alger Small Cap Focus-Z P k Artisan Intl Value Fund-Ins P | Calvert Emerg Mrkts Eqty-R6 P m Dodge & Cox Income Fund P n Eaton Vance-Atlanta SMID-R6 P 0 Hartford Dvdnd & Grwth-F P (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 179,361. 179,361. 0. a 0. 6,425,984. 6,425,984. b 7,213. 7,473. $\overline{260}$. С 1,895. 1,776.<u>119.</u> d 915,220. 930,013. -14,793.е 3,708. 3,058. 650. 942,769 -176,802. 1,119,571. 182,549. 143,762. 38,787. h 5,392,941. 4,341,160. 1,051,781. 924,130. 1,200,553. -276,423. 111,047. 4,683. 106,364. 1,850. 1,374. 476. 45,075. 38,882. 6,193. m 229,386. 5,921. 223,465. n 343,907. 116,748. 227,159. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 0. a Ō. b 260. С $\overline{119}$. -14,793.е 650. -176,802. 38,787. h 1,051,781. -276,423. 106,364. 476. 6,193. m 223,465. n 227,159. 0 2 Capital gain net income or (net capital loss) \dots { If gain, also enter in Part I, line 7 } According to the capital loss), enter "-0-" in Part I, line 7 } 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 3

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a Hartford Dividend and Grth-Y P b T Rowe Price Large/Cap GRW-I P c Vanguard Intl Growth-ADM P d Vanguard Inst Index-Inst P e Vanguard Russel 1000 GR-Ins P f Vanguard Russel 1000 VA-Ins P g Virtus Ceredex L/C Val Equity P h Western Asset Core Plus BD-IS P | Harbourvest 2015 Global Fd LP P Harbourvest 2016 Global Fd LP P k Harbourvest 2017 Global Fd LP P | Harbourvest Access-2018 Glb1-Cayman P m Harbourvest 2019 Global Fd LP P n Harbourvest 2020 Global Fd LP P O HCP Private Equity Master Fd V P (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 1,590. 1,600. 10. a 5,406,087. 2,714,287. 2,691,800. b 901,504. -18,489.883,015. С 2<mark>05,987.</mark> 250,732. 456,719. d 85,610. 67,990. 17,620. е 95,538. 86,757. 8,781. 4,501,680 3,982,726. 518,954. 2,321,814 2,611,471. -289,657. h 167,550. 69,789. 97,761. 89,949. 89,949. 138,584 138,584. 0. 56,299. 56,299. 0. 40,510. 40,510. m 10,890. 23,576. 12,686. n 4,337. 242,183. 237,846. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <u>10.</u> a 2,691,800. b -18,489. С 250,732. 17,620. е 8,781. 518,954. -289,657. h 97,761. Ō. m 12,686. n 237,846. 0 2 Capital gain net income or (net capital loss) \dots { If gain, also enter in Part I, line 7 } According to the capital loss), enter "-0-" in Part I, line 7 } 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 3

N/A

3

Page Part IV Capital Gains and Losses for Tax on Investment Income **(b)** How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a Springharbour 2013 Priv Equity LP P b Reversal of Partnership Redemptions per Books P c Asset Adjustments P е m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 175,824 18,735. 157,089. a 200,850. -200,850. b 167,515. -167,515. h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 157,089. a -200,850. b -167,515. С е m n 0 2 Capital gain net income or (net capital loss) \cdots { If gain, also enter in Part I, line 7 } Part I, line 7 4,504,004. 2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

201,060.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient University of Arizona - Evelyn F. РC Funding of the Evelyn McKnight Brain Institute F. McKnight Brain P.O. Box 245115 Institute at the Tucson, AZ 85724 University of Arizona 1,232. University of Florida PC Funding of research P.O. Box 14425 Gainesville, FL 32604 49,828. University of Miami PC Funding of research P.O. Box 248106 Coral Gables, FL 33124 150,000.

Total from continuation sheets

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

Form 990-PF ► Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123 2021

McKnight Brain Research Foundation

Employer identification number 65-6301255

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment							
	T							77,723.
1	Total tax (see instructions)						1	11,143.
2 :	a Personal holding company tax (Schedule PH (Form 1120), lir	ne 261	included on line 1	1	2a			
	Look-back interest included on line 1 under section 460(b)(2	,		·····				
	contracts or section 167(g) for depreciation under the income				2b			
(Credit for federal tax paid on fuels (see instructions)				2c			
(1 Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not c	omplete or file this form.	The corpora	tion			
	does not owe the penalty						3	77,723.
4	Enter the tax shown on the corporation's 2020 income tax ret							107 020
	or the tax year was for less than 12 months, skip this line and	i ente	r the amount from line 3	on line 5			4	127,032.
E	Required annual payment. Enter the smaller of line 3 or line	/ If	the corneration is require	ad to okin line	. 1			
ð	enter the amount from line 3			-			5	77,723.
F	Part II Reasons for Filing - Check the boxes belo	w tha	at apply. If any boxes are	checked, the	corporatio	n must file Form 2		77,725•
_	even if it does not owe a penalty. See instructions.		, p.yy 25/105 ard					
6	The corporation is using the adjusted seasonal install	ment	method.					
7	X The corporation is using the annualized income instal							
8	X The corporation is a "large corporation" figuring its fir	st rec	juired installment based (on the prior y	ear's tax.			
F	Part III Figuring the Underpayment					_		
			(a)	(t)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the							
	15th day of the 4th (Form 990-PF filers: Use 5th month),		11 /15 /01	10/1	F / O 1	02/15	, , ,	06/15/00
	6th, 9th, and 12th months of the corporation's tax year	9	11/15/21	12/1	5/21	03/15/	22	06/15/22
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,	10	13,441.	Q	,526.	33,9	325	
11	enter 25% (0.25) of line 5 above in each column Estimated tax paid or credited for each period. For	10	13,441.		, 520 •	33,3	,,,,,,	
••	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11	43,794.			10,0	000.	
	Complete lines 12 through 18 of one column	Н						
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12			,353.			
13	Add lines 11 and 12	13		30	,353.	30,8	327.	
14	Add amounts on lines 16 and 17 of the preceding column	14						
15	Subtract line 14 from line 13. If zero or less, enter -0	15	43,794.	30	,353.	30,8	327.	
16	If the amount on line 15 is zero, subtract line 13 from line				^		_	
,_	14. Otherwise, enter -0-	16			0.		0.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next	ا_ر				2 1	ا م	
40	column. Otherwise, go to line 18	17				3,1	108.	
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then so to line 12 of the post solumn.	,	30,353.	20	,827.			
Go	from line 15. Then go to line 12 of the next column to Part IV on page 2 to figure the penalty. Do not go to Part I	18 V			•			
<u> </u>	to rait iv on page 2 to rigure the penalty. Do not go to Pait i	v 11 l	ioro are no circies dil III	iic ii - iio pe	many 15 UW	rou.		

Form 2220 (2021)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations; Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2021 and before 7/1/2021	21				
22	Underpayment on line 17 x Number of days on line 21 x 3% (0.03)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23				
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25				
26	Underpayment on line 17 x Number of days on line 25 x 3% (0.03)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	See	Attached W	orksheet	
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29				
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31				
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35				
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns					8 \$ 98 .

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2021)

Form 2220 (2021) Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2018	l 1a				
b Tax year beginning in 2019	1b				
- · · · · · · · · · · · · · · · · · · ·					
c Tax year beginning in 2020	1c				
2 Enter taxable income for each period for the tax year beginning in					
2021. See the instructions for the treatment of extraordinary items	2				
		First Assessed	First Consorth	First Organiths	FK
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2018	3a				
b Tax year beginning in 2019	3b				
c Tax year beginning in 2020	3c				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
O Divide line 7 hy 0 0					
8 Divide line 7 by 3.0	8 9a				
9a Divide line 2 by line 8 b Extraordinary items (see instructions)	9a 9b				
	9c				
c Add lines 9a and 9b 10 Figure the tax on the amt on In 9c using the instr for Form	36				
1120, Sch J, line 2, or comparable line of corp's return	10				
11a Divide the amount in columns (a) through (c) on line 3a	10				
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b	' ' a				
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c	'''				
by the amount in column (d) on line 3c	11c				
12 Add lines 11a through 11c	12				
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10	1				
by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax (trusts only) for each	· · ·				
payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17				
18 For each period, enter the same type of credits as allowed	\vdash				
on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits. Subtract line 18 from line 17. If					
zero or less, enter -0-	19				

Form 2220 (2021) Form 990-PF Page 4
Part II Annualized Income Installment Method

P	art II Annualized Income Installment M	etno	a			
			(a)	(b)	(c)	(d)
			First 2	First 3	First 6	First 9
	Annualization periods (see instructions)	20	months	months	months	months
21	Enter taxable income for each annualization period. See					
	instructions for the treatment of extraordinary items	21	644,642.	826,136.	2,729,112.	3,039,633.
22	Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
00	Appualized tayable income. Multiply line 04 by line 00	222	3 867 852	3 304 544	5 458 224	4,052,834.
	a Annualized taxable income. Multiply line 21 by line 22 Dextraordinary items (see instructions)	23a 23b	5,007,052.	J,JU4,J44•	J, 4JU, 444•	±,002,004•
	c Add lines 23a and 23b	23c	3.867.852.	3.304.544.	5.458.224.	4,052,834.
	Figure the tax on the amount on line 23c using the	200	2,007,002.	-,1,-11	-,,	_, 002,004.
	instructions for Form 1120, Schedule J, line 2,					
	or comparable line of corporation's return	24	53,763.	45,933.	75,869.	56,334.
25	Enter any alternative minimum tax (trusts only) for each		, -	, ,	, -	· · · · · · · · · · · · · · · · · · ·
	payment period (see instructions)	25				
	, , , , , , , , , , , , , , , , , , , ,					
26	Enter any other taxes for each payment period. See instr.	26				
	Total tax. Add lines 24 through 26	27	53,763.	45,933.	75,869.	56,334.
28	For each period, enter the same type of credits as allowed					
	on Form 2220, lines 1 and 2c. See instructions	28				
29	Total tax after credits. Subtract line 28 from line 27. If		F2 F62	45 000	75 060	56 224
	zero or less, enter -0-	29	53,763.	45,933.	75,869.	56,334.
30	Applicable percentage	30	25%	50%	75%	100%
50			2070	3070	. 070	10070
31	Multiply line 29 by line 30	31	13,441.	22,967.	56,902.	56,334.
	art III Required Installments					
- (,	,		
	Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
	before completing the next column.		installment	installment	installment	installment
32	If only Part I or Part II is completed, enter the amount in					
	each column from line 19 or line 31. If both parts are					
	completed, enter the smaller of the amounts in each	32	13,441.	22,967.	56,902.	56,334.
22	column from line 19 or line 31	٥ <u>۷</u>	13,441.	44,307.	30,302.	50,554.
33	One the two offers	33		13,441.	22,967.	56,902.
34	Adjusted seasonal or annualized income installments.	- 00		10, 111 ·	22,501	30,302.
J-7	Subtract line 33 from line 32. If zero or less, enter -0-	34	13,441.	9,526.	33,935.	0.
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in		=3,	2,0200	23,2230	
	each column. Note: "Large corporations," see the					
	instructions for line 10 for the amounts to enter	35	19,431.	19,431.	19,430.	19,431.
36	Subtract line 38 of the preceding column from line 37 of					· ·
	the preceding column	36		5,990.	15,895.	1,390.
37	Add lines 35 and 36	37	19,431.	25,421.	35,325.	20,821.
38	Required installments. Enter the smaller of line 34 or					
	line 37 here and on page 1 of Form 2220, line 10.					_
	See instructions	38	13,441.	9,526.	33,935.	0.

Form **2220** (2021)

** Annualized Income Installment Method Using Standard Option

Form 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Nu	umber
McKnight B	rain Research	Foundation		65-63	01255
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			,
11/15/21	13,441.	13,441.			
11/15/21	-43,794.	-30,353.			
12/15/21	9,526.	-20,827.			
02/08/22	-10,000.	-30,827.			
03/15/22	33,935.	3,108.	16	.000082192	
03/31/22	0.	3,108.	91	.000109589	3
06/30/22	0.	3,108.	92	.000136986	3
09/30/22	0.	3,108.	46	.000164384	2
enalty Due (Sum of Coli	umn F).				9

^{*} Date of estimated tax payment, withholding credit date or installment due date.

Form 99	0-PF G	Gain or (Loss) f	rom Sale	of A	ssets		Sta	tement	: 1
Descrip	(a) tion of Property	7			anner quired		te ired	Date	Sold
Fed Her	mes Trsy Oblig N	— MKT-I #68 FFS		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	a		(f) or Lo	ng g
	179,361.	179,361.		0.		0.	————		0.
Descrip	(a) tion of Property	7			anner quired	_	te ired	Date	Sold
Fed Her	mes Trsy Oblig N	— MKT-I #68		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e)		Gain	(f) or Lo	n a a
	6,425,984.			0.		0.	————		0.
Descrip	(a) tion of Property	,			anner quired	-	te ired	Date	Sold
Ishares	S&P Smallcap 60	— 00/Val ETF		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre		Gain	(f) or Lo	oss
	7,473.	7,213.		0.		0.			260.

Descript	(a) tion of Property	-			lanner quired		te ired	Date S	old
Ishares	Core MSCI Emerg	ing Mkts ETF		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	~ .	Gain	(f) or Los	ı q
-	1,895.	1,776.		0.		0.			19.
Descript	(a) tion of Property	•			lanner quired		te ired	Date S	old
Vanguard	d Total Bond Mar	- ket		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	.	Gain	(f) or Los	ss
-	915,220.	930,013.		0.		0.		-14,7	93.
	(a) tion of Property			Ac	Manner equired		te ired	Date S	sold
Vanguard	d Midcap Value I	ndex ETF		Pur	chased				
	(b) Gross	(c) Cost or	(d) Expense	of	(e)			(f)	
_	Sales Price	Other Basis	Sale		Depre	c.	Gain	or Los	s
	3,708.	3,058.		0.		0.		6	50.
Descript	(a) tion of Property				lanner quired	Da Acqu		Date S	old
Vanguard	d Small Cap Grow	 th ETF		Pur	chased				
	(b) Gross	(c) Cost or	(d) Expense	of	(e)	_	Cain	(f) or Los	a d
	Sales Price	Other Basis	Sale		Depre	٠.	Gain	L OT HOS	5

Descrip	(a) tion of Property				fanner equired	Da Acqu	te ired	Date Sold
Vanguar	d Value ETF			Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or Loss
-	182,549.	143,762.		0.		0.		38,787.
Descrip	(a) tion of Property				Manner Equired	Da Acqu	te ired	Date Sold
Edgewoo	d Growth Fund-In	s		Pur	chased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or Loss
-	5,392,941.	4,341,160.		0.		0.		1,051,781.
(a) Description of Property				Manner Date Acquired Acquired Date				
Descrip								Date Sold
		_		Ac				Date Sold
	mall Cap Focus-Z (b) Gross	(c) Cost or	(d) Expense	Ac Pur	equired echased (e)	Acqu	ired	(f)
	tion of Property mall Cap Focus-Z (b) Gross Sales Price	(c) Cost or Other Basis		Pur of	equired chased	Acqu	ired	(f)
	mall Cap Focus-Z (b) Gross	(c) Cost or	Expense	Ac Pur	equired echased (e)	Acqu	ired	(f)
Alger S	tion of Property mall Cap Focus-Z (b) Gross Sales Price	(c) Cost or Other Basis 1,200,553.	Expense	Pur of 0.	equired echased (e)	Acqu C. Da	Gair Gair	(f)
Alger S	tion of Property mall Cap Focus-Z (b) Gross Sales Price 924,130.	(c) Cost or Other Basis 1,200,553.	Expense	Pur of	cquired chased (e) Depred	Acqu C. Da	Gair Gair	(f) n or Loss -276,423.
Alger S	tion of Property mall Cap Focus-Z (b) Gross Sales Price 924,130. (a) tion of Property	(c) Cost or Other Basis 1,200,553.	Expense	of M Acc Pur	cquired cchased (e) Depred	Da Acqu	Gain te	(f) n or Loss -276,423.

Descrip	(a) tion of Property			Manner Date Acquired Acquir			Date Sold		
Calvert	Emerg Mrkts Eqt	_ y-R6		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss	
-	1,850.	1,374.		0.		0.		476.	
Descript	(a) tion of Property				lanner quired		te ired	Date Sold	
Dodge &	Cox Income Fund	_		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss	
-	45,075.	38,882.		0.		0.		6,193.	
Descrip	(a) tion of Property				lanner quired		te ired	Date Sold	
Eaton Va	ance-Atlanta SMI	D-R6		Pur	chased				
	(b) Gross	(c) Cost or	(d) Expense	of	(e)			(f)	
-	Sales Price	Other Basis	Sale		Depre			or Loss	
	229,386.	5,921.		0.		0.		223,465.	
Descrip	(a) tion of Property				Manner equired	Da Acqu		Date Sold	
Hartford	d Dvdnd & Grwth-	— F		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss	
_	343,907.	116,748.		0.		0.		227,159.	

Descrip	(a) tion of Property				anner quired		ite iired	Date Sold	
Hartfor	d Dividend and G	rth-Y		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gair	(f) n or Loss	
	1,600.	1,590.		0.		0.		10.	
Descrip	(a) tion of Property				anner quired		ite iired	Date Sold	
T Rowe	Price Large/Cap	GRW-I		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gair	(f) n or Loss	
-	5,406,087.	2,714,287.		0.		0.		2,691,800.	
Descrip	(a) Description of Property				lanner quired		ite iired	Date Sold	
Vanguar	d Intl Growth-AD	M		Pur	chased				
	(b) Gross	(c) Cost or	(d) Expense	of	(e)			(f)	
	Sales Price	Other Basis	Sale		Depre	c.	uired ———— (or Loss	
	883,015.	901,504.		0.		0.		-18,489.	
Descrip	(a) escription of Property			Manner Date Acquired Acquired Date				Date Sold	
Vanguar	d Inst Index-Ins	t		Pur	chased				
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gair	(f) n or Loss	
-	456,719.	205,987.		0.		0.		250,732.	

Descript	(a) ion of Property				Manner cquired	Date Acquired		Date Sold
Vanguard	Russel 1000 GR	 -Ins		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	a	Cain	(f) or Loss
_	85,610.	67,990.		0.		0.		17,620.
		07,330.						
Descript	(a) ion of Property				Manner cquired		te ired	Date Sold
Vanguard	Russel 1000 VA	-Ins		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
_	95,538.	86,757.		0.		0.		8,781.
Descript	(a) Description of Property				Manner Date Acquired Acquired Date S			Date Sold
Virtus C	eredex L/C Val	— Equity R6		Pu	rchased			
	(b) Gross	(c) Cost or	(d) Expense	of	(e)	_	0 a d	(f)
_	Sales Price	Other Basis	Sale		Depre		Gain ———	or Loss
	4,501,680.	3,982,726.		0.		0.		518,954.
Descript	(a) ion of Property				Manner cquired		te ired	Date Sold
Western	Asset Core Plus	- BD-IS		Pu	rchased			
	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Loss
_	2,321,814.	2,611,471.		0.		0.		-289,657.

(a) Description of Property				Manner cquired		te ired	Date	Sold
Harbourvest 2015 Global	— Fd LP		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or L	oss
167,550.	69,789.		0.		0.			,761.
(a) Description of Property	_			Manner cquired		te ired	Date	Sold
Harbourvest 2016 Global	Fd LP		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or Lo	oss
89,949.	89,949.		0.		0.			0.
(a) Description of Property				Manner cquired		te ired	Date	Sold
Harbourvest 2017 Global	— Fd LP		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre			(f) n or Loss	
138,584.	138,584.		0.		0.			0.
(a) Description of Property			 1	Manner cquired	Da	te ired	Date	
Harbourvest Access-2018	— Glbl-Cayman		Pu	rchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) n or L	oss
56,299.	56,299.		0.		0.			0.

(a) Description of P	roperty				Manner cquired			Date	Sold
Harbourvest 2019	Global	- Fd LP		Pu	rchased				
(b) Gros Sales P	s	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	a	Cain	(f) or Lo	va a
				0.					
	0,510.	40,510.				0.			0.
(a) Description of P	roperty				Manner cquired		te ired	Date	Sold
Harbourvest 2020	Global	- Fd LP		Pu	rchased				
(b) Gros Sales P	s	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Lo	oss
	3,576.	10,890.		0.		0.			686.
(a) Description of P	(a) Description of Property			Manner Date Acquired Acquired Date			Sold		
HCP Private Equi	ty Maste	- er Fd V LP		Pu	rchased				
(b) Gros	s	(c) Cost or	(d) Expense	of	(e)		- 1	(f)	
Sales P		Other Basis	Sale		Depre		Gain ———	or Lo	
24	2,183.	4,337.		0.		0.		237, 	846.
(a) Description of P	roperty				Manner cquired		te ired	Date	Sold
Springharbour 20	13 Priv	- Equity LP		Pu	rchased				
(b) Gros Sales P	s	(c) Cost or Other Basis	(d) Expense Sale	of	(e) Depre	c.	Gain	(f) or Lo	oss
	5,824.	18,735.		0.		0.			089.

(a) Description of Prop	erty			Mann Acqui	_	Date quired	Date	Sold
Reversal of Partner	ship Redempt	ions per	Books	Purcha	sed			
(b)	(c)		(d)	- E	(e)		(f)	
Gross Sales Pric	Cost e Other E		xpense Sale		eprec.	Gai	n or Lo	oss
	0.	0.		0.	0	•		0.
(a) Description of Prop	erty			Mann Acqui	_	Date quired	Date	Sold
Asset Adjustments				Purcha	sed			
(b) Gross Sales Pric	(c) Value e Time of	at E	(d) Expense Sale		(e)	Cai	(f) n or Lo	066
								
	0. 16	57,515. 		0.		•	-107	,515.
Capital Gains Divid	ends from Pa	rt IV						0.
Total to Form 990-P	F, Part I, 1	ine 6a					4,704	,854.
Form 990-PF	Dividends	and Inter	est fro	om Secur	ities	St	atement	t 2
Source	Gross Amount	Capital Gains Dividend	Re	(a) evenue Books	(b Net In ment I	vest-	(c) Adjus Net In	sted
Dividends and Interest	847,247.		0. 8	347,247.	839	,030.		
•								

Form 990-PF	Other I	ncome		Statement 3
Description		(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Income/Loss from partnerships		0.	258,370.	
Income from PFIC Distribution Miscellaneous Income	ıs	0. 5,389.	307,545. 5,389.	
Total to Form 990-PF, Part I,	line 11	5,389.	571,304.	·
Form 990-PF	Legal	Fees		Statement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal fees	10,969.	2,194	·	6,581
To Fm 990-PF, Pg 1, ln 16a =	10,969.	2,194	· ·	6,581
Form 990-PF	Accounti	ng Fees		Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting fees	17,645.	6,176	,	6,176
To Form 990-PF, Pg 1, ln 16b	17,645.	6,176		6,176
Form 990-PF C	ther Profes	sional Fees		Statement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Consulting fees	73,739.	14,748	•	44,243

Form 990-PF	Taxes				Statement 7		
Description	(a) Expense Per Boo		(b) Net Inv		(c) Adjusted Net Incom		
Federal taxes	104,5	500.		0.		0.	
To Form 990-PF, Pg 1, ln 18	104,5	500.		0.		0.	
Form 990-PF	Othe	er E	xpenses			Statement 8	
Description	(a) Expense Per Boo		(b) Net Inv		(c) Adjusted Net Incom		
Miscellaneous expenses Website Development Investment Expense Insurance			3	0. 0. ,502. 813.		11,650. 65,681. 0. 813.	
To Form 990-PF, Pg 1, ln 23	86,5	06.	4	,315.		78,144.	
Form 990-PF	Other	Inv	estments			Statement 9	
Description			luation ethod	Вос	ok Value	Fair Market Value	
Accrued Interest INVESCO QQQ TRUST SERIES 1 ISHARES CORE US AGGREGATE BO ISHARE RUSSELL 2000 ETF ARTISAN INTERNATIONAL VALUE CALVERT EMERGING MARKETS EQU	FD		COST COST COST COST COST COST	1 1	8,218. 8,466,061. 2,450,452. 2,446,231. 2,782,278.		
FUND EATON VANCE ATLANTA CAPITAL SMID-CAP HARTFORD DIVIDEND & GROWTH I			COST COST		596,230. 2,061,885.	548,661. 2,000,873.	
CL F DODGE & COX INCOME FD HARBOURVEST 2015 GLOBAL FD I HARBOURVEST 2016 GLOBAL FD I HARBOURVEST 2017 GLOBAL FD I HARBOURVEST ACCESS-2018 GLOBAL HARBOURVEST 2019 GLOBAL FD I HARBOURVEST 2020 GLOBAL FD I	LP PFIC LP PFIC BAL FD LP		COST COST COST COST COST COST COST		1,665,976. 2,653,069. 87,025. 94,478. 145,086. 278,258. 223,301. 289,058.	504,112. 496,956.	

McKnight Brain Research Foundation			65-6301255
HARBOURVEST 2021 GLOBAL FD LP	COST	102,500.	109,739.
HCP PRIVATE EQUITY MASTER FD V	COST	18,093.	1,025,528.
ISHARES S&P SMALL CAP 600/VAL ETF	COST	2,272,680.	2,047,868.
ISHARES CORE MSCI EMERGING MARKETS	COST		
ETF		702,155.	580,135.
LIGHTHOUSE CREDIT OPPORTUNITIES FD	COST	1,111,912.	1,931,366.
LIGHTHOUSE DIVERSIFIED FD QP II LP	COST	917,051.	2,568,735.
LIGHTHOUSE GLOBAL LONG/SHORT FD LP	COST	1,091,487.	2,943,923.
SPRINGHARBOUR 2013 PRIVATE EQUITY	COST	52,151.	465,255.
SVB CAPITAL-STRATEGIC INVESTORS FD	COST	•	·
X		297,950.	359,026.
VANGUARD INSTITUTIONAL INDEX FUND	COST	5,101,148.	8,694,546.
VANGUARD INTERNATIONAL GROWTH FUND	COST	518,810.	641,477.
VANGUARD MID-CAP VALUE INDEX ETF	COST	965,310.	1,063,100.
VANGUARD RUSSELL 1000 GROWTH INDEX	COST	1,744,030.	2,400,191.
VANGUARD RUSSELL 1000 VALUE INDEX	COST	3,239,375.	3,252,135.
VANGUARD VALUE ETF	COST	5,604,047.	6,333,537.
Total to Form 990-PF, Part II, line 13	3	41,986,305.	52,678,743.

				=
Form 990-PF	Part VII - List	of Officers, Directors	Statement 1	. 0
	Trustees and	Foundation Managers		

Name and Address	Title and Avrg Hrs/Wk		Employee Ben Plan Contrib	Expense
Dr. J. Lee Dockery 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee Emerit	us 40,000.	0.	0.
Dr. Michael Dockery 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		40,813.	0.	0.
Dr. Robert Wah 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee (ended 6.00	8/21) 23,291.	0.	0.
Dr. Madhav Thambisetty 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		0.	0.	0.
Dr. Richard Isaacson 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		40,000.	0.	0.

McKnight Brain Research Foundati	on		65-6301	255
Dr. Susan Pekarkse 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee 6.00	40,000.	0.	0.
Truist Bank 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee 15.00	194,789.	0.	0.
Amy Porter 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Executive Dire		0.	0.
Allison Brashear 333 S. Garland Avenue, 17th Floor Orlando, FL 32801		40,000.	0.	0.
Patricia Boyle 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee 6.00	40,000.	0.	0.
Dr. John Brady 333 S. Garland Avenue, 17th Floor Orlando, FL 32801	Trustee (began	n 1/22) 20,000.	0.	0.
Totals included on 990-PF, Page 6,	Part VII	590,652.	0.	0.
Form 990-PF Summary of Dire	Statement	11		

Activity One

The Foundation hosts an annual conference and other events for the purpose of fostering the necessary collaboration between research scientists in each of the four McKnight Brain Institutes to achieve successful outcomes in the understanding of cognitive aging and the problems of learning and memory in the aging with the emphasis on cognitive health, prevention and treatment of cognitive decline and loss. This year's conference was designed to foster and emphasize the collaboration between the research scientists in three main areas: epigenetics, neuroimaging, and standardization of cognitive assessment measures.

See Statement 14 for additional information regarding the Foundation's activities.

To Form 990-PF, Part VIII-A, line 1 175,308.

Form 990-PF

Grant Application Submission Information Part XIV, Lines 2a through 2d

Statement

12

Name and Address of Person to Whom Applications Should be Submitted

Foundations and Endowments Specialty Practice c/o Truist Bank, 333 S. Garland Avenue, 17th Floor Orlando, FL 32801

Telephone Number

202-879-6319

Form and Content of Applications

No required format.

Any Submission Deadlines

None.

Restrictions and Limitations on Awards

The following guidelines will be used in review of applications:

- Innovative and efficient approaches to fundamental medical research of the brain on the mechanisms underlying the formation, storage and retrieval of memories, the impairment of these processes associated with aging, and the development of therapeutic strategies for the prevention and/or alleviation of these impairments in humans, intended principally for clinical application.
- Seed grants to initiate promising new projects for medical research of the brain in age related memory loss.

Form 990-PF Grant Application Submission Information Statement 13
Part XIV, Lines 2a - 2d (Continuation)

Restrictions and Limitations on Awards

- Grants to charitable organizations or institutions involved in the medical research of the brain in age related memory loss.
- Proposals for collaborative support between individual research scientists of different institutions and organizations in age related memory loss.

General Explanation

Statement 14

Additional information regarding the Foundation's activities:

The Foundation ("MBRF") has created a consortium of medical schools that work to assist MBRF to carry out its mission to alleviate age related memory loss. The schools are the medical schools at the University of Miami, University of Florida, University of Alabama at Birmingham and the University of Arizona ("MBRF Schools"). The Trustees monitor programs at the MBRF Schools and encourage and facilitate cooperation of research programs conducted at the Schools.

The Trustees also monitor grants made to the National Institute of Health and other organizations devoted to understanding and alleviating age related memory loss. See list of Grants in Part XV.

All Trustees are either MDs or PhDs. The Trustee's educational background is required to carry out Trustee duties. The Trustees are expected to understand the science being researched and applied at the MBRF Schools as well as other grantees. The Trustees estimate they spend on average a minimum of 200 hours per year monitoring and working on behalf of MBRF programs.

The nature of Trustee work continues to emphasize the research grant support relative to the programs funded to date in fulfilling the mission of the MBRF. The scientific research being funded by the MBRF is producing more research outcomes, which the Trustees must review and monitor. The review of currently funded research projects, requests for new grant support, on site visits by the trustees and review of scientific reports for each of the MBRF funded programs are very important functions of the Trustees and require continual monitoring. In order to fulfill the purpose and the mission of the MBRF, the Trustees must continuously educate themselves as to the current status and future direction of the research initiatives in learning and memory loss in the aging. The Trustees continue to expand and develop research partnerships to encourage increased interest and support of research in learning and memory in the aging.

In addition to the mission related work, the Trustees monitor and direct the investment of the MBRF endowment. This requires constant updates on economic matters and working with the MBRF investment advisor. The Trustees review monthly financial reports and set policy and asset allocation annually.

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

38

7007

0200

0770

L

பு

For delivery information, visit our website at www.usps.com®. MAIN OF C Certified Mail Fee Extra Services & Fees (dheck box) add Return Receipt (hardcopy) 5270 Return Receipt (electronic) Postmark Certified Mail Restricted Delivery Here Adult Signature Required Adult Signature Restricted Deliver Postage **Total Postage and Fees** BYCAIN RESCARCIA POUN FORM 970-PF PLATTY Sent To GENERAL COPY Office of the Attorney General for Street a Private Foundations Department of Legal Affairs The Capitol, Plaza level 01 City, St. Tallahassee, Florida 32399-1050 PS Form 3800, January 2023 PSN 7530-02-000-9047. See Reverse for Instructions



GUIDE TO IRS PUBLIC DISCLOSURE REQUIREMENTS FOR PRIVATE FOUNDATIONS

Treasury Regulations require private foundations to provide copies of their Forms 990-PF and their applications for recognition of tax exemption (Form 1023) to the public upon request. A private foundation can avoid the requirement to provide copies if it makes the documents "widely available" in a manner that complies with the regulations. The regulations are effective for 990-PF's due on or after March 13, 2000 and to applications for recognition for exemption regardless of their filing date. The regulations also require private foundations to make their Forms 990-PF (due on or after March 13, 2000) and their Forms 1023 available for public inspection at their offices, as described below.

To what forms do the regulations apply?

The public inspection and copy requirements apply to each Form 990-PF for a period of three years beginning on the date the return is required to be filed or the date it is actually filed, whichever is later. The requirements apply to applications for recognition of exemption (Form 1023) permanently. An exception applies to applications if an organization's application for recognition of exemption is still pending with the Internal Revenue Service or if the organization filed its application before July 15, 1987, and did not have a copy of the application on July 15, 1987.

Forms available for inspection or copies must include all related attachments and exhibits and, in the case of applications for recognition of exemption, must include any statement or other supporting document submitted by an organization in support of its application and any letter or other document issued by the Internal Revenue Service concerning the application. Unlike public charities, private foundations may not exclude from public inspection and copies information about individual donors and the amounts they contributed.

From what locations must organizations provide public inspection or copies?

The regulations require that a foundation make the applicable forms available for public inspection or copies at its "principal, regional and district offices." The rules define a regional or district office as "any office of a tax-exempt organization, other than its principal office, that has paid employees, whether part-time or full-time, whose aggregate number of paid hours a week are normally at least 120." A site is not considered a regional or district office, however, if the only services provided at the site further exempt purposes (e.g., day care, health care, etc.) and the site does not serve as an office for management staff other than managers who are involved solely in the exempt function activities at the site. An organization which does not maintain a permanent office may comply with the regulations by permitting public inspection at a "reasonable location of its choice." Such inspection should occur normally within two weeks of the request and at a "reasonable time of day." An organization without a permanent office may opt to provide copies in lieu of allowing a personal inspection.

When must inspection and copies be made available?

An organization is required to permit public inspection and make copies available during the regular business hours of the organization. An organization which has very limited or no office hours may make its documents available in the manner prescribed for organizations without a permanent office, as described above.

When a request is made in person at an organization's office for copies, the organization is required to provide the copies on the day the request is made unless "unusual circumstances" exist. If "unusual circumstances" exist making it unreasonable to fulfill a request for copies on the same business day, the organization is required to provide the copies no later than the next business day following the day that the unusual circumstances cease to exist or on the fifth business day after the date of the request, whichever occurs first. Examples cited of unusual circumstances include receipt of a volume of requests that exceeds the organization's daily capacity, requests received shortly before the end of regular business hours, or requests received on a day when the organization's staff is unavailable.

An organization receiving a written request for copies is required to mail the copies within 30 days from the date it receives the request. If the organization requires payment in advance (see "Fees for copies" – below), it is required to provide the copies within 30 days from the date it receives payment.

Batts Morrison Wales & Lee, P.A. • Certified Public Accountants

Requests for copies of parts of a document

The regulations require an organization to fulfill a request for any specific part or schedule of its application for recognition or Form 990-PF so long as such request specifically identifies the requested part or schedule.

Fees for copies

Organizations are permitted to charge a reasonable fee for providing copies. The regulations stipulate that a fee is reasonable only if it is no more than the per-page copying charge levied by the Internal Revenue Service for providing copies, plus no more than the actual postage costs incurred by the organization to provide the copies. Current regulations set the maximum charge at 20¢ for each page. An organization may require payment in advance, and must accept cash and money orders at a minimum for requests made in person. For requests made in writing, the organization is required to accept payment by certified check, money order, and either personal check or credit card. An organization may accept other forms of payment. If an organization provides copies for a charge but does not require prepayment, it must obtain approval from the requester before providing copies for which the fee will exceed \$20.

Example – An organization has a Form 990-PF which, along with its attached schedules, comprises 15 pages. The organization determines that first-class mail charges for mailing the form will be \$1.50. The organization may charge up to \$4.50 for the copy and the related postage.

Harassment campaigns

If an organization believes it is the subject of a harassment campaign resulting in extraordinary demand for copies of its documents, it may seek relief from the Internal Revenue Service related to the public inspection and copy requirements. An organization which believes it is the subject of such harassment should consult professional tax counsel in determining how to deal with the circumstances.

Making forms "widely available"

An organization which makes its forms "widely available" is not required to provide copies of the forms to individuals. The regulations state that an organization's forms will be considered "widely available" if they are posted on the organization's World Wide Web page in a format which meets the following two criteria:

- 1) Any individual with access to the Internet must be able to access, download, view and print the posted document in a format which exactly reproduces the image of the original document filed with the Internal Revenue Service, except for any information permitted to be withheld from public disclosure, and
- 2) The format must allow any individual with access to the Internet to access, download, view and print the posted document without payment of a fee to either the tax-exempt organization or the entity maintaining the World Wide Web page and without special computer hardware or software other than software that is readily available to members of the public free of charge.

The IRS has indicated in its introduction to the new regulations that the Portable Document Format (PDF) currently satisfies the criteria set forth above. The Service noted that documents in the PDF format can be viewed, navigated and printed by anyone using freely available reader software.

Penalties

Penalties of up to \$20 per day may be assessed on the <u>individuals</u> who fail to comply with the public inspection and copy provisions. Willful failure to comply can result in more severe penalties.



Public Disclosure Requirements for 501(c)(3) Organizations That File Form 990-T

Prior to the enactment of the Pension Protection Act of 2006, the Internal Revenue Code required that 501(c)(3) organizations make a copy of their Forms 990 available for public inspection.

The Pension Protection Act of 2006 expanded this provision by requiring that 501(c)(3) organizations make copies of their Forms 990-T available for public inspection as well. The new rule for Forms 990-T applies to returns filed after August 17, 2006.

Therefore, any 501(c)(3) organization required to file a Form 990-T (including those organizations not required to file a Form 990, such as churches and their integrated auxiliaries) must make its Form 990-T available for public inspection, under the same provisions applicable to the public inspection of Forms 990.

Information relating to a trade secret, patent, process, style of work, or apparatus of the organization may be withheld from the public inspection copy of the Form 990-T if the IRS determines that public disclosure of such information would adversely affect the organization. Requests for withholding such information must be submitted to the IRS at the address where the organization files its Form 990-T.

The current Form 990-T includes a section requiring disclosure of the compensation allocated to and the percentage of time devoted to an unrelated trade or business of any officer or director whose compensation is allocated (in whole or in part) to the organization's unrelated trade or business activities. Therefore, the new public disclosure requirements related to the Form 990-T may potentially expose information about compensation paid by a church (or other 501(c)(3) organization not required to file a Form 990) to its officers and directors that was not publicly available prior to the new provision.

A detailed guide to the public disclosure requirements for 501(c)(3) organizations that file Form 990-T is enclosed.

Regulatory Disclosure: Pursuant to newly-enacted regulations related to practice before the Internal Revenue Service, please be advised that anything in this communication (including any attachments) that might constitute written tax advice is not intended or written to be used, and cannot be used, by any recipient for the purposes of (1) avoiding penalties that may be imposed on the taxpayer under the Internal Revenue Code or (2) promoting, marketing or recommending to another party any tax-related matter addressed herein.

Batts Morrison Wales & Lee, P.A. • Certified Public Accountants



GUIDE TO IRS PUBLIC DISCLOSURE REQUIREMENTS FOR 501(c)(3) ORGANIZATIONS THAT FILE FORM 990-T

The Pension Protection Act of 2006 added a provision to the Internal Revenue Code which requires all 501(c)(3) organizations that file a Form 990-T to provide copies of Form 990-T to the public upon request. A 501(c)(3) organization can avoid the requirement to provide copies if the organization makes the documents "widely available" in a manner that complies with the Treasury Regulations applicable to public disclosure of the Form 990-T and other information returns filed by 501(c)(3) organizations.

Public inspection required

Federal law requires 501(c)(3) organizations that file Form 990-T to make such forms available for public inspection at their principal office for a period of three years from the date the returns are filed with the Internal Revenue Service.

Copies must be provided

In addition to making their Forms 990-T available for public inspection, 501(c)(3) organizations must provide copies of those forms upon request.

To what forms does the provision apply?

The public inspection and copy requirements apply to each Form 990-T filed after August 17, 2006, for a period of three years beginning on the date the return is required to be filed or the date it is actually filed, whichever is later.

Forms available for inspection or copies must include all related attachments and exhibits. An organization may, however, exclude from public inspection and copies information relating to a trade secret, patent, process, style of work, or apparatus of the organization (the public disclosure of which would adversely affect the organization), but only if prior approval of such exclusion is received from the IRS. Requests for withholding such information must be submitted to the IRS at the address where the organization files its Form 990-T.

A charity that files a Form 990-T solely to request a refund of the federal telephone excise tax is not required to make that Form 990-T available for public inspection and copying. However, if a charity files a Form 990-T to request a refund of the federal telephone excise tax and to report unrelated business taxable income under section 511, the charity is required to make that Form 990-T available for public inspection and copying in its entirety.

From what locations must organizations provide public inspection or copies?

The regulations require that a 501(c)(3) organization make the Form 990-T available for public inspection or copies at its "principal, regional and district offices." The rules define a regional or district office as "any office of a tax-exempt organization, other than its principal office, that has paid employees, whether part-time or full-time, whose aggregate number of paid hours a week are normally at least 120." A site is not considered a regional or district office, however, if the only services provided at the site further exempt purposes (e.g., day care, health care, etc.) and the site does not serve as an office for management staff other than managers who are involved solely in the exempt function activities at the site. An organization which does not maintain a permanent office may comply with the regulations by permitting public inspection at a "reasonable location of its choice." Such inspection should occur normally within two weeks of the request and at a "reasonable time of day." An organization without a permanent office may opt to provide copies in lieu of allowing a personal inspection.

When must inspection and copies be made available?

A 501(c)(3) organization is required to permit public inspection and make copies available during the regular business hours of the organization. An organization which has very limited or no office hours may make its documents available in the manner prescribed for organizations without a permanent office, as described above.

Batts Morrison Wales & Lee, P.A. • Certified Public Accountants

When a request is made in person at an organization's office for copies, the organization is required to provide the copies on the day the request is made unless "unusual circumstances" exist. If "unusual circumstances" exist making it unreasonable to fulfill a request for copies on the same business day, the organization is required to provide the copies no later than the next business day following the day that the unusual circumstances cease to exist or on the fifth business day after the date of the request, whichever occurs first. Examples cited of unusual circumstances include receipt of a volume of requests that exceeds the organization's daily capacity, requests received shortly before the end of regular business hours, or requests received on a day when the organization's staff is unavailable.

An organization receiving a written request for copies is required to mail the copies within 30 days from the date it receives the request. If the organization requires payment in advance (see "Fees for copies" – below), it is required to provide the copies within 30 days from the date it receives payment.

Requests for copies of parts of a document

The regulations require an organization to fulfill a request for any specific part or schedule of its Form 990-T so long as such request specifically identifies the requested part or schedule.

Fees for copies

Organizations are permitted to charge a reasonable fee for providing copies. The regulations stipulate that a fee is reasonable only if it is no more than the per-page copying charge levied by the Internal Revenue Service for providing copies, plus no more than the actual postage costs incurred by the organization to provide the copies. Current regulations set the maximum charge at 20¢ for each page. An organization may require payment in advance, and must accept cash and money orders at a minimum for requests made in person. For requests made in writing, the organization is required to accept payment by certified check, money order, and either personal check or credit card. An organization may accept other forms of payment. If an organization provides copies for a charge but does not require prepayment, it must obtain approval from the requester before providing copies for which the fee will exceed \$20.

Example – An organization has a Form 990-T which, along with its attached schedules, comprises 15 pages. The organization determines that first-class mail charges for mailing the form will be \$1.50. The organization may charge up to \$4.50 for the copy and the related postage.

Harassment campaigns

If an organization believes it is the subject of a harassment campaign resulting in extraordinary demand for copies of its documents, it may seek relief from the Internal Revenue Service related to the public inspection and copy requirements. An organization which believes it is the subject of such harassment should consult professional tax counsel in determining how to deal with the circumstances.

Making forms "widely available"

An organization which makes its forms "widely available" is not required to provide copies of the forms to individuals. The regulations state that an organization's forms will be considered "widely available" if they are posted on the organization's World Wide Web page in a format which meets the following two criteria:

- 1) Any individual with access to the Internet must be able to access, download, view and print the posted document in a format which exactly reproduces the image of the original document filed with the Internal Revenue Service, except for any information permitted to be withheld from public disclosure, and
- The format must allow any individual with access to the Internet to access, download, view and print the posted document without payment of a fee to either the tax-exempt organization or the entity maintaining the World Wide Web page and without special computer hardware or software other than software that is readily available to members of the public free of charge.

The IRS has indicated in its introduction to the regulations that the Portable Document Format (PDF) currently satisfies the criteria set forth above. The Service noted that documents in the PDF format can be viewed, navigated and printed by anyone using freely available reader software.

<u>Penaltie</u>s

Penalties of up to \$20 per day may be assessed on the <u>individuals</u> who fail to comply with the public inspection and copy provisions. Willful failure to comply can result in more severe penalties.