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## For the tax year ended: June 30, 2022

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## Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))



\section*{| Part III | Tax and Payments |
| :--- | :--- |}

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
b Other credits (see instructions)
c General business credit. Attach Form 3800 (see instructions)
d Credit for prior year minimum tax (attach Form 8801 or 8827) $\qquad$
e Total credits. Add lines 1 a through 1d
2 Subtract line 1e from Part II, line 7
3 Other amounts due. Check if from: $\square$ Form 4255
 Form 8611 $\qquad$ Form 8697
 Form 8866 Other (attach statement)
4 Total tax. Add lines 2 and 3 (see instructions). Check if includes tax previously deferred under section 1294. Enter tax amount here
5 Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, colum
6a Payments: A 2020 overpayment credited to 2021
b 2021 estimated tax payments. Check if section 643(g) election applies
c Tax deposited with Form 8868
d Foreign organizations: Tax paid or withheld at source (see instructions)
e Backup withholding (see instructions)
f Credit for small employer health insurance premiums (attach Form 8941)
g Other credits, adjustments, and payments: Form 2439
Form 4136


Other


7 Total payments. Add lines 6 a through 6 g
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached
9 Tax due. If line 7 is smaller than the total of lines 4,5 , and 8 , enter amount owed
10 Overpayment. If line 7 is larger than the total of lines 4,5 , and 8 , enter amount overpaid
11 Enter the amount of line 10 you want: Credited to 2022 estimated tax $\quad 50,303$. Refunded

| 7 | $136,290$. |
| :---: | ---: |
| 8 |  |
| 9 |  |
| 9 | $50,303$. |
| 10 | 0. |

Part IV
1 At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?


| 4 | $85,987$. |
| :--- | ---: |
| 5 | 0. | 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 \$ $\qquad$
4 Enter available pre-2018 NOL carryovers here \$ \$ $\qquad$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 4.
5 Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.


## Part V $\quad$ Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.


| Form 990-T | Contributions | Statement 15 |
| :---: | :---: | :---: |
| Description/Kind of Property | Method Used to Determine FMV | Amount |
| American Brain Foundation | N/A | 330,000. |
| American Federation for Aging | N/A | 534,500. |
| Foundation for the NIH | N/A | 1,000,000. |
| Total to Form 990-T, Part I, line 4 |  | 1,864,500. |

Form 990-T

Carryover of Prior Years Unused Contributions - 60\% Limit
For Tax Year 2018

| For Tax Year 2019 | $1,351,009$ |
| :--- | ---: |
| For Tax Year 2020 | 921,527 |


| Total Carryover | $2,272,536$ |
| :--- | ---: |
| Total Current Year 60\% Contributions | $1,864,500$ |
| Total Contributions Available | $4,137,036$ |
| Taxable Income Limitation as Adjusted | 359,939 |
|  |  |
| Excess 60\% Contributions | $3,777,097$ |
| Total Excess Contributions | $3,777,097$ |

Allowable Contributions Deduction
359,939

Qualified Cash Contributions - 100\% Limit
Total Current Year $100 \%$ Contributions
Taxable Income Limitation as Adjusted
Taxable Income Limitation as Adjusted 239,960
Excess 100\% Contributions
0
Allowable Contribution Deduction
Total Contribution Deduction
3,198,793
For Tax Year 2016
2,191,526
$\begin{array}{ll}\text { For Tax Year } 2018 & 2,191,526 \\ \text { For }\end{array}$
For Tax Year 2019
For Tax Year 2020
Total Carryover
7,022,572
Total Current Year 50\% Contributions
Total Contributions Available
7,022,572
Taxable Income Limitation as Adjusted
Excess 50\% Contributions
7,022,572
7,022,572
Allowable Contributions Deduction
Taxable Income for limitation after 50\% Contribution $\qquad$

SCHEDULE A (Form 990-T)

Department of the Treasury Internal Revenue Service

## Unrelated Business Taxable Income From an Unrelated Trade or Business

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).

| A Name of the organization$\qquad$ |  |  | $\begin{aligned} & \hline \text { B Employer identification number } \\ & 65-6301255 \\ & \hline \end{aligned}$ |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\underline{\text { C Unrelated business activity code (see instructions) } 901101}$ |  |  | D Sequence: | 1 | of 1 |
| E Describe the unrelated trade or business Investment $^{\text {a }}$ |  | nerships |  |  |  |
| Part I Unrelated Trade or Business Income |  | (A) Income | (B) Expenses |  | (C) Net |
| 1a Gross receipts or sales <br> b Less returns and allowances $\qquad$ c Balance | 1c |  |  |  |  |
| 2 Cost of goods sold (Part III, line 8) ................................. | 2 |  |  |  |  |
| 3 Gross profit. Subtract line 2 from line 1c | 3 |  |  |  |  |
| 4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions | 4a | 588,683. |  |  | 588,683. |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |  |
| c Capital loss deduction for trusts .................................. | 4c |  |  |  |  |
| 5 Income (loss) from a partnership or an S corporation (attach 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 |  |  |  |  |
| 13 Total. Combine lines 3 through 12 .................... | 13 | 623,135. |  |  | 623,135. |

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

| 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 |  |  |  |  |
| 8 |  |  | 8b |  |
| 9 |  |  | 9 |  |
| 10 | Depletion Contributions to deferred compensation plans |  | 10 |  |
| 11 | Employee benefit programs |  | 11 |  |
| 12 | Excess exempt expenses (Part VIII) |  | 12 |  |
| 13 | Excess readership costs (Part IX) |  | 13 |  |
| 14 |  |  | 14 | 22,236. |
| 15 |  |  | 15 | 22,236. |
| 16 | Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) |  | 16 | 600,899. |
| 17 |  |  | 17 | 0 - |
| 18 | Unrelated business taxable income. Subtract line 17 from line 16 |  | 18 | 600,899. |


| Part II | II Cost of Goods Sold | Enter method of inventory valuation | - |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | Inventory at beginning of year |  |  | 1 |  |  |
| 2 | Purchases |  |  | 2 |  |  |
| 3 | Cost of labor |  |  | 3 |  |  |
| 4 | Additional section 263A costs (attach statement) |  |  | 4 |  |  |
| 5 | Other costs (attach statement) |  |  | 5 |  |  |
| 6 | Total. Add lines 1 through 5 |  |  | 6 |  |  |
| 7 | Inventory at end of year |  |  | 7 |  |  |
| 8 | Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2 |  |  | 8 |  |  |
| 9 | Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? |  |  |  | Yes | No |

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)
1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.
A $\square$
B $\square$
C $\square$
D $\square$

2 Rent received or accrued
a 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)
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D

| A | B | C | D |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) D 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. Enter here and on Part I, line 6, column (B)........................... 0 . Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
A $\square$
B $\qquad$
c $\square$
D $\square$

2 Gross income from or allocable to debt-financed property
3 Deductions directly connected with or allocable to debt-financed property
a Straight line depreciation (attach statement)
b Other deductions (attach statement)
c 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 debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6

| A | B | C | D |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)


10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) .............................................................................................

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made |  | 5. Part of column 4 that is included in the controlling organization's gross income |  | 6. Deductions directly connected with income in column 5 |
| (1) |  |  |  |  |  |  |  |
| (2) |  |  |  |  |  |  |  |
| (3) |  |  |  |  |  |  |  |
| (4) |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| 7. Taxable Income | 8. Net unrelated income (loss) (see instructions) | 9. Total of spec payments ma |  | 10. Part that is in controlling gros | of column 9 luded in the organization's income |  | Deductions directly connected with come in column 10 |
| (1) |  |  |  |  |  |  |  |
| (2) |  |  |  |  |  |  |  |
| (3) |  |  |  |  |  |  |  |
| (4) |  |  |  |  |  |  |  |
|  |  |  |  | Add colum Enter here line 8 , | ns 5 and 10. and on Part I, column (A) |  | d columns 6 and 11. er here and on Part I, line 8 , column (B) |
| Totals |  |  | $\checkmark$ |  | 0 |  | 0 . |


| Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach statement) | 4. Set-asides <br> (attach statement) | 5. Total deductions and set-asides (add cols 3 and 4) |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
| Totals |  | Add amounts in column 2. Enter here and on Part I, line 9, column (A) 0 . |  |  | Add amounts in column 5. Enter here and on Part I, line 9, column (B) 0 。 |

## Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7
5 Gross income from activity that is not unrelated business income
6 Expenses attributable to income entered on line 5
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12


Schedule A (Form 990-T) 2021
Total. Enter here and on Part II, line 1

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13
Part X Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage of time devoted to business | 4. Compensation attributable to unrelated business |
| :---: | :---: | :---: | :---: |
| (1) |  | \% |  |
| (2) |  | \% |  |
| (3) |  | \% |  |
| (4) |  | \% |  |
| Total. Enter here and on Part II, line 1 |  | $\cdots$ |  |

## Part XI Supplemental Information (see instructions)

| Form 990-T (A) | Income (Loss) from Partnerships | Statement 17 |
| :--- | :--- | :--- |


| Description | Net Income or (Loss) |
| :---: | :---: |
| Lighthouse Global Long/Short Fund, L.P. | 52,668. |
| Lighthouse Credit Opportunities Fund, L.P. | -20,460. |
| Lighthouse Diversified Fund (QP) II, L.P. | 10,124. |
| HCP Private Equity Fund V, LP | -315. |
| Harbourvest 2019 Global Fund LP | -2,057. |
| Harbourvest 2020 Global Fund LP | -1,379. |
| Harbourvest 2021 Global Fund LP | -4,391. |
| Strategic Investors Fund X, L.P. | 262. |
| Total Included on Schedule A, Part I, line 5 | 34,452. |


| Form 990-T (A) Other Deductions | Statement 18 |
| :---: | :---: |
| Description | Amount |
| Legal fees | 2,194. |
| Accounting fees | 5,294. |
| Other Professional fees | 14,748. |
| Total to Schedule A, Part II, line 14 | 22,236. |

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

Name of estate or trust
Go to www.irs.gov/F 1041 for instructions and the latest information.

## McKnight Brain Research Foundation

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

65-6301255
$\square$ Yes $\quad \mathrm{X} \mid$ No

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.

| Part I $\quad$ Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (see instructions) |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. |  | (d) <br> Proceeds (sales price) | (e) Cost (or other basis) | (g) <br> Adjustm to gain or lo Form(s) 894 line 2, colu |  | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
| 1a 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 |  |  |  |  |  |  |
| 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 |  |  |  |  |  |  |
| 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts See Statement 19 <br> 6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2020 Capital Loss Carryover Worksheet |  |  |  |  | 5 | 582,119. |
|  |  |  |  |  | 6 | ) |
| 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3), on page 2 |  |  |  |  | 7 | 582,119. |

Part II

| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. | (d) <br> Proceeds (sales price) | (e) Cost (or other basis) | (g)Adjustmentsto gain or loss fromForm(s) 8949, Part II,line 2, column (g) |  | (h) Gain or (loss) Subtract column (e) 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 |  |  |  |  |  |
| 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 |  |  |  |  |  |
| 10 Totals for all transactions reported on Form(s) 8949 with Box F checked |  |  |  |  |  |
| 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and |  |  |  | 11 |  |
| 12 Net long-term gain or (loss) from partnerships, S corporations, and other | ates or trusts | e Stat | ent 20 | 12 | 6,564. |
| 13 Capital gain distributions |  |  |  | 13 |  |
| 14 Gain from Form 4797, Part I |  |  |  | 14 |  |
| 15 Long-term capital loss carryover. Enter the amount, if any, from line 14 Carryover Worksheet | 2020 Capital |  |  | 15 | ( |
| 16 Net long-term capital gain or (loss). Combine lines 8a through 15 in co column (3), on page 2 | (h). Enter he | on line 18a, | $\checkmark$ | 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


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 Form 1041, line 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 $\$ 3,000$ $\qquad$
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 $\quad$ 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 $2 b(2)$, 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 $2 b(1)$, and Form 4952, line 4 g , are more than zero, or
- There are amounts on lines $4 e$ and $4 g$ 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 990-T, Part I, line 11) |  |  |  | 21 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 22 | Enter the smaller of line 18a or 19 in column (2) but not less than zero | $22$ |  |  |  |  |  |
| 23 | 3 Enter the estate's or trust's qualified dividends from Form 1041, line $2 b$ (2) (or enter the qualified dividends included in income in Part I of Form 990-T). | 23 |  |  |  |  |  |
| 2425 | 4 Add lines 22 and 23 | 24 |  |  |  |  |  |
|  | 5 If the estate or trust is filing Form 4952, enter the amount from line 4 g ; otherwise, enter -0 - | 25 |  |  |  |  |  |
| 26 | 6 Subtract line 25 from line 24. If zero or less, enter -0- |  |  | 26 |  |  |  |
| 27 | 7 Subtract line 26 from line 21. If zero or less, enter -0- |  |  | 27 |  |  |  |
| 28 | 8 Enter the smaller of the amount on line 21 or \$2,700 |  |  | 28 |  |  |  |
| 29 | 9 Enter the smaller of the amount on line 27 or line 28 |  |  | 29 |  |  |  |
| 30 | 0 Subtract line 29 from line 28. If zero or less, enter -0- | am | ount is taxed at |  | - | 30 |  |
| 3 | 1 Enter the smaller of line 21 or line 26 |  |  | 31 |  |  |  |
| 32 | 2 Subtract line 30 from line 26 |  |  | 32 |  |  |  |
| 33 | Enter the smaller of line 21 or \$13,250 |  |  | 33 |  |  |  |
| 34 | 4 Add lines 27 and 30 |  |  | 34 |  |  |  |
| 35 | 5 Subtract line 34 from line 33 . If zero or less, enter -0- |  |  | 35 |  |  |  |
| 36 | 6 Enter the smaller of line 32 or line 35 |  |  | 36 |  |  |  |
| 37 | 7 Multiply line 36 by $15 \%$ (0.15) |  |  |  | $\checkmark$ | 37 |  |
|  | 8 Enter the amount from line 31 |  |  | 38 |  |  |  |
| 38 | 9 Add lines 30 and 36 |  |  | 39 |  |  |  |
| 40 | 0 Subtract line 39 from line 38 . If zero or less, enter -0- |  |  | 40 |  |  |  |
| 41 | 1 Multiply line 40 by $20 \%$ (0.20) |  |  |  | $\checkmark$ | 41 |  |
| 42 | Figure the tax on the amount on line 27 . Use the 2021 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041) |  |  |  |  |  |  |
| 43 | 3 Add lines 37, 41, and 42 |  |  | 43 |  |  |  |
| 44 | Figure the tax on the amount on line 21. Use the 2021 and Trusts (see the Schedule G instructions in the Instr |  | Schedule for E for Form 1041) | 44 |  |  |  |
| 45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule <br> G, Part I, line 1a (or Form 990-T, Part II, line 2) |  |  |  |  |  | 45 |  |

## McKnight Brain Research Foundation

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 line 28 and attach Form 6198. See instructions.
27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section


## Part III Income or Loss From Estates and Trusts

$\qquad$
(b) Employer
identification number


\section*{| Part IV | Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder |
| :--- | :--- | :--- |}


| 38 |  | (a) Name | (b) Employer identification number | (c) Excess inclusionfrom Schedules Q, line2c (see instructions) |  | (d) Taxable income (net loss) from Schedules Q, line 1b | (e) Income from Schedules Q, line 3b |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below ......................... 39 <br> Part V Summary  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| 40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below <br> 41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Sch <br> 42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions. <br> 43 Reconciliation for real estate professionals. If you were a real estate 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 |  |  |  |  |  |  | 40 |  |
|  |  |  |  |  |  |  | 41 | 34,452. |
|  |  |  |  |  | $42$ |  |  |  |
|  |  |  |  |  | 43 |  |  |  |

## Part I Estate's or Trust's Share of Alternative Minimum Taxable Income



27 Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23
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 .
- ESBTs, see instructions.


## Part 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- | 30 |  |
| 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) | 32 |  |
| 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 | 34 |  |
| 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) | 39 |  |
|  | Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38. | 40 |  |

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Schedule I (Form 1041) 2021

Schedulel(Form 1041)2021 McKnight Brain Research Foundation
65-6301255 Page 2

Part II Income Distribution Deduction on a Minimum Tax Basis (continued)
N/A
41 Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero or less, enter -0-
42 Income distribution deduction on a minimum tax basis. Enter the smaller of line 40 or line 41. Enter here and on line 24
Part III Alternative Minimum Tax


## Part IV Line 50 Computation Using Maximum Capital Gains Rates

Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part.
55 Enter the amount from line 49
56 Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)
57 Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary). If you didn't complete Schedule D for the regular tax or the AMT, enter - 0 -
58 If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56. Otherwise, add lines 56 and 57 and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)
59 Enter the smaller of line 55 or line 58
60 Subtract line 59 from line 55
61 If line 60 is $\$ 199,900$ or less, multiply line 60 by $26 \%$ ( 0.26 ). Otherwise, multiply line 60 by $28 \%(0.28)$ and subtract $\$ 3,998$ from the result
62 Maximum amount subject to the $0 \%$ rate
63 Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, 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-
64 Subtract line 63 from line 62 . If zero or less, enter - 0 -
65 Enter the smaller of line 55 or line 56
66 Enter the smaller of line 64 or line 65. This amount is taxed at $0 \%$
67 Subtract line 66 from line 65

## Part IV Line 50 Computation Using Maximum Capital Gains Rates (continued)



Schedule I (Form 1041) 2021

| Schedule DNet Short-Term Gain or Loss from <br> Partnerships and S-Corporations | Statement 19 |
| :--- | ---: |
| Description of Activity |  |


| Schedule D | Net Long-Term Gain or Loss from <br> Partnerships and S-Corporations | Statement 20 |
| :--- | :---: | ---: | :--- |
| Description of Activity |  |  |

Schedule E Income or (Loss) from Partnerships and S Corps Statement 21

Name
Emp ID No.

| Code |  |  | Any | Passive Loss | Passive Income | Nonpassive Loss | Sec. 179 Deduction | Nonpassive Income |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | X <br> if <br> Frn | Basis Comp Req | Not at Risk |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Harbourvest 2019 Global Fund LP |  |  |  |  |  |  |  |  |
| P |  |  |  | 2,057 |  |  |  |  |

Harbourvest 2020 Global Fund LP
P 1,379.
Harbourvest 2021 Global Fund LP
P 4,391.
HCP Private Equity Fund V, LP
P
315.

Lighthouse Credit Opportunities Fund, L.P.
P
20,460.
Lighthouse Diversified Fund (QP) II, L.P.
P 10,124.
Lighthouse Global Long/Short Fund, L.P.
P 52,668.
Strategic Investors Fund X, L.P.
P
262.

Totals to Sch. E, ln. 29 28,602. 63,054.

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

Name of estate or trust
Go to www.irs.gov/F 1041 for instructions and the latest information.

## McKnight Brain Research Foundation

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

65-6301255
$\square$ Yes $\quad \mathrm{X}$ No

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.

| Part I $\quad$ Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (see instructions) |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. |  | (d) <br> Proceeds (sales price) | (e) Cost (or other basis) | (g) Adjustme to gain or los Form(s) 8949 line 2, colum |  | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
| 1a 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 |  |  |  |  |  |  |
| 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 <br> 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 |  |  |  |  |  |  |
| 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts ...See Statement 22. |  |  |  |  |  |  |
| 6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2020 Capital Loss <br> Carryover Worksheet |  |  |  |  | 6 | ) |
| 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3), on page 2 |  |  |  |  | 7 | 582,119. |

Part II


For Paperwork Reduction Act Notice, see the Instructions for Form 1041.
Schedule D (Form 1041) 2021

Schedule D (Form 1041) 2021 McKnight Brain Research Foundation

| Part III | Summary of Parts I and II |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Caution: Read the instructions before completing this part. |  |

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

20 Enter 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 smaller of: a The loss on line 19, column (3) or b $\$ 3,000$ $\qquad$
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 $\quad$ 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 $2 b(2)$, 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 $2 b(1)$, and Form 4952, line 4 g , are more than zero, or
- There are amounts on lines 4 e and 4 g 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.

|  | 1 Enter taxable income from Form 1041, line 23 (or Form |  |  | 21 | 239,960. |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Enter the smaller of line 18a or 19 in column (2) but not less than zero | 22 | 6,564. |  |  |  |  |
| 23 | Enter the estate's or trust's qualified dividends from Form 1041, line $2 b(2)$ (or enter the qualified dividends included in income in Part I of Form 990-T). | 23 |  |  |  |  |  |
| 24 | 4 Add lines 22 and 23 | 24 | 6,564. |  |  |  |  |
| 25 | If the estate or trust is filing Form 4952, enter the amount from line 4 g ; otherwise, enter -0- | 25 | 0 . |  |  |  |  |
| 26 | Subtract line 25 from line 24. If zero or less, enter -0- |  |  | 26 | 6,564. |  |  |
| 27 | 7 Subtract line 26 from line 21 . If zero or less, enter -0- |  |  | 27 | 233,396. |  |  |
| 28 | 8 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 | , |  |  | - | 30 | 0 . |
| 31 | 1 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 | 4 Add lines 27 and 30 |  |  | 34 | 233,396. |  |  |
| 35 | Subtract line 34 from line 33 . If zero or less, enter -0- |  |  | 35 | 0 . |  |  |
| 36 | Enter the smaller of line 32 or line 35 |  |  | 36 |  |  |  |
| 37 | 7 Multiply line 36 by $15 \%$ (0.15) |  |  |  | - | 37 |  |
| 3839 | 8 Enter the amount from line 31 |  |  | 38 | 6,564. |  |  |
|  | Add lines 30 and 36 |  |  | 39 |  |  |  |
| 40 | Subtract line 39 from line 38 . If zero or less, enter -0- |  |  | 40 | 6,564. |  |  |
| 41 | 1 Multiply line 40 by 20\% (0.20) |  |  |  | $\checkmark$ | 41 | 1,313. |
| 42 | Figure the tax on the amount on line 27 . Use the 2021 and Trusts (see the Schedule G instructions in the Inst |  |  | 42 | 84,674. |  |  |
|  | 3 Add lines 37, 41 , and 42 |  |  | 43 | 85,987. |  |  |
| 44 | Figure the tax on the amount on line 21. Use the 2021 and Trusts (see the Schedule G instructions in the Inst | Rate <br> tions | states | 44 | 87,103. |  |  |
| 45 | Tax on all taxable income. Enter the smaller of line 43 <br> G, Part I, line 1a (or Form 990-T, Part II, line 2) |  | Form 1041, |  | - | 45 | 85,987. |


| Schedule D | Net Short-Term Gain or Loss from <br> Partnerships and S-Corporations |
| :--- | :---: |
| Description of Activity |  |

Department of the Treasury
Internal Revenue Service (99)

Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)


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.


Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.

| Name of activity | Current year |  | Prior years | Overall gain or loss |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | (a) Net income (line 1a) | (b) Net loss (line 1b) | (c) Unallowed loss (line 1c) | (d) Gain | (e) Loss |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Total. Enter on Part I, lines 1a, 1b, and 1c ... |  |  |  |  |  |

LHA For Paperwork Reduction Act Notice, see instructions.
Form 8582 (2021)

Form 8582 (2021) McKnight Brain Research Foundation
65-6301255
Page 2
Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

| Name of activity | Current year |  | Prior years | Overall gain or loss |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | (a) Net income (line 2a) | (b) Net loss (line 2b) | (c) Unallowed loss (line 2c) | (d) Gain | (e) Loss |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | See Attac | ed Statem | nt for P | V |  |
| Total. Enter on Part I, lines 2a, 2b, and 2c ... | 63,054. | -28,602. |  |  |  | Part VI Use This Part if an Amount Is Shown on Part II, Line 9. See instructions.


| Name of activity | Form or schedule <br> and line number <br> to be reported on <br> (see instructions) | (a) Loss | (b) Ratio | (c) Special <br> allowance | (d) Subtract <br> column (c) <br> from column (a) |
| :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Part VII Allocation of Unallowed Losses. See instructions.

| Name of activity | Form or schedule and line number to be reported on (see instructions) | (a) Loss | (b) Ratio | (c) Unallowed loss |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total | $\ldots$ |  |  |  |
| Part VIII Allowed Losses |  |  |  |  |
| Name of activity | Form or schedule and line number to be reported on (see instructions) | (a) Loss | (b) Unallowed loss | (c) Allowed loss |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total | $\checkmark$ |  |  |  |

Form 8582 (2021) McKnight Brain Research Foundation Part IX Activities With Losses Reported on Two or More Forms or Schedules. See instructions.


| Form 8582 | Other Passiv | Activities | - Part V |  | Statement |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Name of Activity | Current Year |  | Prior Year Unallowed Loss | Overall Gain or Loss |  |  |
|  | Net Income | Net Loss |  | Gain | Los |  |
| Lighthouse Global |  |  |  |  |  |  |
| Long/Short Fund, L.P. | 52,668. | 0 。 |  | 52,668 |  |  |
| Lighthouse Credit |  |  |  |  |  |  |
| Opportunities Fund, |  |  |  |  |  |  |
| L. P. | 0. | -20,460. |  |  | -20, | 60. |
| Lighthouse <br> Diversified Fund (QP) |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| II, L.P. | 10,124. | 0 . |  | 10,124 |  |  |
| HCP Private Equity |  |  |  |  |  |  |
| Fund V, LP | 0 . | -315. |  |  |  | 15. |
| Harbourvest 2019 |  |  |  |  |  |  |
| Global Fund LP | 0 . | -2,057. |  |  | -2, | 57. |
| Harbourvest 2020 |  |  |  |  |  |  |
| Global Fund LP | 0 . | -1,379. |  |  | -1, | 79. |
| Harbourvest 2021 |  |  |  |  |  |  |
| Global Fund LP | 0 . | -4,391. |  |  | -4, | 91. |
| Strategic Investors |  |  |  |  |  |  |
| Fund X , L.P. | 262. | 0 . |  | 262 | 2. |  |
| Totals | 63,054. | -28,602. |  | 63,054 | 4. -28, | 02. |
| Form 8582 | Summary of Passive Activities |  |  |  | Statement | 25 |



Harbourvest 2019 Sch E Global Fund LP Harbourvest 2020 Sch E Global Fund LP Harbourvest 2021 Sch E Global Fund LP
-2,057
-1,379
-2,057.
2,057.
$-4,391$. -1,379. 1,379. Strategic Sch E Investors Fund X, L.P.
$\frac{262 .}{34,452 .} \frac{262 .}{34,452 .} \frac{}{28,602 .}$

Totals
34,452.
-4,391.
4,391.
$\overline{\bar{\sim}} \overline{\overline{2}}$
Prior year carryovers allowed due to current year net activity income Total

McKnight Brain Research Foundation
EIN: 65-6301255
6/30/2022
Charitable Contribution Carryforward Schedule

50\% Deductible Charitable Contributions
$\left.\left.\begin{array}{cccccc}\begin{array}{c}\text { Year of } \\ \text { Contributions }\end{array} & \begin{array}{c}\text { Contributions } \\ \text { Available }\end{array} & \begin{array}{c}\text { Contributions } \\ \text { Taken }\end{array} & \begin{array}{c}\text { Contributions } \\ \text { Expired }\end{array} & \begin{array}{c}\text { Curing Tax Year: }\end{array} & \begin{array}{c}\text { Cumulative } \\ \text { During Tax Year: }\end{array} \\ \hline 6 / 30 / 2017 & 3,198,793 & - & (3,198,793) & - & - \\ \text { Amounts }\end{array}\right] \begin{array}{c}\text { Carryover } \\ \text { Amount }\end{array}\right]$

60\% Deductible Charitable Contributions

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

60\% deductible charitable contribution carryforward to 6/30/2023 Tax year $\begin{aligned} & \text { 3,777,097 }\end{aligned}$

