For calendar year 2022 or other tax year beginning 07.01 2022, and ending 06.03 20.22 Department of the Treasure mean levenue Service Go to www.sr.gov/FormS907 for instructions and the latest information. Do not netrer SSN numbers on this form as it may be made public if your organization is a 501(c)(8). Optimization is a 501(c)(8). Optimization is a 501(c)(8). A Cleack box if a cleack box if and or organization (1 and the cleack box if name changed and see instructions.) For the organization type and cleack box if and or organization is a 501(c)(8). D Empty organization type as instructions.) A 008(b) C 0.14. Name of organization type as instructions.) D Empty organization type as instructions.) D Empty organization as instructions.) D Empty organization as instructions.) D Check organization as instructions.)	Form 9	9 0-T		Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))		OME	3 No. 1545-0047	
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form9907 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). Density of the son organization () Description () A Check box if a Check box if Son(c) (3) Type (3) Name of organization () Desch box if anne cheaped and see instructions.) (3) Employer identification number (3) Desch box if anne cheaped and see instructions.) (3) Employer identification number (3) Desch box if anne cheaped and see instructions.) (3) Employer identification number (3) Desch box if anne cheaped and see instructions.) (3) Enclose instructions.) (4) Enclose instructions			For cal		20 23		20 22	
address changed. Print or Soft (C) 3 REGENTS OF THE UNIVERSITY OF MICHIGAN 38-6006309 B Exempt under section or parts on C suite on Pick on C suite on Pick on C suite on Pick on on P				Go to www.irs.gov/Form990T for instructions and the latest information.			for 501(c)(3)	ion
B Eventplunder section Print Mumber, street, and room or suble no. If a P.O. box, see instructions. E Group exemption number (see instructions) 1 0408(e) 220(e) 303.S.STATE ST., 5032 WOLVERINE TWR F Check organization type 2 0408(e) 220(e) 303.S.STATE ST., 5032 WOLVERINE TWR F Check organization type 3 6 Check organization type 501(c) corporation 501(c) corporation State college/university 4 Check if a 501(c) (3) organization filling a consolidated return with a 501(c)(2) titleholding corporation 18 5 Derive the number of attached Schedules A (Form 990-T) 18 K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No 1 Total O unrelated Business Taxable Income 1 21.841.327 2 21.841.327 2 Reserved . . . 12.1841.327 2 Reserved . . . 2 21.841.327 2 Reserved 12.1841.327 2 Reserved . .					D Empl	-		ber
B Exempt under section or Number, stret, and room or sulte no. If a P.O. box, see instructions. E Group exemption number (see instructions) B 000 S. STATE ST., 5062 VOLVERINE TWR City or town, state or province, country, and ZIP or foreign postal code F Check tox if an amended return. B 22804 C Book value of all assests at end or year 32,935,723 To an amended return. State college/university. C Check organization type 501(c) corporation 501(c) trust 401(a) trust 0 ther trust State college/university. C Check if filling only to Claim credit from Form 8941 Claim a refund shown on Form 2439 Image: State college/university. K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No I Total of unrelated Business Taxable income Total or unrelated Business Taxable income computed from all unrelated trades or businesses (see instructions). 1 21.841.327 C Chartiable contributions (see instructions for limitation rules) 3 21.841.327 T Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 0 S Total unrelated business taxable income before specific deduction and section 199A deduction. 7 0 B Trusts. Section 199A deduction. See instructi	ad	dress changed.	Print					
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↓ 408. ↓ 530(a) ANN ARBOR, MI 48109-1287 ■ 32,935,723 F C Check use of all assets at end of year ↓ 629(a) ↓ 529(b) ↓ 529(c) 023,95,723 F □ Check box if an amended return. ↓ Check if filing only to ↓ Colaim credit from Form 8941 ↓ Colaim a refund shown on Form 2439 ↓ ↓ Check if a \$01(c)(3) organization filing a consolidated return with a \$01(c)(2) titleholding corporation ↓ ↓ ↓ Enter the number of attached Schedules A (Form 990-T) ↓ ↓ ↓ ↓ Enter the number of attached Schedules A (Form 990-T) ↓ ↓ ↓ ↓ ↓ The books are in care of (SEE STATEMENT) Telephone number (734) 763-3282 ↓ 28t1↓ Total Unrelated Business Taxable Income ↓ ↓ ↓ ↓ ↑ Total Unrelated Business taxable income computed from all unrelated trades or businesses (see instructions) ↓ <td></td> <td>_</td> <td>Туре</td> <td></td> <td>(3661</td> <td>nstructiv</td> <td>513/</td> <td></td>		_	Туре		(3661	nstructiv	513/	
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			-	-		-		-
					<u> </u>	-	orm 990-T (20	<u> </u>

Form 990	э-Т (2022)				Page 2
Part I	I Tax and Payments				
	Foreign tax credit (corporations attach Form			0	
b	Other credits (see instructions)		1b	0	
	General business credit. Attach Form 3800 (0	
	Credit for prior year minimum tax (attach For				
	Total credits. Add lines 1a through 1d			. <u>1e</u>	0
	Subtract line 1e from Part II, line 7				0
3	Other amounts due. Check if from: 🔲 Form 4			22	
-		attach statement)			0
4	Total tax. Add lines 2 and 3 (see instructions				
-	section 1294. Enter tax amount here			<u>o</u> . 4	0
10 - 20 million	Current net 965 tax liability paid from Form S		1	. 5	0
6a	Payments: A 2021 overpayment credited to			6,069	
	2022 estimated tax payments. Check if secti			0	
C d	Tax deposited with Form 8868		6c	0	
d	Backup withholding (see instructions)	The set of the second	6d	0	
f	Credit for small employer health insurance p		6e 6f	7,775	
100	Other credits, adjustments, and payments:				
9	\square Form 4136 0 \square Other	r <u>0</u> Tota		0	
7	Total payments. Add lines 6a through 6g			. 7	13,844
8	Estimated tax penalty (see instructions). Che			8	0
9	Tax due. If line 7 is smaller than the total of				0
10	Overpayment. If line 7 is larger than the tota				13,844
11	Enter the amount of line 10 you want: Credited to		13,844 Refun		0
Part I			tion (see instructions)	
1	At any time during the 2022 calendar year, o	did the organization have an int	erest in or a signature	or other authority	Yes No
	over a financial account (bank, securities, or				
	FinCEN Form 114, Report of Foreign Bank a	and Financial Accounts. If "Yes	," enter the name of th	ne foreign country	
	here HK				~
2	During the tax year, did the organization receive		grantor of, or transferor	to, a foreign trust?	
-	If "Yes," see instructions for other forms the				GEL WERE
3	Enter the amount of tax-exempt interest rec				
4	Enter available pre-2018 NOL carryovers he	re \$ 129,919,732. Do not	include any post-201	7 NOL carryover	SHEET ST
	shown on Schedule A (Form 990-T). Don't Part I, line 6.	reduce the NOL carryover sho	wit tiere by any dedu	iction reported on	
5	Post-2017 NOL carryovers. Enter the Busine	ss Activity Code and available r	oost-2017 NOL como	vere Don't reduce	Martin Rass
v	the amounts shown below by any NOL claim				
	Business Activity		Available post-2017		
	21	0000	\$	864,552	and the
	22		\$	59,346,144	AND DUG DUG DUG AND
	23		\$	5,347	
	(SEE STATEMENT)		\$		The second
6a	Did the organization change its method of a	ccounting? (see instructions) .			4
	If 6a is "Yes," has the organization describ				State In the
	explain in Part V				
Part	V Supplemental Information				
Provid	e the explanation required by Part IV, line 6b	. Also, provide any other addition	onal information. See i	nstructions.	
	Under penalties of perjury, I declare that I have examine belief, it is true, correct, and complete. Declaration of p				
Sign	Const, it is into, conset, and complete. Declaration of p		an information of which pre		yo.
Here	I In SIKA	5/15/2024 EXECUTIV			cuss this return
- 1919			E VICE PRESIDENT AND	(see instruction	er shown below s)? Yes No
	Signature of officer	Date Title	Data		N
Paid	Print/Type preparer's name	Preparer's signature	Date	Check if PTI self-employed	
Prep				5 5	
Use	Dnly Firm's name			Firm's EIN	
3	Firm's address			Phone no.	

2

Form 990-T (2022)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20**22**

Department of the Treasury Internal Revenue Service	Go to <i>www.irs.gov/Form990T</i> for instructions and the lates Do not enter SSN numbers on this form as it may be made public if your o				Public Ins 3) Organiza	
A Name of the organization B Employer i					on numb	er
REGENTS OF THE UNIVERSITY OF MICHIGAN			38	8-600630)9	
C Unrelated business	activity code (see instructions)	D	Sequence:	1	of	18
E Describe the unrelat	red trade or business MINING					

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 0				
b	Less returns and allowances 0 c Balance	1c	0		
2	Cost of goods sold (Part III, line 8)	2	0		
3	Gross profit. Subtract line 2 from line 1c	3	0		0
4a	Capital gain net income (attach Schedule D (Form 1041 or				
	Form 1120)). See instructions	4a	0		0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0		0
с	Capital loss deduction for trusts	4c	0		0
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5	(1,808)		(1,808)
6	Rent income (Part IV)	6	0	() 0
7	Unrelated debt-financed income (Part V)	7	0	() 0
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8	0	C	0
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9	0	C	0
10	Exploited exempt activity income (Part VIII)	10	0	C	0
11	Advertising income (Part IX)	11	0	C	0
12	Other income (see instructions; attach statement)	12	0		0
13	Total. Combine lines 3 through 12	13	(1,808)		(1))
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	ductions. Deducti	ons must be
1	Compensation of officers, directors, and trustees (Part X)			1	0
2	Salaries and wages			2	502
3	Repairs and maintenance			3	0
4	Bad debts			4	0
5	Interest (attach statement). See instructions			5	0
6	Taxes and licenses			6	0
7	Depreciation (attach Form 4562). See instructions		7	0	
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0 8b	0
9	Depletion			9	0
10	Contributions to deferred compensation plans			10	0
11	Employee benefit programs				96
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)				0
14	Other deductions (attach statement)				
15	Total deductions. Add lines 1 through 14				720
16	Unrelated business income before net operating loss deductio column (C)				(2,528)
17	Deduction for net operating loss. See instructions				0
18	Unrelated business taxable income. Subtract line 17 from lin			10	(2,528)
					dule A (Form 990-T) 2022

3

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service	Go to <i>www.irs.gov/Form990T</i> for instructions and the latest Do not enter SSN numbers on this form as it may be made public if your or			Public Ins) Organiza	
A Name of the organizat	B Employer ider	ntificatio	n numb	er	
REGENTS OF THE UNIV	38	3-600630	9		
C Unrelated business	activity code (see instructions)	D Sequence:	2	of	18
E Describe the unrelat	ed trade or business				

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(45,375,974)			(45,375,974)
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	(45,375,974)		0	(=1= =1=)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on de	ductions. Dedu	ctic	ons must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	2,007
3	Repairs and maintenance			[3	0
4	Bad debts				4	0
5	Interest (attach statement). See instructions			[5	0
6	Taxes and licenses				6	0
7	Depreciation (attach Form 4562). See instructions		7	0		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	385
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	488
15	Total deductions. Add lines 1 through 14				15	2,880
16	Unrelated business income before net operating loss deductio column (C)				16	(45,378,854)
17	Deduction for net operating loss. See instructions				17	0
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16		<u> </u>	18	(45,378,854)
For Pa	perwork Reduction Act Notice, see instructions.	Ca	it. No. 74036O	s	ched	lule A (Form 990-T) 2022

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2022

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Department of the Treasury Internal Revenue Service	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 Name of the organization	B Employer identification number
REGENTS OF THE UNIVERSITY OF MICHIGAN	38-6006309
C Unrelated business activity code (see instructions)	D Sequence: ³ of ¹⁸

E Describe the unrelated trade or business MANUFACTURING

Par	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	;	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
С	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	1,146,517			1,146,517
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
-	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	1,146,517		0	1,146,517
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on ded		uctio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages			[2	1,451
3	Repairs and maintenance			[3	0
4	Bad debts			[4	0
5	Interest (attach statement). See instructions			[5	0
6	Taxes and licenses			[6	0
7	Depreciation (attach Form 4562). See instructions		7	0		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	279
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	353
15	Total deductions. Add lines 1 through 14				15	2,083
16	Unrelated business income before net operating loss deductio column (C)					
4-				-	16	1,144,434
17				F	17	0
18	Unrelated business taxable income. Subtract line 17 from lin				18	1,144,434
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 74036O	9	sched	ule A (Form 990-T) 2022

Department of the Treasury

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20**22**

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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

Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if your orga	nizatio	n is a 501(c)(3).	501(c)(3) Organiza	tions Only
A Name of the organizati	B	Employer iden	tificatio	n numb	ər	
REGENTS OF THE UNIV		38-	-600630	9		
C Unrelated business a	activity code (see instructions)	DS	Sequence:	4	of	18

E Describe the unrelated trade or business WHOLESALE TRADE

Par	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 0				
b	Less returns and allowances 0 c Balance	1c	0		
2	Cost of goods sold (Part III, line 8)	2	0		
3	Gross profit. Subtract line 2 from line 1c	3	0		0
4a	Capital gain net income (attach Schedule D (Form 1041 or				
	Form 1120)). See instructions	4a	0		0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	41-			
_		4b	0		0
с 5	Capital loss deduction for trusts	4c	0		0
5	statement)	5	507.005		507.005
6	Rent income (Part IV)	6	567,905		567,905
6 7	Unrelated debt-financed income (Part V)	7	0		
8	Interest, annuities, royalties, and rents from a controlled	_	0		0
Ū	organization (Part VI)	8	0		0
9	Investment income of section 501(c)(7), (9), or (17)	-	0		0
•	organizations (Part VII)	9	0	(0
10	Exploited exempt activity income (Part VIII)	10	0	(-
11	Advertising income (Part IX)	11	0	(
12	Other income (see instructions; attach statement)	12	0		0
13	Total. Combine lines 3 through 12 .	13	567,905	(
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Deducti	ons must be
1	Compensation of officers, directors, and trustees (Part X) $\ . \ .$				0
2	Salaries and wages				72
3	Repairs and maintenance				0
4	Bad debts				0
5	Interest (attach statement). See instructions				0
6	Taxes and licenses		1 1	6	0
7	Depreciation (attach Form 4562). See instructions			0	
8	Less depreciation claimed in Part III and elsewhere on return .			0 8b	0
9	Depletion				0
10	Contributions to deferred compensation plans				
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)				
15	Total deductions. Add lines 1 through 14				103
16	Unrelated business income before net operating loss deductio column (C)				567,802
17	Deduction for net operating loss. See instructions				
18	Unrelated business taxable income. Subtract line 17 from lin				
	perwork Reduction Act Notice, see instructions.		at. No. 740360		edule A (Form 990-T) 2022

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20**22**

Department of the Treasury Internal Revenue Service		Public Ins Organiza	spection for ations Only		
A Name of the organizati	on	B Employer ide	ntificatio	n numb	er
REGENTS OF THE UNIV	38	3-600630	9		
C Unrelated business	activity code (see instructions)	D Sequence:	5	of	18

E Describe the unrelated trade or business RETAIL TRADE

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
_c	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(7,746)			(7,746)
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)					
0		8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)					
10		9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11 12	Advertising income (Part IX)	11 12	0		0	0
12	Other income (see instructions; attach statement)	12	0		0	0
_	Total. Combine lines 3 through 12		(7,746)	l	-	(7,746)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	auctions. Deau	ICTIO	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	125
3	Repairs and maintenance				3	0
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses		1 1		6	0
7	Depreciation (attach Form 4562). See instructions			0		
8	Less depreciation claimed in Part III and elsewhere on return .				8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	24
12	Excess exempt expenses (Part VIII)	• •			12	0
13	Excess readership costs (Part IX)	• •			13	0
14	Other deductions (attach statement)				14	31
15 16	Total deductions. Add lines 1 through 14				15	180
	column (C)				16	(7.000)
17	Deduction for net operating loss. See instructions				16 17	(7,926)
17	Unrelated business taxable income. Subtract line 17 from lin				18	0 (7,926)
	perwork Reduction Act Notice, see instructions.					ule A (Form 990-T) 2022
		50				

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20 22

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Open to Public Inspection for

A Name of the organization		B Employer ide	ntificatio	on numb	er	
REGENTS OF THE UNIVERSITY OF MICHIGAN		3	8-600630	9		
C Unrelated business activity code (see instructions)	480000	D Sequence:	6	of	18	

E Describe the unrelated trade or business TRANSPORTATION AND WAREHOUSING

Pa	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 0				
b	Less returns and allowances 0 c Balance	1c	0		
2	Cost of goods sold (Part III, line 8)	2	0		
3	Gross profit. Subtract line 2 from line 1c	3	0		0
4a	Capital gain net income (attach Schedule D (Form 1041 or				
	Form 1120)). See instructions	4a	0		0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b			
•	Capital loss deduction for trusts	40 4c	0		0
с 5	Income (loss) from a partnership or an S corporation (attach	40	0		0
•	statement)	5	(6,141,548)		(6,141,548)
6	Rent income (Part IV)	6	(0,141,348)		0 0
7	Unrelated debt-financed income (Part V)	7	0		0 0
8	Interest, annuities, royalties, and rents from a controlled	_	0		0 0
-	organization (Part VI)	8	0		0 0
9	Investment income of section 501(c)(7), (9), or (17)				<u> </u>
	organizations (Part VII)	9	0		0 0
10	Exploited exempt activity income (Part VIII)	10	0		0 0
11	Advertising income (Part IX)	11	0		0 0
12	Other income (see instructions; attach statement)	12	0		0
13	Total. Combine lines 3 through 12	13	(6,141,548)		0 (6,141,548)
Par	directly connected with the unrelated business inco	me.			
1	Compensation of officers, directors, and trustees (Part X) $\ . \ .$				1 0
2	Salaries and wages				2 636
3	Repairs and maintenance				3 0
4	Bad debts			· · · · –	4 0
5	Interest (attach statement). See instructions				5 0
6	Taxes and licenses		1 1		6 0
7	Depreciation (attach Form 4562). See instructions			0	
8	Less depreciation claimed in Part III and elsewhere on return .				b 0
9	Depletion				9 0
10	Contributions to deferred compensation plans				0 0
11	Employee benefit programs				1 122
12	Excess exempt expenses (Part VIII)				2 0
13	Excess readership costs (Part IX)				3 0
14	Other deductions (attach statement)				4 155
15	Total deductions. Add lines 1 through 14			1	5 913
16	Unrelated business income before net operating loss deductio column (C)				6 (0.4.40.401)
47					6 (6,142,461)
17 19	Deduction for net operating loss. See instructions				7 0 8 (6.142.461)
18 For Pr	Unrelated business taxable income. Subtract line 17 from lin perwork Reduction Act Notice, see instructions.		at. No. 74036O		8 (6,142,461) hedule A (Form 990-T) 2022
FULPA	iperwork neuroion act notice, see instructions.	Ua	al. NO. 740300	50	neuule A (FUIII 330-1) 2022

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20 22

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Open to Public Inspection for Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Upen or rubitor specific rubitorubitor specific rubitorubitor specific rubit

A Name of the organization		В	Employer ider	tificatio	n numb	er
REGENTS OF THE UNIVERSITY OF MICHIGAN			38	-600630	9	
C Unrelated business activity code (see instructions)	510000	D	Sequence:	7	of	18

E Describe the unrelated trade or business **INFORMATION**

Par	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	s	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	35,737			35,737
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	35,737		0	35,737
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Ded	uctio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	125
3	Repairs and maintenance				3	0
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses		1 1		6	0
7	Depreciation (attach Form 4562). See instructions			0		
8	Less depreciation claimed in Part III and elsewhere on return .			0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs			•	11	24
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	31
15	Total deductions. Add lines 1 through 14				15	180
16	Unrelated business income before net operating loss deductio column (C)				16	35,557
17	Deduction for net operating loss. See instructions				17	0
18	Unrelated business taxable income. Subtract line 17 from lin	ie 16		<u></u>	18	35,557
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 740360		Sched	ule A (Form 990-T) 2022

Department of the Treasury

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2022

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Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 501(c)(3) Organizations Only							
A Name of the organization B Employer identification number				ər			
REGENTS OF THE UNIVERSITY OF MICHIGAN			38-6006309				
C Unrelated business a	activity code (see instructions)	520000	D Sequence:	8	of	18	

E Describe the unrelated trade or business FINANCE AND INSURANCE

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					V
	statement)	5	(1,917,529)			(1,917,529)
6	Rent income (Part IV)	6	(1,517,525)		0	(1,517,525)
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled	-				
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)	-			-	
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	(1,917,529)		0	(1,917,529)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Dedu	ictio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	2,320
3	Repairs and maintenance			[3	0
4	Bad debts			[4	0
5	Interest (attach statement). See instructions			[5	0
6	Taxes and licenses			[6	0
7	Depreciation (attach Form 4562). See instructions			0		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	445
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	565
15	Total deductions. Add lines 1 through 14				15	3,330
16	Unrelated business income before net operating loss deductio					
	column (C)				16	(1,920,859)
17	Deduction for net operating loss. See instructions				17	0
18	Unrelated business taxable income. Subtract line 17 from lin				18	(1,920,859)
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 74036O	S	Sched	ule A (Form 990-T) 2022

Department of the Treasury

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20**22**

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Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 501(c)(3) Organizations Only						
A Name of the organizati	on	B Employer identification number				
REGENTS OF THE UNIV	ERSITY OF MICHIGAN	38-6006309				
C Unrelated business a	activity code (see instructions)	D Sequence: ⁹ of ¹⁸				

E Describe the unrelated trade or business REAL ESTATE, RENTAL & LEASING

Pa	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	s	(C) Net
1a	Gross receipts or sales 332,797					
b	Less returns and allowances 0 c Balance	1c	332,797			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	332,797			332,797
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
С	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(768,288)			(768,288)
6	Rent income (Part IV)	6	979,740	658	3,450	321,290
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
_	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	544,249		3,450	(114,201)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Ded	uctio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	134,146
3	Repairs and maintenance				3	267
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses				6	1,484
7	Depreciation (attach Form 4562). See instructions		7	4,553,473		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	4,553,473
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	4,244
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	13,061
15	Total deductions. Add lines 1 through 14				15	4,706,675
16	Unrelated business income before net operating loss deductio					
	column (C)				16	(4,820,876)
17					17	0
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16			18	(4,820,876)
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 74036O		Schedu	ule A (Form 990-T) 2022

Part	III Cost of Goods Sold Enter me	thod of inventory valua	tion		
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	l, line 2	8	
9	Do the rules of section 263A (with respect to prope				🗌 Yes 🗌 N
Part	V Rent Income (From Real Property an	d Personal Property	y Leased with F	Real Property)	
1	Description of property (property street address,	city, state, ZIP code).	Check if a dual-us	e. See instructions.	
	A NBC BUILDING, FLINT, MI 48502				
	B RIVERFRONT BUILDING, FLINT, MI 48502				
	C UNIVERSITY CENTER, FLINT, MI 48502				
	D (SEE STATEMENT)				
		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) .	200,823	72,445	5,241	
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D	200,823	72,445	5,241	
3	Total rents received or accrued. Add line 2c column	ns A through D. Enter he	ere and on Part I lin	e 6. column (A)	979,74
-					/
4	Deductions directly connected with the income in lines 2(c) and 2(b) (attack statement)				
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	196,467	70,756	10,520	
	in lines 2(a) and 2(b) (attach statement)			·	658,45
5	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through	D. Enter here and on I		·	658,45
5 Part	 in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through Unrelated Debt-Financed Income (see 	D. Enter here and on F e instructions)	Part I, line 6, colun	nn (B)	
5 Part	 in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through Unrelated Debt-Financed Income (see Description of debt-financed property (street additional street) 	D. Enter here and on F e instructions)	Part I, line 6, colun	nn (B)	
5 Part	 in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through Unrelated Debt-Financed Income (see Description of debt-financed property (street add A) 	D. Enter here and on F e instructions)	Part I, line 6, colun	nn (B)	
5 Part	 in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through Unrelated Debt-Financed Income (se Description of debt-financed property (street add A B 	D. Enter here and on F e instructions)	Part I, line 6, colun	nn (B)	
5 Part	<pre>in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through U Unrelated Debt-Financed Income (se Description of debt-financed property (street add A B C C </pre>	D. Enter here and on F e instructions) Iress, city, state, ZIP co	Part I, line 6, colun	nn (B)	
5 Part	<pre>in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through U Unrelated Debt-Financed Income (se Description of debt-financed property (street add A B B</pre>	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through Unrelated Debt-Financed Income (see Description of debt-financed property (street add A B C D D D D D D D D D D D D D D D D D D	D. Enter here and on F e instructions) Iress, city, state, ZIP co	Part I, line 6, colun	nn (B)	
5 Part 1	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through U Unrelated Debt-Financed Income (see Description of debt-financed property (street add A B C C G Gross income from or allocable to debt-financed	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through U Unrelated Debt-Financed Income (see Description of debt-financed property (street add A B C C G Gross income from or allocable to debt-financed property	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2 3 a	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through Unrelated Debt-Financed Income (see Description of debt-financed property (street add A B C C D Gross income from or allocable to debt-financed property	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2 3 a b	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2 3 a b	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2 3 a b c	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2 3 a b c	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 Part 1 2 3 a b c 4	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 2art 1 2 3 a b c 4 5	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 2art 1 2 3 a b c 4 5	in lines 2(a) and 2(b) (attach statement)	A	Part I, line 6, colun ode). Check if a du	nn (B)	ns.
5 2art 1 2 3 a b c 4 5	in lines 2(a) and 2(b) (attach statement)	D. Enter here and on F e instructions) fress, city, state, ZIP co	Part I, line 6, colun ode). Check if a du	nn (B)	D
5 Part 1 2 3 a b c 4 5 6	in lines 2(a) and 2(b) (attach statement)	A	B B	nn (B)	D
5 2art 1 2 3 a b c 4 5 6 7	in lines 2(a) and 2(b) (attach statement)	A	B %	nn (B)	ns. D
5 2art 1 2 3 a b c 4 5 6 7 8	in lines 2(a) and 2(b) (attach statement)	A	B %	nn (B)	ns. D
5 Part 1 2 3 a b c 4 5 6 7 8	in lines 2(a) and 2(b) (attach statement)	A	B %	nn (B)	
5 Part 1 2 3 a b c 4 5 6 7 8 9	in lines 2(a) and 2(b) (attach statement)	A Market A Constructions A A A A A A A A A	B B on Part I, line 7, co	nn (B)	ns. D
b c 4 5 6 7 8	in lines 2(a) and 2(b) (attach statement)	A D. Enter here and on F e instructions) dress, city, state, ZIP co A A y ugh D). Enter here and of A through D. Enter here	B B on Part I, line 7, co e and on Part I, line	nn (B)	D

Par	art VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)					;)		
						·		
	1. Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instructio	s)	 Total of specified payments made 	5. Part of column 4 that is included in the controlling organization's gross income		Deductions directly connected with come in column 5
(1)								
(2)								
(3)								
(4)								
			Nonexemp	ot Cor	ntrolled Organization	าร		
	7. Taxable income	inco	t unrelated me (loss) Istructions)		. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income		Deductions directly connected with come in column 10
(1)								
(2)								
(3)								
(4)								
Tota	als					Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Ente	I columns 6 and 11. r here and on Part I, ne 8, column (B) 0
Par	t VII Investment Inco	me of a Sec	ction 501(c)()	7), (9), or (17) Organiza	ation (see instructions)		
	1. Description of income		int of income	c	3. Deductions lirectly connected attach statement)	4. Set-asides (attach statement)		Total deductions and set-asides d columns 3 and 4)
(1)								
(2)								
(3)								
(4)								
		Enter here	nts in column 2. and on Part I, column (A)				Add amounts in column 5. Enter here and on Part I, line 9, column (B)	
Tota			0					0
Par	-		ncome, Othe	er Th	an Advertising In	come (see instructions	3)	
1	Description of exploited	•						
2	Gross unrelated busines						2	
3	3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)			3				
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 activ						5	
6	Expenses attributable to	income ente	red on line 5				6	
7	Excess exempt expense 4. Enter here and on Par						7	

Schedule A (Form 990-T) 2022

	Part	IX Advertising Income					
B	1	Name(s) of periodical(s). Check box if rep	porting t	wo or more periodic	als on a consol	idated basis.	
C C C C D Inter amounts for each periodical listed above in the corresponding column. A B C D 2 Gross advertising income . A B C D a Add columns A through D. Enter here and on Part I, line 11, column (A) . . 0 3 Direct advertising costs by periodical . . . 0 4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a gain, complete lines 5 through 7, and enter zero on line 8. . . . 0 5 Readership costs .		A 🗌					
D A B C D 2 Gross advertising income A B C D a Add columns A through D. Enter here and on Part I, line 11, column (A)							
A B C D a Add columns A through D. Enter here and on Part I, line 11, column (A)							
A B C D a Add columns A through D. Enter here and on Part I, line 11, column (A) .	Finter						
2 Gross advertising income	Enter	amounts for each periodical listed above i	n the co			C	
a Add columns A through D. Enter here and on Part I, line 11, column (A) 0 3 Direct advertising costs by periodical 0 a Add columns A through D. Enter here and on Part I, line 11, column (B) 0 4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 7, and enter zero on line 8 0 5 Readership costs 0 6 Circulation income 0 7 Excess readership costs 1 8 Excess readership costs 1 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 0 Part II, line 13 0 0 Part X Compensation of Officers, Directors, and Trustees (see instructions) 4. Compensation artibutable to uurelated business 1 Name 2. Title 3. Percentage of time devoted to business 4. Compensation artibutable to uurelated business 1	2	Gross advertising income		~		U	
3 Direct advertising costs by periodical		-	d on Par	rt I. line 11. column	(A)		. 0
a Add columns A through D. Enter here and on Part I, line 11, column (B) 0 4 Advertising gain (loss). Subtract line 3 from line 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 complete lines 5 through 7, and enter zero on line 8 0 5 Readership costs 0 6 Circulation income 0 7 Excess readership costs. If line 6 is less than line 6, enter zero 0 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 0 Part X Compensation of Officers, Directors, and Trustees (see instructions) 0 1. Name 2. Title 3. Percentage of time devided to business 4. Compensation attributable to uurrelated business 10 0 % 0	3	_	[, - ,			
4 Advertising gain (loss). Subtract line 3 from line 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 complete lines 5 through 7, and enter zero on line 8 5 7 7 8 9 9 9 9 9 9 9 9	а		d on Par	rt I, line 11, column	(B)		. 0
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 complete lines 5 through 7, and enter zero on line 8			г	, ,			
6 Circulation income	4	2. For any column in line 4 showing a complete lines 5 through 8. For any col line 4 showing a loss or zero, do not co	a gain, umn in mplete				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero	5	Readership costs					
deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7 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		Excess readership costs. If line 6 is les line 5, subtract line 6 from line 5. If line 5	ss than is less				
Part II, line 13 O 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) % 9% (2) % 9% (3) % 9% (4) % 9% Total. Enter here and on Part II, line 1 0 0	8	deduction. For each column showing a g	gain on				
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	а						
1. Name2. Title3. Percentage of time devoted to business4. Compensation attributable to unrelated business(1)%(2)%(3)%(4)%Total. Enter here and on Part II, line 1	Par						
(2) % (3) % (4) % Total. Enter here and on Part II, line 1		1. Name		2. Title		of time devoted	attributable to
(3) % (4) % Total. Enter here and on Part II, line 1	(1)						
(4) % Total. Enter here and on Part II, line 1	(2)						
Total. Enter here and on Part II, line 1							
Total. Enter here and on Part II, line 1 0 Part XI Supplemental Information (see instructions)	(4)					%	
Part XI Supplemental Information (see instructions)	Tota	I. Enter here and on Part II line 1					0
	Parl	Supplemental Information (see	e instru	ctions)			0
	- Girt						

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2022

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

Department of the Treasury Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if yo			Open to 501(c)(3	Public Ins) Organiza	pection for ations Only
A Name of the organizati	on	В	Employer iden	tificatio	n numb	er
REGENTS OF THE UNIV	ERSITY OF MICHIGAN		38	-600630	9	
C Unrelated business	activity code (see instructions)	D	Sequence:	10	of	18

E Describe the unrelated trade or business PROFESSIONAL, SCIENTIFIC, & TECHNICAL SERVICES

Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 20,000				
b	Less returns and allowances 0 c Balance	1c	20,000		
2	Cost of goods sold (Part III, line 8)	2	0		
3	Gross profit. Subtract line 2 from line 1c	3	20,000		20,000
4a	Capital gain net income (attach Schedule D (Form 1041 or				
	Form 1120)). See instructions	4a	0		0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0		0
С	Capital loss deduction for trusts	4c	0		0
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5	(1,985,500)		(1,985,500)
6	Rent income (Part IV)	6	0		0 0
7	Unrelated debt-financed income (Part V)	7	0		0 0
8	Interest, annuities, royalties, and rents from a controlled				
-	organization (Part VI)	8	0		0 0
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9	0		0 0
10	Exploited exempt activity income (Part VIII)	10	0		0 0
11	Advertising income (Part IX)	11	279,681	146,98	
12	Other income (see instructions; attach statement)	12	0		0
13	Total. Combine lines 3 through 12	13			(, , , ,
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Deduct	ions must be
1	Compensation of officers, directors, and trustees (Part X)			1	0
2	Salaries and wages			2	23,609
3	Repairs and maintenance			3	0
4	Bad debts			4	0
5	Interest (attach statement). See instructions				0
6	Taxes and licenses			6	0
7	Depreciation (attach Form 4562). See instructions			695	
8	Less depreciation claimed in Part III and elsewhere on return .				
9	Depletion				
10	Contributions to deferred compensation plans				
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)				
15	Total deductions. Add lines 1 through 14				162,460
16	Unrelated business income before net operating loss deductio $column$ (C)				
4-	column (C)				(1 1 7
17					
18	Unrelated business taxable income. Subtract line 17 from lin		<u> </u>		
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 740360	Sch	edule A (Form 990-T) 2022

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	le A (Form 990-T) 2022				Page 2
Part	Cost of Goods Sold Enter me				
1	Inventory at beginning of year				0
2 3	Purchases .				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7	Inventory at end of year				0
8	Cost of goods sold. Subtract line 7 from line 6.				0
9 Dort	Do the rules of section 263A (with respect to prop				? 🗌 Yes 🛄 No
Pan 1	Rent Income (From Real Property an Description of property (property street address, A	-	-		
	B C				
	D	•		•	
0	Dept received or econylad	Α	В	С	D
2 a	Rent received or accrued 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 column	ns A through D. Enter	here and on Part I, li	ne 6, column (A)	0
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D. Enter here and c	on Part I, line 6, colu	mn (B)	0
Par	-			(_)	
1	Description of debt-financed property (street add A	,	? code). Check if a c	lual-use. See instruc	tions.
	B				
	C				
		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 c	Other deductions (attach statement) 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 7	Divide line 4 by line 5	%	%	%	%
8	Total gross income (add line 7, columns A through	ugh D). Enter here ar	nd on Part I, line 7, d	column (A)	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns	A through D. Enter h	nere and on Part I, lir	ne 7, column (B)	0
11	Total dividends - received deductions include	ed in line 10 . . .		-	0
				Sched	ule A (Form 990-T) 2022

Par	art VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)					;)		
						·		
	1. Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instructio	s)	 Total of specified payments made 	5. Part of column 4 that is included in the controlling organization's gross income		Deductions directly connected with come in column 5
(1)								
(2)								
(3)								
(4)								
			Nonexemp	ot Cor	ntrolled Organization	าร		
	7. Taxable income	inco	t unrelated me (loss) Istructions)		. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income		Deductions directly connected with come in column 10
(1)								
(2)								
(3)								
(4)								
Tota	als					Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Ente	I columns 6 and 11. r here and on Part I, ne 8, column (B) 0
Par	t VII Investment Inco	me of a Sec	ction 501(c)()	7), (9), or (17) Organiza	ation (see instructions)		
	1. Description of income		int of income	c	3. Deductions lirectly connected attach statement)	4. Set-asides (attach statement)		Total deductions and set-asides d columns 3 and 4)
(1)								
(2)								
(3)								
(4)								
		Enter here	nts in column 2. and on Part I, column (A)				Add amounts in column 5. Enter here and on Part I, line 9, column (B)	
Tota			0					0
Par	-		ncome, Othe	er Th	an Advertising In	come (see instructions	3)	
1	Description of exploited	•						
2	Gross unrelated busines						2	
3	3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)			3				
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 activ						5	
6	Expenses attributable to	income ente	red on line 5				6	
7	Excess exempt expense 4. Enter here and on Par						7	

Schedule A (Form 990-T) 2022

Schedu	le A (Form 990-T) 2022					Page 4
Par	IX Advertising Income					
1	Name(s) of periodical(s). Check box if re	porting two o	r more periodica	als on a conso	olidated basis.	
	B					
Entor	D amounts for each periodical listed above i	in the correct	onding column			
Enter	amounts for each periodical listed above			B	С	D
2	Gross advertising income		279,681		U	
а	Add columns A through D. Enter here an	nd on Part I, li		۹)		. 279,681
3	Direct advertising costs by periodical		146,988			
а	Add columns A through D. Enter here an	nd on Part I. li	ne 11. column (l	B)		. 146,988
	_			_,		
4	Advertising gain (loss). Subtract line 3 fr					
	2. For any column in line 4 showing complete lines 5 through 8. For any col					
	line 4 showing a loss or zero, do not co					
	lines 5 through 7, and enter zero on line					
_	-		132,693			
5	Readership costs		132,693			
6	Circulation income		0			
7	Excess readership costs. If line 6 is les					
	line 5, subtract line 6 from line 5. If line 5 than line 6, enter zero					
•			132,693			
8	Excess readership costs allowed					
	deduction. For each column showing a gline 4, enter the lesser of line 4 or line 7					
			132,693		<u> </u>	
а	Add line 8, columns A through D. Enter					
Par	Part II, line 13					. 132,095
Par	Compensation of Onicers, Di	rectors, and	u musiees (se			
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
	I. Enter here and on Part II, line 1 .					0
Par	XI Supplemental Information (see	e instructior	າຣ)			

Department of the Treasury

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20 22

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

Internal Revenue Service	Do not enter SSN numbers on this fo	rm as it may be made public if your organ	ization is a 501(c)(3).	501(c)(3) (Organiza	tions Only	
A Name of the organizat	ion		B Employer ider	ntification	numbe	er	
REGENTS OF THE UNIV	ERSITY OF MICHIGAN		38	-6006309			
C Unrelated business	activity code (see instructions)	550000	D Sequence:	11	of	18	

E Describe the unrelated trade or business MANAGEMENT OF COMPANIES AND ENTERPRISES

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	;	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(474,836)			(474,836)
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	(474,836)		0	(474,836)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on ded	uctions. Dedu	uctio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages			[2	188
3	Repairs and maintenance			[3	0
4	Bad debts			[4	0
5	Interest (attach statement). See instructions			[5	0
6	Taxes and licenses			[6	0
7	Depreciation (attach Form 4562). See instructions		7	0		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	36
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	46
15	Total deductions. Add lines 1 through 14	• •			15	270
16	Unrelated business income before net operating loss deductio					
	column (C)				16	(475,106)
17	Deduction for net operating loss. See instructions				17	0
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16			18	(475,106)
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 740360	5	Sched	ule A (Form 990-T) 2022

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20**22**

Department of the Treasury Internal Revenue Service	Go to <i>www.irs.gov/Form990T</i> for instructions and the latest info Do not enter SSN numbers on this form as it may be made public if your organi		Open to Public Inspection for 501(c)(3) Organizations Only
A Name of the organizati	on	B Employer iden	tification number
REGENTS OF THE UNIV	ERSITY OF MICHIGAN	38-	6006309

E Describe the unrelated trade or business ADMINISTRATIVE & SUPPORT & WASTE MANAGEMENT & REMEDIATION SERVICES

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	706,462			706,462
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	706,462		0	706,462
Par			limitations on ded	luctions. Dec	luctio	ns must be
	directly connected with the unrelated business inco					
1	Compensation of officers, directors, and trustees (Part X) $\ . \ .$				1	0
2	Salaries and wages				2	552
3	Repairs and maintenance				3	0
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses				6	0
7	Depreciation (attach Form 4562). See instructions			0		
8	Less depreciation claimed in Part III and elsewhere on return .			0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	107
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)	•			13	0
14	Other deductions (attach statement)	•			14	134
15	Total deductions. Add lines 1 through 14				15	793
16	Unrelated business income before net operating loss deduction					
	column (C)				16	705,669
17	Deduction for net operating loss. See instructions				17	0
18	Unrelated business taxable income. Subtract line 17 from lin				18	705,669
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 74036O		Sched	ule A (Form 990-T) 2022

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20**22**

	Go to www.irs.gov/Form9907 for instructions and the latest information.	
D		
Department of the Treasury		Open to F
Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).	E04/-\/0)
Internal nevenue Service		501(C)(3)

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

A Name of the organization	B Employer iden	tification	numbe	ər
REGENTS OF THE UNIVERSITY OF MICHIGAN	38	-6006309		
C Unrelated business activity code (see instructions)	D Sequence:	13	of	18

E Describe the unrelated trade or business EDUCATIONAL SERVICES

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expe	nses	(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
С	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(48,463)			(48,463)
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	(48,463)		0	(48,463)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. D	eductio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages				2	322
3	Repairs and maintenance				3	0
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses				6	0
7	Depreciation (attach Form 4562). See instructions		7		0	
8	Less depreciation claimed in Part III and elsewhere on return .		8a		0 8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	63
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	78
15	Total deductions. Add lines 1 through 14				15	463
16	Unrelated business income before net operating loss deductio column (C)				3, 16	(48,926)
17					17	(40,920)
18	Unrelated business taxable income. Subtract line 17 from lin	ie 16			18	(48,926)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2 22

	Go to www.irs.gov/Form9907 for instructions and the latest information.	
Department of the Treesury		
Department of the Treasury		Open to Public Inspection to
Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).	501(c)(3) Organizations Only

to Public Inspection for

A Name of the organization	B Employer identification number	
REGENTS OF THE UNIVERSITY OF MICHIGAN	38-6006309	
C Unrelated business activity code (see instructions)	D Sequence: ¹⁴ of ¹⁸	

E Describe the unrelated trade or business HEALTH CARE & SOCIAL ASSISTANCE

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
С	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(537,528)			(537,528)
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
-	organization (Part VI)	8	14,321		0	14,321
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	(523,207)		0	(523,207)
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec		uctio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages			[2	302
3	Repairs and maintenance			[3	0
4	Bad debts			[4	0
5	Interest (attach statement). See instructions			[5	0
6	Taxes and licenses				6	0
7	Depreciation (attach Form 4562). See instructions		7	0		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	58
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	73
15	Total deductions. Add lines 1 through 14			·	15	433
16	Unrelated business income before net operating loss deductio column (C)				16	(523,640)
17				-	17	(523,640)
18	Unrelated business taxable income. Subtract line 17 from lin			-	18	(523,640)
	perwork Reduction Act Notice, see instructions.		at. No. 74036O			ule A (Form 990-T) 2022

	le A (Form 990-T) 2022				Page 2
Part	Cost of Goods Sold Enter me				
1	Inventory at beginning of year				0
2 3	Purchases .				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7	Inventory at end of year				0
8	Cost of goods sold. Subtract line 7 from line 6.				0
9 Dort	Do the rules of section 263A (with respect to prop				? 🗌 Yes 🛄 No
Pan 1	Rent Income (From Real Property an Description of property (property street address, A	-	-		
	B C				
	D	•		•	
0	Dept received or econylad	Α	В	С	D
2 a	Rent received or accrued 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 column	ns A through D. Enter	here and on Part I, li	ne 6, column (A)	0
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D. Enter here and c	on Part I, line 6, colu	mn (B)	0
Par	-			(_)	
1	Description of debt-financed property (street add A	,	? code). Check if a c	lual-use. See instruc	tions.
	B C				
	C				
		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 c	Other deductions (attach statement) 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 7	Divide line 4 by line 5	%	%	%	%
8	Total gross income (add line 7, columns A through	ugh D). Enter here ar	nd on Part I, line 7, d	column (A)	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns	A through D. Enter h	nere and on Part I, lir	ne 7, column (B)	0
11	Total dividends - received deductions include	ed in line 10 . . .		-	0
				Sched	ule A (Form 990-T) 2022

Par	t VI Interest, Annuit	ties, Royaltie	s, and Rents	s fror	n Controlled Org	anizations (see instrue	ctions)
					Exempt Co	ntrolled Organizations		
	1. Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instructio	s)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	•	Deductions directly connected with come in column 5
(1) N	IETRO HOSPITAL	38-0593405	(238	3,568)	1,835,983	14,321		
(2)								
(3)								
(4)								
			Nonexemp	ot Cor	ntrolled Organization	IS		
	7. Taxable income	inco	Net unrelated income (loss)9. Total of specified payments made10. Part of colu that is included controlling organiz		10. Part of column 9 that is included in the controlling organization's gross income		Deductions directly connected with ome in column 10	
(1)								
(2)								
(3)								
(4)								
Tota		<u>.</u>	<u></u>	<u>.</u> .		Add columns 5 and 10. Enter here and on Part I, line 8, column (A) 14,321	Enter	columns 6 and 11. r here and on Part I, ne 8, column (B) 0
Par	Investment Inco	ome of a Sec	ction 501(c)(1	7), (9)), or (17) Organiza	ation (see instructions))	
	1. Description of income	2. Amou	nt of income		3. Deductions lirectly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)	
(1)								
(2)								
(3)								
(4)								
		Enter here	ounts in column 2. Jere and on Part I, 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)		
Tota			0					0
Part			ncome, Othe	er Tha	an Advertising Inc	come (see instructions	s)	
1	Description of exploited	·						
2	Gross unrelated busines	ss income fron	n trade or busi	ness.	Enter here and on Pa	art I, line 10, column (A)	2	
3	Expenses directly connelline 10, column (B)	•					3	
4	Net income (loss) from lines 5 through 7					•	4	
5	Gross income from acti						5	
6	Expenses attributable to	•					6	
7	•					han the amount on line		
	4. Enter here and on Part II, line 12							

Schedule A (Form 990-T) 2022

Part	Advertising Income					
1	Name(s) of periodical(s). Check box if rep	porting t	wo or more periodi	cals on a consol	idated basis.	
	Α 🗌					
	B					
	C					
Entor	D amounts for each periodical listed above i	n the co	rresponding colum	n		
LIIIEI	amounts for each periodical listed above i			в	С	D
2	Gross advertising income		~			
а	Add columns A through D. Enter here an	d on Pa	rt I, line 11, column	(A)		0
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here an	d on Pa	rt I, line 11, column	(B)		0
4	Advertising gain (loss). Subtract line 3 fro 2. For any column in line 4 showing a complete lines 5 through 8. For any col- line 4 showing a loss or zero, do not co lines 5 through 7, and enter zero on line 8	a gain, umn in mplete				
5 6 7	Readership costs	 s than is less				
8	Excess readership costs allowed deduction. For each column showing a gline 4, enter the lesser of line 4 or line 7	as a gain on				
а	Add line 8, columns A through D. Ente Part II, line 13					
Par	t X Compensation of Officers, Dir					
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	al. Enter here and on Part II, line 1					0
Part	XI Supplemental Information (see	e instru	ctions)			

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2022

	Go to www.irs.gov/Form990T for instructions and the latest information.
Department of the Treasury	Denote when c_{0} and b_{1} is a contract of the second contract in the contract is $c_{0} = c_{0} d_{1} c_{1} c_{2}$

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).

Internal Revenue Service	Do not enter SSN numbers on this	form as it may be made public if your organi	zation is a 501(c)(3).	501(c)(3)) Organiza	tions Only
A Name of the organizati	on		B Employer ider	tificatio	n numbe	er
REGENTS OF THE UNIV	38-6006309					
C Unrelated business a	activity code (see instructions)	710000	D Sequence:	15	of	18

E Describe the unrelated trade or business ARTS, ENTERTAINMENT, & RECREATION

Par	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	5	(C) Net
1a	Gross receipts or sales 1,877,832					
b	Less returns and allowances 0 c Balance	1c	1,877,832			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	1,877,832			1,877,832
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0			0
С	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	0			0
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
-	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	1,877,832		0	1,877,832
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Ded	uctior	is must be
1	Compensation of officers, directors, and trustees (Part X) $\ . \ .$			+	1	0
2	Salaries and wages				2	1,073,489
3	Repairs and maintenance				3	219,142
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses				6	0
7	Depreciation (attach Form 4562). See instructions					
8	Less depreciation claimed in Part III and elsewhere on return .				8b	422,207
9	Depletion			+	9	0
10	Contributions to deferred compensation plans			+	10	0
11	Employee benefit programs				11	87,202
12	Excess exempt expenses (Part VIII)			•	12	0
13	Excess readership costs (Part IX)			ł	13	0
14	Other deductions (attach statement)				14	466,123
15 16	Total deductions. Add lines 1 through 14				15	2,268,163
10	Unrelated business income before net operating loss deductio column (C)				16	(200.224)
17					16	(390,331)
17 18	Deduction for net operating loss. See instructions Unrelated business taxable income. Subtract line 17 from lin			ł	17 18	0 (390,331)
	perwork Reduction Act Notice, see instructions.					(390,331) Ile A (Form 990-T) 2022
101 10	ipermont neuronon Act nouve, see instructions.	0a			Joneur	

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Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20 22

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). (30 Organizations Only

Open to Public Inspection for

A Name of the organization		B Employer ider	ntificatio	n numb	er	
REGENTS OF THE UNIVERSITY OF MICHIGAN		38	600630	9		
C Unrelated business activity code (see instructions)	720000	D Sequence:	16	of	18	

E Describe the unrelated trade or business ACCOMMODATION & FOOD SERVICES

Par	t Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 1,877,913					
b	Less returns and allowances 0 c Balance	1c	1,877,913			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	1,877,913			1,877,913
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	0			0
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	107,394			107,394
13	Total. Combine lines 3 through 12	13	1,985,307		0	1,985,307
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on ded	uctions. Dedu	ictio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages			[2	1,039,192
3	Repairs and maintenance			[3	308,598
4	Bad debts				4	0
5	Interest (attach statement). See instructions				5	0
6	Taxes and licenses				6	0
7	Depreciation (attach Form 4562). See instructions			0		
8	Less depreciation claimed in Part III and elsewhere on return .			-	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	4,357
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	987,103
15	Total deductions. Add lines 1 through 14				15	2,339,250
16	Unrelated business income before net operating loss deductio column (C)					
4-				-	16	(353,943)
17	Deduction for net operating loss. See instructions				17	0
<u>18</u>	Unrelated business taxable income. Subtract line 17 from lin		· · · · · · ·		18	(353,943)
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 74036O	5	cned	ule A (Form 990-T) 2022

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

20 2 2

	Go to www.irs.gov/Form9907 for instructions and the latest information.
Department of the Treasury	Do not onto: SSN numbers on this form as it may be made public if your organization is a $E01(a)(2)$

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

Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if y	your organization is a 501(c)(3). 501(c)(3) Organizations Only
A Name of the organizati	on	B Employer identification number
REGENTS OF THE UNIV	ERSITY OF MICHIGAN	38-6006309
C Unrelated business a	activity code (see instructions)	D Sequence: ¹⁷ of ¹⁸

E Describe the unrelated trade or business <u>OTHER SERVICES (EXCEPT PUBLIC ADMINISTRATION)</u>

Pa	t Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 0					
b	Less returns and allowances 0 c Balance	1c	0			
2	Cost of goods sold (Part III, line 8)	2	0			
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D (Form 1041 or					
	Form 1120)). See instructions	4a	0			0
b	Net gain (loss) (Form 4797) (attach Form 4797). See					
	instructions	4b	0			0
с	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	120,302			120,302
6	Rent income (Part IV)	6	0		0	0
7	Unrelated debt-financed income (Part V)	7	0		0	0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8	0		0	0
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9	0		0	0
10	Exploited exempt activity income (Part VIII)	10	0		0	0
11	Advertising income (Part IX)	11	0		0	0
12	Other income (see instructions; attach statement)	12	0			0
13	Total. Combine lines 3 through 12	13	120,302		0	120,302
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on ded	luctions. Dedu	ictio	ns must be
1	Compensation of officers, directors, and trustees (Part X)				1	0
2	Salaries and wages			[2	63
3	Repairs and maintenance			[3	0
4	Bad debts			[4	0
5	Interest (attach statement). See instructions			[5	0
6	Taxes and licenses			[6	0
7	Depreciation (attach Form 4562). See instructions		7	0		
8	Less depreciation claimed in Part III and elsewhere on return .		8a	0	8b	0
9	Depletion				9	0
10	Contributions to deferred compensation plans				10	0
11	Employee benefit programs				11	12
12	Excess exempt expenses (Part VIII)				12	0
13	Excess readership costs (Part IX)				13	0
14	Other deductions (attach statement)				14	15
15	Total deductions. Add lines 1 through 14				15	90
16	Unrelated business income before net operating loss deductio					
	column (C)	• •		· · · ·	16	120,212
17					17	0
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16			18	120,212
For Pa	perwork Reduction Act Notice, see instructions.	Ca	at. No. 74036O	s	ched	ule A (Form 990-T) 2022

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

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	Go to www.irs.gov/Form990T for instructions and the latest information.	L
Department of the Treasury		
Dopartmont of the frequency		

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

Internal Revenue Service	Do not enter SSN numbers on this form	h as it may be made public if your organi	zation is a 501(c)(3).	501(c)(3)	Organiza	tions Only
A Name of the organizati	B Employer identification number					
REGENTS OF THE UNIV	38-6006309					
C Unrelated business a	activity code (see instructions) .	901101	D Sequence:	18	of	18

E Describe the unrelated trade or business <u>INVESTMENT ACTIVITIES</u>

Par	t Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 0				
b	Less returns and allowances 0 c Balance	1c	0		
2	Cost of goods sold (Part III, line 8)	2	0		
3	Gross profit. Subtract line 2 from line 1c	3	0		0
4a	Capital gain net income (attach Schedule D (Form 1041 or				
	Form 1120)). See instructions	4a	49,037,187		49,037,187
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b	0		0
с	Capital loss deduction for trusts	4c	0		0
5	Income (loss) from a partnership or an S corporation (attach		0		0
	statement)	5	(16,641,025)		(16,641,025)
6	Rent income (Part IV)	6	(10,041,023)		0 0
7	Unrelated debt-financed income (Part V)	7	78,752,397	91,745,1	<u> </u>
8	Interest, annuities, royalties, and rents from a controlled	-	10,102,001	01,110,1	(12,002,110)
	organization (Part VI)	8	0		0 0
9	Investment income of section 501(c)(7), (9), or (17)	-			
	organizations (Part VII)	9	0		0 0
10	Exploited exempt activity income (Part VIII)	10	0		0 0
11	Advertising income (Part IX)	11	0		0 0
12	Other income (see instructions; attach statement)	12	0		0
13	Total. Combine lines 3 through 12	13	111,148,559	91,745,1	10 19,403,449
Par	t II Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inco		limitations on dec	luctions. Deduc	tions must be
1	Compensation of officers, directors, and trustees (Part X)				1 0
2	Salaries and wages				2 94,830
3	Repairs and maintenance				3 0
4	Bad debts				4 0
5	Interest (attach statement). See instructions				5 0
6	Taxes and licenses		1 1		6 0
7	Depreciation (attach Form 4562). See instructions			0	
8	Less depreciation claimed in Part III and elsewhere on return .				b 0
9	Depletion				9 0
10	Contributions to deferred compensation plans				0 0
11	Employee benefit programs				1 18,691
12	Excess exempt expenses (Part VIII)				2 0
13	Excess readership costs (Part IX)				3 0
14	Other deductions (attach statement)				4 22,275
15	Total deductions. Add lines 1 through 14				5 135,796
16	Unrelated business income before net operating loss deductio column (C)				6 19,267,653
17	Deduction for net operating loss. See instructions				7 0
18	Unrelated business taxable income. Subtract line 17 from lin				8 19,267,653
	perwork Reduction Act Notice, see instructions.		at. No. 740360		hedule A (Form 990-T) 2022

	e A (Form 990-T) 2022				Page 2
Part		thod of inventory val			
1	Inventory at beginning of year				0
2	Purchases				0
3	Cost of labor				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6	Total. Add lines 1 through 5				0
7	Inventory at end of year				0
8 9	Cost of goods sold. Subtract line 7 from line 6. Do the rules of section 263A (with respect to prop		•		
	IV Rent Income (From Real Property an				
1	Description of property (property street address,				
-	A	•). enteen n a aaa. ae		
	B []				
	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.				
U	Add lines 2a and 2b, columns A through D				
	-				
3	Total rents received or accrued. Add line 2c column	ns A through D. Enter	here and on Part I, lir	ie 6, column (A)	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D Entor horo and a	n Dart I, lina 6, aalur	nn (P)	0
	-			іпі (b) <u> </u>	Ū
Par		,			
1	Description of debt-financed property (street add		,		ions.
	A SERIES 2022A GENERAL REVENUE BONDS				
	B ☐ SERIES 2022B GENERAL REVENUE BONDS C ☐ SERIES 2020B GENERAL REVENUE BONDS				
		, JUGZ WOLVERINE TO	MER, ANN ARBOR, I	11 40109	
		Α	В	С	D
2	Gross income from or allocable to debt-financed			•	_
	property	56,094,050	10,004,156	12,654,191	
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement) .	0	0	0	
b	Other deductions (attach statement)	71,804,203	10,570,731	9,370,176	
С	Total deductions (add lines 3a and 3b,				
	columns A through D)	71,804,203	10,570,731	9,370,176	
4	Amount of average acquisition debt on or allocable			/	
-	to debt-financed property (attach statement)	1,700,000,000	300,000,000	422,915,000	
5	Average adjusted basis of or allocable to debt- financed property (attach statement)	1 700 000 000	200,000,000	400.045.000	
e		1,700,000,000 100.00 %	300,000,000 100.00 %	422,915,000 100.00 %	%
6 7	Divide line 4 by line 5	56,094,050	10,004,156	12,654,191	%
8	Total gross income (add line 7, columns A through	ugh D). Enter here an	d on Part I, line 7, c	olumn (A)	78,752,397
9	Allocable deductions. Multiply line 3c by line 6	71,804,203	10,570,731	9,370,176	
10	Total allocable deductions. Add line 9, columns	A through D Entor b	ere and on Part L lin		91,745,110
		•		· · · · -	
11	Total dividends - received deductions include	ea in line 10		· · · · · <u>-</u>	0
				• • • •	

Schedule A (Form 990-T) 2022 4/26/2024 11:55:08 AM

Par	t VI Interest, Annuiti	ies, Royaltie	s, and Rents	s froi	m Controlled Org	anizations (see instruc	ctions	3)
		Exempt Controlled Organizations						
	1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)		 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)								
			Nonexemp	ot Cor	ntrolled Organization	าร		
	7. Taxable income	inco	: unrelated me (loss) structions)		. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)								
(2)								
(3)								
(4)								
Tota	als					Add columns 5 and 10. Enter here and on Part I, line 8, column (A) 0	Ente	I columns 6 and 11. r here and on Part I, ne 8, column (B) 0
Par	t VII Investment Inco	ome of a Sec	ction 501(c)(7	7), (9), or (17) Organiza	ation (see instructions)		
	1. Description of income		nt of income	с	3. Deductions lirectly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)	
(1)								
(2)								
(3)								
(4)								
		Enter here	nts in column 2. and on Part I, column (A)				Add amounts in column 5. Enter here and on Part I, line 9, column (B)	
Tota			0					0
Par	-		ncome, Othe	r Th	an Advertising In	come (see instructions	s)	
1	Description of exploited							
2								
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 4							
5		tivity that is not unrelated business income						
6	Expenses attributable to income entered on line 5							
7	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 7							

Schedule A (Form 990-T) 2022

Part	Advertising Income					
1	Name(s) of periodical(s). Check box if rep	porting t	wo or more period	cals on a consol	idated basis.	
	Α 🗌					
	B					
	C					
Entor	D amounts for each periodical listed above i	n the co	rresponding colum	n		
LIIIEI	amounts for each periodical listed above i			B	С	D
2	Gross advertising income				U	
а	Add columns A through D. Enter here an	d on Pa	rt I, line 11, columr	(A)		0
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here an	d on Pa	rt I, line 11, columr	(B)		0
4	Advertising gain (loss). Subtract line 3 fro 2. For any column in line 4 showing a complete lines 5 through 8. For any col line 4 showing a loss or zero, do not co lines 5 through 7, and enter zero on line 8	a gain, umn in mplete				
5 6 7	Readership costs	s than is less				
8	Excess readership costs allowed deduction. For each column showing a gline 4, enter the lesser of line 4 or line 7	as a gain on				
а	Add line 8, columns A through D. Ente Part II, line 13					
Par	t X Compensation of Officers, Dir					
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	I. Enter here and on Part II, line 1 .					0
Part	XI Supplemental Information (see	e instru	ctions)			

Return Reference - Identifier	Explanation
BOOK CARE - NAME AND ADDRESS	EDWARD J. JENNINGS, 3003 S. STATE STREET, ANN ARBOR, MI 48109-1287

Form 990T Part I, Line 4

Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2019	458,128	0			458,128	
2020	383,809	0			383,809	
2021	81,174	0			81,174	
2022	131,958	0			131,958	
2023	113,594	0			113,594	
Totals	1,168,663	0	0	0	1,168,663	

Form 990T Part I, Line 6

Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2010	44,333,664		35,681,438	8,652,226	0	
2011	23,510,478			13,189,101	10,321,377	
2012	25,136,623				25,136,623	
2013	21,694,251				21,694,251	
2014	5,297,406				5,297,406	
2015	859,855				859,855	
2016	15,197,656				15,197,656	
2017	15,771,365				15,771,365	
2018	13,799,872				13,799,872	
Totals	165,601,170	0	35,681,438	21,841,327	108,078,405	

Form 990T Part IV, Line 5

Business Activity Code	Available post-2017 NOL carryover
31	6,272,134
42	1,528,362
48	7,699,763
51	528,480
52	11,370,203
53	19,820,369
54	6,212,170
55	922,088
56	243,240
61	104,287
62	2,691,859
71	5,248,228
72	2,929,393
81	556,340
90	176,816,029

Name of Partnership	Share of gross income	Share of deductions	Gain or loss
MINING			
(1) SCHEDULE K-1		1,808	(1,808)
То	otal 0	1,808	(1,808)
UTILITIES			
(1) SCHEDULE K-1		45,375,974	(45,375,974)
	otal 0	45,375,974	(45,375,974)
MANUFACTURING			
(1) SCHEDULE K-1	1,146,517		1,146,517
WHOLESALE TRADE	tal 1,146,517	0	1,146,517
(1) SCHEDULE K-1	567,905		567,905
	tal 567,905	0	567,90 5
RETAIL TRADE	507,505	v	501,505
(1) SCHEDULE K-1		7,746	(7,746)
	tal 0	7,746	(7,746)
TRANSPORTATION AND WAREHOUSING	•	-,•	(.,
(1) SCHEDULE K-1		6,141,548	(6,141,548)
	otal 0	6,141,548	(6,141,548)
INFORMATION		· ·	
(1) SCHEDULE K-1	35,737		35,737
Το	tal 35,737	0	35,737
FINANCE AND INSURANCE			
(1) SCHEDULE K-1		1,917,529	(1,917,529)
Τα	otal 0	1,917,529	(1,917,529)
REAL ESTATE RENTAL & LEASING			
(1) SCHEDULE K-1		768,288	(768,288)
	tal 0	768,288	(768,288)
PROFESSIONAL, SCIENTIFIC, & TECHNICAL SERVICES			
(1) SCHEDULE K-1		1,985,500	(1,985,500)
	otal 0	1,985,500	(1,985,500)
MANAGEMENT OF COMPANIES AND ENTERPRISES (1) SCHEDULE K-1		474.000	(474,836)
	otal 0	474,836 474,836	(474,836)
ADMINISTRATIVE & SUPPORT & WASTE MANAGEMENT & R		474,030	(474,030)
(1) SCHEDULE K-1	706,462		706,462
	tal 706,462	0	706,462
EDUCATIONAL SERVICES			,
(1) SCHEDULE K-1		48,463	(48,463)
Τα	otal 0	48,463	(48,463)
HEALTH CARE & SOCIAL ASSISTANCE			
(1) SCHEDULE K-1		537,528	(537,528)
Το	tal 0	537,528	(537,528)
ARTS, ENTERTAINMENT, & RECREATION			
(1) SCHEDULE K-1			C
Та	otal 0	0	0
OTHER SERVICES (EXCEPT PUBLIC ADMINISTRATION			
(1) SCHEDULE K-1	120,302		120,302
	tal 120,302	0	120,302
INVESTMENT ACTIVITIES			
(1) SCHEDULE K-1		16,641,025	(16,641,025)
Το	otal 0	16,641,025	(16,641,025)

Schedule A	- Part I	, Line 12
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Other Income

Description	Amount
ACCOMMODATION & FOOD SERVICES	
(1) COMMISSION INCOME	107,394
Total for Schedule A - Part I, Line 12	107,394

Schedule A -	Part II,	Line 6
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Taxes and Licenses

Description	Amount
REAL ESTATE RENTAL & LEASING	
(1) TAX EXPENSE	1,484

Description	Amount
MINING	
(1) SCHEDULE K-1	122
UTILITIES	
(1) SCHEDULE K-1	488
MANUFACTURING	
(1) SCHEDULE K-1	353
WHOLESALE TRADE	
(1) SCHEDULE K-1	17
RETAIL TRADE	
(1) SCHEDULE K-1	31
TRANSPORTATION AND WAREHOUSING	51
(1) SCHEDULE K-1	155
INFORMATION	100
(1) SCHEDULE K-1	31
	31
	505
(1) SCHEDULE K-1	565
REAL ESTATE RENTAL & LEASING	
(1) SCHEDULE K-1	92
(2) UTILITIES	12,969
Tota	I 13,061
PROFESSIONAL, SCIENTIFIC, & TECHNICAL SERVICES	
(1) OTHER	2,008
(2) SCHEDULE K-1	302
Tota	I 2,310
MANAGEMENT OF COMPANIES AND ENTERPRISES	
(1) SCHEDULE K-1	46
ADMINISTRATIVE & SUPPORT & WASTE MANAGEMENT & REMEDIATION SERVICES	
(1) SCHEDULE K-1	134
EDUCATIONAL SERVICES	
(1) SCHEDULE K-1	78
HEALTH CARE & SOCIAL ASSISTANCE	
(1) SCHEDULE K-1	73
ARTS, ENTERTAINMENT, & RECREATION	1
(1) SCHEDULE K-1	0
(2) UTILITIES	103,065
(3) EQUIPMENT	30,613
(4) SUPPLIES	125,605
(5) PROMOTION & MARKETING	102,810
(6) FOOD CONCESSIONS	6,486
(7) DUES & MEMBERSHIPS	5,706
(8) HOSTING & OTHER PRODUCTION COSTS	6,730
(9) OTHER	54,187
(10) CONSULTING SERVICES	29,341
(11) PROFESSIONAL DEVELOPMENT & TRAVEL	1,580
Tota	
ACCOMMODATION & FOOD SERVICES	
(1) INSURANCE	27,462
(2) MANAGEMENT FEE	63,010
(3) TRAVEL & STAFF DEVELOPMENT	1,699
(4) CATERING & ACCOMMODATION SERVICES	475,452
(5) INTEREST	23,209
(6) FEES	22,052
(7) UTILITIES	110,145
(8) EQUIPMENT	
	247,018
(9) OTHER	17,056
Tota	I 987,103

OTHER SERVICES (EXCEPT PUBLIC ADMINISTRATION	
(1) SCHEDULE K-1	15
INVESTMENT ACTIVITIES	
(1) SCHEDULE K-1	22,275

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining
MINING					
2020	849,452				849,452
2022	12,572				12,572
2023	2,528				2,528
Totals	864,552	0	0	0	864,552
UTILITIES					
2022	13,967,290				13,967,290
2023	45,378,854				45,378,854
Totals	59,346,144	0	0	0	59,346,144
MANUFACTURING					
2020	1,328,741				1,328,741
2021	2,584,607				2,584,607
2022	2,358,786				2,358,786
Totals		0	0	0	6,272,134
WHOLESALE TRADE					
2021	997,392				997,392
2022	530,970				530,970
Totals		0	0	0	1,528,362
RETAIL TRADE			-		//
2023	7,926				7,926
Totals		0	0	0	7,926
TRANSPORTATION AN	/	· · ·	•	· · ·	1,020
2021	1,337,947				1,337,947
2022	219,355				219,355
2022	6,142,461				6,142,461
Totals		0	0	0	7,699,763
INFORMATION	7,099,703	U	U	U	7,099,703
2020	1,729				1,729
2020	186,044				186,044
2022 Totals	340,707	0	0	0	340,707
FINANCE AND INSURA		0	U	0	528,480
					9,248,590
2020	9,248,590				, ,
2021	200,754				200,754
2023	1,920,859				1,920,859
Totals		0	0	0	11,370,203
REAL ESTATE RENTA					0.004.057
2019	2,861,357				2,861,357
2020	4,659,414				4,659,414
2021	3,078,218				3,078,218
2022	4,400,504				4,400,504
2023	4,820,876				4,820,876
Totals		0	0	0	19,820,369
	NTIFIC, & TECHNICAL S	ERVICES			
2019	10,387				10,387
2020	87,217				87,217
2021	1,966,823				1,966,823
2022	2,152,476				2,152,476
2023	1,995,267				1,995,267
Totals	6,212,170	0	0	0	6,212,170
MANAGEMENT OF CO	MPANIES AND ENTERPI	RISES			
2021	129,067				129,067
2022	317,915				317,915
2023	475,106				475,106
Totals	922,088	0	0	0	922,088

2020	238,861				238,861
2021	4,379				4,379
					0
Totals	243,240	0	0	0	243,240
EDUCATIONAL SERVIC	ES				
2020	4,075				4,075
2021	3,887				3,887
2022	47,399				47,399
2023	48,926				48,926
Totals	104,287	0	0	0	104,287
HEALTH CARE & SOCI	AL ASSISTANCE				
2020	1,909,430				1,909,430
2022	258,789				258,789
2023	523,640				523,640
Totals	2,691,859	0	0	0	2,691,859
ARTS, ENTERTAINMEN	IT, & RECREATION				
2019	625,189				625,189
2020	1,493,614				1,493,614
2021	1,235,612				1,235,612
2022	1,503,482				1,503,482
2023	390,331				390,331
Totals	5,248,228	0	0	0	5,248,228
ACCOMMODATION & F	OOD SERVICES				
2019	121,121				121,121
2020	798,398				798,398
2021	1,038,641				1,038,641
2022	617,290				617,290
2023	353,943				353,943
Totals	2,929,393	0	0	0	2,929,393
OTHER SERVICES (EX	CEPT PUBLIC ADMINIST	RATION			
2020	138,105				138,105
2021	418,235				418,235
Totals	556,340	0	0	0	556,340
INVESTMENT ACTIVITI	ES				
2019	110,049,396				110,049,396
2020	34,951,450				34,951,450
2021	31,815,183				31,815,183
Totals	176,816,029	0	0	0	176,816,029

Rent Income (From Real Property and Personal Property Leased With Real Property)

	Dual use	1. Description of property (Address)	2. R	ent received or acci	rued	4. Deductions
			property (if the percentage of rent for personal property is more	(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	directly connected with the income in columns 2(a) and 2(b)
REAL ESTATE	RENTAL & LEA	SING				
(1)		COMMUNICATION TOWER, ANN ARBOR, MI 48103		139,160	139,160	71,058
(2)		STADIUM, 1000 SOUTH STATE STREET, ANN ARBOR, MI 48109		562,071	562,071	309,649

Deductions directly connected with the income in lines 2(a) and 2(b)

REAL ESTATE RENTAL & LEASING			
(1) NBC BUILDING, FLINT, MI 48502	Description	Amount	
	RENTAL		196,467
(2) RIVERFRONT BUILDING, FLINT, MI 48502	Description	Amount	
	RENTAL		70,756
(3) UNIVERSITY CENTER, FLINT, MI 48502	Description	Amount	
	RENTAL		10,520
(4) COMMUNICATION TOWER, ANN ARBOR, MI	Description	Amount	
48103	RENTAL		71,058
(5) STADIUM, 1000 SOUTH STATE STREET, ANN	Description	Amount	
ARBOR, MI 48109	RENTAL		309,649
	Total		658,450
Total for Schedule A - Part IV, Line 4, Deductions directly connected with the income in lines 2(a) and 2(b)			658,450

INVESTMENT ACTIVITIES		
(1) SERIES 2022A GENERAL REVENUE BONDS, 5082 WOLVERINE	Description	Amount
TOWER, ANN ARBOR, MI 48109	DEBT SERVICE INTEREST EXPENSE	71,804,203
(2) SERIES 2022B GENERAL REVENUE BONDS, 5082 WOLVERINE	Description	Amount
(2) SERIES 2022B GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN ARBOR, MI 48109	DEBT SERVICE INTEREST EXPENSE	10,570,731
	Description	Amount
(3) SERIES 2020B GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN ARBOR, MI 48109	DEBT SERVICE INTEREST EXPENSE	9,370,176
	Total	91,745,110
Total for Schedule A - Part V, Line 3(b), Other Deductions		91,745,110

INVESTMENT ACTIVITIES			
(1) SERIES 2022A GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN ARBOR, MI 48109	Monthly Average Acquisition Indebtedness	Percent Allocable	Allocable Average Acquisition Indebtedness
	1,700,000,000	100.00%	1,700,000,000
(2) SERIES 2022B GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN ARBOR, MI 48109	Monthly Average Acquisition Indebtedness	Percent Allocable	Allocable Average Acquisition Indebtedness
	300,000,000	100.00%	300,000,000
(3) SERIES 2020B GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN ARBOR, MI 48109	Monthly Average Acquisition Indebtedness	Percent Allocable	Allocable Average Acquisition Indebtedness
	422,915,000	100.00%	422,915,000
Total for Schedule A - Part V, Line 4, Average Acquisition Indebtness			2,422,915,000

INVESTMENT ACTIVITIES				
(1) SERIES 2022A GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN	Description	Adjusted Basis Amount	Percent Allocable	Allocable Adjusted Basis
ARBOR, MI 48109	SERIES 2022A GENERAL REVENUE BONDS	1,700,000,000	100.00%	1,700,000,000
(2) SERIES 2022B GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN	Description	Adjusted Basis Amount	Percent Allocable	Allocable Adjusted Basis
ARBOR, MI 48109	SERIES 2022B GENERAL REVENUE BONDS	300,000,000	100.00%	300,000,000
(3) SERIES 2020B GENERAL REVENUE BONDS, 5082 WOLVERINE TOWER, ANN	Description	Adjusted Basis Amount	Percent Allocable	Allocable Adjusted Basis
ARBOR, MI 48109	SERIES 2020B GENERAL REVENUE BONDS	422,915,000	100.00%	422,915,000
Total for Schedule A - Part V, Line 5, Average Adjusted Basis				2,422,915,000

Schedule	A - P	art IX.	Line 2

Gross Advertising Income

PROFESSIONAL, SCIENTIFIC, & TECHNICAL SERVICES		
	Description	Amount
(1) PUBLICATION		279,681
	Total	279,681

Sche	dule	A -	Part	IX.	Line	3

Direct Advertising Costs

PROFESSIONAL, SCIENTIFIC, & TECHNICAL SERVICES		
	Description	Amount
(1) PUBLICATION		146,988
	Total	146,988

Readership Costs

PROFESSIONAL, SCIENTIFIC, & TECHNICAL SERVICES		
	Description	Amount
(1) PUBLICATION		132,693
	Total	132,693

Department of the Treasury

Capital Gains and Losses

OMB No. 1545-0123

2022

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Interna	al Revenue Service	Go to www.irs.gov/Form	1120 for instructions a	and the latest informa	ation.			
Name REG		IVERSITY OF MICHIGAN				Employ		ntification number 38-6006309
		ispose of any investment(s) in a qual						. 🗌 Yes 🗌 No
-		8949 and see its instructions for add				or loss	S.	
Pa		erm Capital Gains and Losses-	-Assets Held Or	ne Year or Less				1
	the lines below. This form may be ea	r how to figure the amounts to enter on sier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjus or loss fr 8949, Pa	om Form rt I, line 2	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
	whole dollars.	term transactions reported on Form	,	. ,	column (g)		the result with column (g)
	1099-B for which b which you have no	pasis was reported to the IRS and for adjustments (see instructions). However, port all these transactions on Form 8949,						0
1b	Totals for all tran with Box A check	sactions reported on Form(s) 8949 ked						0
2	Totals for all tran with Box B check	sactions reported on Form(s) 8949 ked						0
3	Totals for all tran with Box C chec	sactions reported on Form(s) 8949 ked	3,057,803	0			0	3,057,803
4	Short-term capita	al gain from installment sales from For	m 6252, line 26 or 3	37			4	
5	Short-term capita	al gain or (loss) from like-kind exchang	es from Form 8824				5	
6	Unused capital lo	oss carryover (attach computation) .					6	(0)
		apital gain or (loss). Combine lines 1a t					7	3,057,803
Par	tll Long-Te	rm Capital Gains and Losses –	Assets Held Mo	ore Than One Y	ear			
	the lines below.	or how to figure the amounts to enter on asier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	or loss fr 8949, Pa	rt II, line i	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
	the lines below. This form may be ea whole dollars.	asier to complete if you round off cents to			or loss fr	om Form rt II, line :	(s)	Subtract column (e) from
8a	the lines below. This form may be ex whole dollars. Totals for all long-t 1099-B for which b which you have no	asier to complete if you round off cents to erm transactions reported on Form basis was reported to the IRS and for adjustments (see instructions). However, port all these transactions on Form 8949,	Proceeds	Cost	or loss fr 8949, Pa	om Form rt II, line :	(s)	Subtract column (e) from column (d) and combine
	the lines below. This form may be ex whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re leave this line bland	asier to complete if you round off cents to erm transactions reported on Form pasis was reported to the IRS and for adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b sactions reported on Form(s) 8949	Proceeds	Cost	or loss fr 8949, Pa	om Form rt II, line :	(s)	Subtract column (e) from column (d) and combine the result with column (g)
	the lines below. This form may be early whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re leave this line bland Totals for all tran with Box D chec	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds	Cost	or loss fr 8949, Pa	om Form rt II, line :	(s)	Subtract column (e) from column (d) and combine the result with column (g) 0
8b 9	the lines below. This form may be ear whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re leave this line bland Totals for all tran with Box D chect Totals for all tran with Box E chect	asier to complete if you round off cents to erm transactions reported on Form pasis was reported to the IRS and for adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds	Cost	or loss fr 8949, Pa	om Form rt II, line :	(s)	Subtract column (e) from column (d) and combine the result with column (g) 0
8b 9 10	the lines below. This form may be ex- whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re leave this line bland Totals for all tran with Box D chect Totals for all tran with Box E check Totals for all tran with Box F check	asier to complete if you round off cents to erm transactions reported on Form pasis was reported to the IRS and for adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price)	Cost (or other basis)	or loss fr 8949, Pa	om Form rt II, line :	(s) 2, 	Subtract column (e) from column (d) and combine the result with column (g) 0
8b 9 10 11	the lines below. This form may be ear whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re leave this line bland Totals for all tran with Box D check Totals for all tran with Box E check Totals for all tran with Box F check Enter gain from F	asier to complete if you round off cents to erm transactions reported on Form aasis was reported to the IRS and for adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520	Cost (or other basis)	or loss fr 8949, Pa	om Form rt II, line :	(s) 2, 0	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520
8b 9 10 11 12	the lines below. This form may be existent to the dollars. Totals for all long-t 1099-B for which be which you have no if you choose to re leave this line bland Totals for all tran with Box D check Totals for all tran with Box E check Totals for all tran with Box F check Enter gain from F Long-term capital	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520 n 6252, line 26 or 3	Cost (or other basis)	or loss fr 8949, Pa	om Form rt II, line :	(s) 2, 0 11	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520
8b 9 10 11 12 13	the lines below. This form may be early whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re leave this line bland Totals for all tran with Box D chect Totals for all tran with Box E chect Totals for all tran with Box F chect Enter gain from F Long-term capita	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520 n 6252, line 26 or 3 es from Form 8824	Cost (or other basis)	or loss fr 8949, Pa	om Form rt II, line :	(s) 2, 0 11 12	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520
8b 9 10 11 12 13 14 15	the lines below. This form may be ex- whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re- leave this line bland Totals for all tran- with Box D check Totals for all tran- with Box E check Totals for all tran- with Box F check Enter gain from F Long-term capital Capital gain distr Net long-term ca	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520 	Cost (or other basis)	or loss fr 8949, Pa column (om Form rt II, line :	(s) 2, 0 11 12 13	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520
8b 9 10 11 12 13 14 15 Par	the lines below. This form may be ex- whole dollars. Totals for all long-t 1099-B for which b which you have no if you choose to re- leave this line bland Totals for all tran- with Box D check Totals for all tran- with Box E check Totals for all tran- with Box F check Enter gain from F Long-term capital Capital gain distr Net long-term ca	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520 	Cost (or other basis)	or loss fr 8949, Pa column (om Form rt II, line ; g)	(s) 2, 11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520 42,828,864 45,979,384
8b 9 10 11 12 13 14 15 Par 16	the lines below. This form may be ex- whole dollars. Totals for all long-t 1099-B for which by which you have no if you choose to re- leave this line bland Totals for all tran- with Box D checc Totals for all tran- with Box E check Totals for all tran- with Box F check Enter gain from F Long-term capital Capital gain distress Net long-term capital Enter excess of re- Enter excess of re- Totals for all tran- with Box F check Enter gain from F Long-term capital Summar	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520 	Cost (or other basis)	or loss fr 8949, Pa column (om Form rt II, line ; g)	(s) 2, 11 12 13 14 15 16	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520 42,828,864 42,828,864 45,979,384 3,057,803
8b 9 10 11 12 13 14 15 Par 16 17	the lines below. This form may be ex- whole dollars. Totals for all long-t 1099-B for which by which you have no if you choose to re- leave this line bland Totals for all tran- with Box D check Totals for all tran- with Box E check Totals for all tran- with Box F check Enter gain from F Long-term capital Capital gain distress Net long-term cap Enter excess of r Net capital gain.	asier to complete if you round off cents to erm transactions reported on Form adjustments (see instructions). However, port all these transactions on Form 8949, k and go to line 8b	Proceeds (sales price) 3,150,520 n 6252, line 26 or 3 es from Form 8824 nrough 14 in column net long-term capit gain (line 15) over ne	Cost (or other basis)	or loss fr 8949, Pa column (om Form rt II, line ; g)	(s) 2, 11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g) 0 0 0 3,150,520 42,828,864 45,979,384

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

8949

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

(0

Attachment

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No. 12A Social security number or taxpayer identification number Name(s) shown on return REGENTS OF THE UNIVERSITY OF MICHIGAN 38-6006309

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		s j), (h) Gain or (loss) Subtract column (e) from column (d) and	
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).			
SCHEDULE K-1			3,057,803			0	3,057,803			
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ie 2 (if Box B	3,057,803	0		0	3,057,803			

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions. **REGENTS OF THE UNIVERSITY OF MICHIGAN** 38-6006309

Form 8949 (2022)	Attachment Sequence No. 12A Pa	ge 2
Name(s) shown on return. Name and SSN or taxpaver identification no, not required if shown on other side	Social security number or taxpayer identification number	

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side REGENTS OF THE UNIVERSITY OF MICHIGAN

 REGENTS OF THE UNIVERSITY OF MICHIGAN
 38-6006309

 Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

✓ (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions. (g) Amount of adjustment	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
SCHEDULE K-1			2 450 500				2 450 500
			3,150,520			0	3,150,520
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your 1e 9 (if Box E	3,150,520	0		0	3,150,520

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2022)

Form 3800
Department of the Treasury Internal Revenue Service

General Business Credit

OMB No. 1545-0895 2022

Attachment Sequence No. 22

Go to www.irs.gov/Form3800 for instructions and the latest information. You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

38-6006309

Identifying number

Part	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) (See instructions and complete Part(s) III before Parts I and II.)		
1	General business credit from line 2 of all Parts III with box A checked	1	428,750
2	Passive activity credits from line 2 of all Parts III with box B checked 2		
3	Enter the applicable passive activity credits allowed for 2022. See instructions	3	
4	Carryforward of general business credit to 2022. Enter the amount from line 2 of Part III with box C		
	checked. See instructions for statement to attach	4	620,541
_	Check this box if the carryforward was changed or revised from the original reported amount		
5	Carryback of general business credit from 2023. Enter the amount from line 2 of Part III with box D checked. See instructions	5	0
6	Add lines 1, 3, 4, and 5	6	1,049,291
Part			
7	 Regular tax before credits: Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. 		
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the applicable line of your return.	7	0
	 Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from the applicable line of your return. 		
8	Alternative minimum tax: • Individuals. Enter the amount from Form 6251, line 11.		
	Corporations. Enter -0 Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54.	8	0
9	Add lines 7 and 8	9	0
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)		
C	Add lines 10a and 10b	10c	0
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	0
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0 12	-	
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See instructions 13		
14	Tentative minimum tax:		
	Individuals. Enter the amount from Form 6251, line 9.		
	• Corporations. Enter -0		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52.		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11. If zero or less, enter -0	16	0
17	Enter the smaller of line 6 or line 16	17	0
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.		-
For Pa	aperwork Reduction Act Notice, see separate instructions. Cat. No. 12392F		Form 3800 (2022)

Part			
lote	: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on	line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	0
19	Enter the greater of line 13 or line 18	19	0
20	Subtract line 19 from line 11. If zero or less, enter -0	20	0
21	Subtract line 17 from line 20. If zero or less, enter -0	21	0
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	338
23	Passive activity credit from line 3 of all Parts III with box B checked 23 0		
24	Enter the applicable passive activity credit allowed for 2022. See instructions	24	
25	Add lines 22 and 24	25	338
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11. If zero or less, enter -0	27	0
28	Add lines 17 and 26	28	0
29	Subtract line 28 from line 27. If zero or less, enter -0	29	0
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	43,709
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 0		
33	Enter the applicable passive activity credits allowed for 2022. See instructions	33	
34	Carryforward of business credit to 2022. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	448,600
	Check this box if the carryforward was changed or revised from the original reported amount $\ .$. \Box		
35	Carryback of business credit from 2023. Enter the amount from line 5 of Part III with box D checked. See instructions	35	0
36	Add lines 30, 33, 34, and 35	36	492,309
37	Enter the smaller of line 29 or line 36	37	0
38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return.		
	 Individuals. Schedule 3 (Form 1040), line 6. Corporations. Form 1120, Schedule J, Part I, line 5c. 	38	0
	• Estates and trusts. Form 1041, Schedule G, line 2b.		Form 3800 (2022)

Form **3800** (2022)

Form 380	0 (2022)			Page 3
Name(s) s	hown on return		Identifying nun	nber
	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II		ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗌 (General Business Credit From a Non-Passive Activity E 📃 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
c 🗆 (General Business Credit Carryforwards G 🗌 Eligible Small Busin	ess C	redit Carryforward	S
	General Business Credit Carrybacks H		,	
	ou are filing more than one Part III with box A or B checked, complete and attach first	an ac	ditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			🔽
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		0
b	Advanced manufacturing production (Form 7207)	1b		0
c	Increasing research activities (Form 6765)	1c		428.750
d	Low-income housing (carryforward only) (see instructions)	1d		0
e	Disabled access (Form 8826)*	1e		0
f	Renewable electricity production (Form 8835)	1f		0
	Indian employment (Form 8845)	1g		0
g h		19 1h		0
h :	Orphan drug (Form 8820)	1i		
1	New markets (Form 8874)			0
J	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		0
k	Employer-provided child care facilities and services (Form 8882)*	1k		0
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		0
m	Low sulfur diesel fuel production (Form 8896)	1m		0
n	Distilled spirits (Form 8906)	1n		0
0	Nonconventional source fuel (carryforward only)	10		0
р	Energy efficient home (Form 8908)	1p		0
q	Energy efficient appliance (carryforward only)	1q		0
r	Alternative motor vehicle (Form 8910)	1r		0
S	Alternative fuel vehicle refueling property (Form 8911)	1s		0
t	Enhanced oil recovery credit (Form 8830)	1t		0
u	Mine rescue team training (Form 8923)	1u		0
v	Agricultural chemicals security (carryforward only)	1v		0
w	Employer differential wage payments (Form 8932)	1w		0
х	Carbon oxide sequestration (Form 8933)	1x		0
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		0
z	Qualified plug-in electric vehicle (carryforward only)	1z		0
aa	Employee retention (Form 5884-A)	1aa		0
bb	General credits from an electing large partnership (carryforward only)	1bb		0
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		0
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		428,750
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		216
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		0
b	Work opportunity (Form 5884)	4b		24,165
c	Biofuel producer (Form 6478)	4c		0
	Low-income housing (Form 8586)	4d		0
d		4u 4e		0
e	Renewable electricity production (Form 8835)	-		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		18,390
g	Qualified railroad track maintenance (Form 8900)	4g		0
h	Small employer health insurance premiums (Form 8941)	4h		0
i	Increasing research activities (Form 6765)	4i		0
j	Employer credit for paid family and medical leave (Form 8994)	4j		0
z	Other	4z		1,154
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		43,709
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		472,675
* See ins	tructions for limitation on this credit.			Form 3800 (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying nun	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 📃 Reserved			
c 🗆 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	ess C	redit Carryforward	S
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved		-	
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			· · · · □
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
pass-thr	ough entity.		from a pass-through entity.	amount.
 1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	10	83-3566571	56.881
d	Low-income housing (carryforward only) (see instructions)	1d		
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g h		1g 1h		
h	Orphan drug (Form 8820)			
1	New markets (Form 8874)	1i		
Ţ	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	<u>1n</u>		
ο	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		56,881
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		,
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	Qualified railroad track maintenance (Form 8900)	4g		
g b	Small employer health insurance premiums (Form 8900)	49 4h		
h i		4n 4i		
i	Increasing research activities (Form 6765)			
1	Employer credit for paid family and medical leave (Form 8994)	4j		
z		4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
<u>6</u>	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		56,881
See ins	tructions for limitation on this credit.			Form 3800 (2022)

Form 3800				Page 3
Name(s) s	hown on return		Identifying nu	mber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			-6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🖌 (General Business Credit From a Non-Passive Activity E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🔲 Reserved			
c 🗌 (General Business Credit Carryforwards 🛛 🖌 G 🗌 Eligible Small Busin	ess C	redit Carryforward	ls
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved		-	
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			🖂
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	10	82-2325117	314,129
d	Low-income housing (carryforward only) (see instructions)	1d	02 2020	011,120
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g b		1g 1h		
h :	Orphan drug (Form 8820)	1i		
1	New markets (Form 8874)			
J	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	<u>1n</u>		
ο	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		314,129
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
9 h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		<u> </u>
	Employer credit for paid family and medical leave (Form 8994)	4i 4j		
J Z		4j 4z		
2 5	Add lines 4a through 4z and enter here and on the applicable line of Part II	4Z 5		0
5 6		5 6		314,129
-	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	U		
See INS	tructions for limitation on this credit.			Form 3800 (2022)

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4/26/2024 11:55:08 AM

Form 3800 (2022)	Page 3
Name(s) shown on return	Identifying number
REGENTS OF THE UNIVERSITY OF MICHIGAN	38-6006309
Part III General Business Credits or Eligible Small Business Credits (see instructions)	
Complete a separate Part III for each box checked below. See instructions.	
A 🗹 General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved	
B 🗌 General Business Credit From a Passive Activity 🛛 F 🔲 Reserved	
C 🗌 General Business Credit Carryforwards G 🗌 Eligible Small Business Credit	Carryforwards
D General Business Credit Carrybacks H Reserved	-
I If you are filing more than one Part III with box A or B checked, complete and attach first an addition	nal Part III combining amounts
from all Parts III with box A or B checked. Check here if this is the consolidated Part III	
(a) Description of credit (b)	Enter EIN if (c) Enter the
claim	appropriate
pass-through entity.	a pass-through amount.
1a Investment (Form 3468, Part II only) (attach Form 3468) . . . 1a	
b Advanced manufacturing production (Form 7207)	
	3-1106850 3,088
d Low-income housing (carryforward only) (see instructions)	
e Disabled access (Form 8826)*	
f Renewable electricity production (Form 8835) I I I I If If	
g Indian employment (Form 8845) . <th< td=""><td></td></th<>	
h Orphan drug (Form 8820) 1h	
i New markets (Form 8874)	
I Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864) 1	
m Low sulfur diesel fuel production (Form 8896) . . . 1m	
n Distilled spirits (Form 8906)	
• Nonconventional source fuel (carryforward only)	
p Energy efficient home (Form 8908) 1p	
q Energy efficient appliance (carryforward only) . <t< td=""><td></td></t<>	
r Alternative motor vehicle (Form 8910) 1r	
s Alternative fuel vehicle refueling property (Form 8911)	
t Enhanced oil recovery credit (Form 8830)	
u Mine rescue team training (Form 8923)	
v Agricultural chemicals security (carryforward only) 1v	
w Employer differential wage payments (Form 8932)	
x Carbon oxide sequestration (Form 8933) 1x	
y Qualified plug-in electric drive motor vehicle (Form 8936)	
z Qualified plug-in electric vehicle (carryforward only)	
aa Employee retention (Form 5884-A)	
bb General credits from an electing large partnership (carryforward only)	
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other	
credits (see instructions)	
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 2	3,088
3 Enter the amount from Form 8844 here and on the applicable line of Part II 3	
4a Investment (Form 3468, Part III) (attach Form 3468) . . . 4a	
b Work opportunity (Form 5884)	
c Biofuel producer (Form 6478)	
d Low-income housing (Form 8586)	
e Renewable electricity production (Form 8835)	
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 4f	
g Qualified railroad track maintenance (Form 8900)	
h Small employer health insurance premiums (Form 8941)	
i Increasing research activities (Form 6765)	
j Employer credit for paid family and medical leave (Form 8994)	
z Other	
5 Add lines 4a through 4z and enter here and on the applicable line of Part II 5	0
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6	3,088
* See instructions for limitation on this credit.	Form 3800 (2022)

C Ceneral Business Credit Carryforwards D General Business Credit Carryforwards D General Business Credit Carryhoaxes I Maximum Science I Imaximum Science	Form 380	D (2022)			Page 3
Description Description Description Description A Conneral Business Credit From a Non-Passive Activity F Reserved B General Business Credit From a Passive Activity F Reserved C General Business Credit From a Passive Activity F Reserved C General Business Credit Caryforwards C Eligible Small Business Credit Caryforwards D General Business Credit Caryforwards C Eligible Small Business Credit Caryforwards If you are fills with box A or B checked. Check here if this is the consolidated Pat III (b) End ENIII (c) Enter the enterprint of the construction of the con	Name(s) s	hown on return		Identifying nu	mber
Complete a separate Part III for each box checked below. See instructions. Canana Business Credit Carrylowards Canana Business Credit Carryloward Carryloward Only (see instructions) Canana Business Credit Carryloward Only (see instructions) Carryloward Carryloward Only (see instructions) Carryloward Carryloward Only) Carryloward Carryloward Only) New markets (Form 880) New markets (Form 880) New markets (Form 880) New markets (Form 880)	REGEN	TS OF THE UNIVERSITY OF MICHIGAN		38	-6006309
A □ General Business Cedit From a Passive Activity F ■ ■ Beserved B General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards H ■ ■ ●	Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
B General Business Cerdit Carryfoxadts F Elegible Small Business Cerdit Carryfoxadts D General Business Cerdit Carryfoxadts H Reserved I Ifyeu zer filling more than one Pert III will box A or B checked. complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III Image: Construct Construct Complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III Image: Construct Constru	Comple	te a separate Part III for each box checked below. See instructions.			
C Ceneral Business Credit Carryforwards D General Business Credit Carryforwards D General Business Credit Carrybacks I My uare filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III (b) Earce This (a) Description of credit (b) Earce This (b) Earce This (c) Earce This (b) Earce This (c) Earce This (c) Description of credit (c) Earce This	A 🗹 (General Business Credit From a Non-Passive Activity E 📃 Reserved			
D Ceneral Business Credit Cambacks H Reserved If you are filling more than one Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (e) Enter Filling Interstein II form a pass-through entry. (e) Decription of credit (f) Enter Filling Note: On any line where the credit is from more than one source, a separate Part III is needed for each one apsa-through entry. (f) Enter Filling (f) Enter Filling In Investment Form 3468, Part II only (attach Form 3468) 1a (f) Enter Filling (f) Enter Filling b Advanced manufacturing production (Form 7207) 1b (f) Enter Filling (f) Enter Filling c Increasing research activities (Form 6755) 1c 47.4198673 30.488 d Low-income housing (carryforward only) (see instructions) 1d (f) Enter Filling (f) Enter Filling g Indian employment From 8845) 1f (f) Enter Filling (f) Enter Filling <t< td=""><td>в 🗌 (</td><td>General Business Credit From a Passive Activity F 🔲 Reserved</td><td></td><td></td><td></td></t<>	в 🗌 (General Business Credit From a Passive Activity F 🔲 Reserved			
D Caneral Business Credit Carybacks H Reserved If you are filling more than one Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (a) Enter ENt (a) Enter ENt Image: Intrody entry. (a) Decription of credit (b) Enter ENt (c) Enter Enter (c) Ente	c 🗆 (General Business Credit Carryforwards 🛛 🛛 🖬 🗌 Eligible Small Busin	ess C	redit Carryforward	ls
I Hyou are filing more than one Part III with box A or B checked, Check here if this is the consolidated Part III Image: Checked Check here if this is the consolidated Part III (a) Description of credit (a) Description of credit (b) Enter the checked Check here if this is the consolidated Part III on the checked for each part II only (attach Form 3468). (c) Enter the checked Check here if this is the consolidated Part III on the checked for each part II only (attach Form 3468). (c) Enter the checked Check here if this is the consolidated Part III on the checked for each part II only (attach Form 3468). (c) Enter the checked Check here if this is the consolidated Part III on the checked for each part II only (attach Form 3468). (c) Enter the checked Checked Checked for the checked for each part II only (attach Form 3468). (c) Enter the checked Checked for the checked for each part II only (attach Form 3468). (c) Enter the checked Checked for the checked for each part II only (attach Form 3468). (c) Enter the checked for the checked for each part II only (attach Form 8861). (c) Enter the checked for each part II only (attach Form 8861). (c) Enter the checked for each part II only (attach Form 8861). (c) Enter the checked for each part II only (attach Form 8861). (c) Enter the checked for each part II only (attach Form 8861). (c) Enter the checked for each part II only (attach Form 8861). (c) Enter the checked for Enter the checked for each part II only (attach Form 8861). (c) Enter the checked for Enter the Enter the form 8903 (c) Enter the checked for Enter the checked for Enter the checked for Enter the form 89					
(a) Description of credit (b) Emergination of credit is from more han one source, a separate Part III is needed for each iterative from a passi-introging the origin of partial in my (attach Form 3468). (b) Emergination of the part II only (attach Form 3468). (b) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3468). (c) Emergination of the part II only (attach Form 3869). (c) Emergination of the part II only (attach Form 3869). (c) Emergination of the part II only (attach Form 3869). (c) Emergination of the part II only (attach Form 3869). (c) II m 10 Nonconventional source fuel (carryforward only). (c) Emergination of the security (c) Emergination of the part II only (c) Emergination (c) Emergin	I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ad	dditional Part III co	mbining amounts
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2Add lines 1a through 1zz and enter here and on the applicable line of Part I230,4883Enter the amount from Form 8844 here and on the applicable line of Part II34a4aInvestment (Form 3468, Part III) (attach Form 3468)4a4abWork opportunity (Form 5884)4b4acBiofuel producer (Form 6478)4c4ddLow-income housing (Form 8586)4d4deRenewable electricity production (Form 8835)4e4efEmployer social security and Medicare taxes paid on certain employee tips (Form 8846)4fgQualified railroad track maintenance (Form 8900)4ghSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther0fAdd lines 4a through 4z and enter here and on the applicable line of Part II506Add lines 2, 3, and 5 and enter here and on the applicable line of Part II630,488	ZZ				
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dLow-income housing (Form 8586)4deRenewable electricity production (Form 8835)4efEmployer social security and Medicare taxes paid on certain employee tips (Form 8846)4fgQualified railroad track maintenance (Form 8900)4ghSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II506Add lines 2, 3, and 5 and enter here and on the applicable line of Part II50	с	Biofuel producer (Form 6478)	4c		
eRenewable electricity production (Form 8835)4efEmployer social security and Medicare taxes paid on certain employee tips (Form 8846)4fgQualified railroad track maintenance (Form 8900)4ghSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6	d		4d		
fEmployer social security and Medicare taxes paid on certain employee tips (Form 8846)4fgQualified railroad track maintenance (Form 8900)4ghSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6	е		4e		
gQualified railroad track maintenance (Form 8900)4ghSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6			4f		
hSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6	g		4g		
iIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6					
jEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6					
zOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6					
5Add lines 4a through 4z and enter here and on the applicable line of Part II506Add lines 2, 3, and 5 and enter here and on the applicable line of Part II630,488	-				
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6 30,488					0
	-		-		Form 3800 (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying nu	mber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			-6006309
Part II	I General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 📃 Reserved			
с 🗆 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	ess C	redit Carryforward	ls
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	n all Parts III with box A or B checked. Check here if this is the consolidated Part III			🗌
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
Note: Or	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate
pass-thr	ough entity.		entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
с	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
ĥ	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
	Energy efficient home (Form 8908)	1p		
p	Energy efficient appliance (carryforward only)	1q		
q		-		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	45-3262896	3,193
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		3,193
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		3,193
* See ins	structions for limitation on this credit.			Form 3800 (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying nu	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
c 🗆 🤇	General Business Credit Carryforwards 🛛 🖌 G 🗌 Eligible Small Busin	ess C	redit Carryforward	s
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved		-	
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
pass-thr	ough entity.		from a pass-through entity.	amount.
 1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	10	20-8255115	1
d	Low-income housing (carryforward only) (see instructions)	1d		· · ·
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g h		1g 1h		
h	Orphan drug (Form 8820)			
1	New markets (Form 8874)	1i		
Ţ	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	<u>1n</u>		
ο	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		1
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	Qualified railroad track maintenance (Form 8900)	41 4g		
g b	Small employer health insurance premiums (Form 8900)	4g 4h		
h i		4n 4i		
i	Increasing research activities (Form 6765)			
1	Employer credit for paid family and medical leave (Form 8994)	4j		
z		4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
<u>6</u>	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1
See ins	tructions for limitation on this credit.			Form 3800 (2022)

C 🗌 General Business Credit Carryforwards G 🗌 Eligible Small Business Credit Carryforwards	Form 3800	D (2022)			Page 3
Description Description Description Description A Conneral Business Credit From a Non-Passive Activity F Reserved B General Business Credit From a Passive Activity F Reserved C General Business Credit From a Passive Activity F Reserved C General Business Credit Caryforwards C Eligible Small Business Credit Caryforwards D General Business Credit Caryforwards C Eligible Small Business Credit Caryforwards If you are fills with box A or B checked. Check here if this is the consolidated Pat III (b) End ENIII (c) Chere the search activities (from Bassing Credits Caryforward Cary	Name(s) s	hown on return		Identifying nun	nber
Complete a separate Part III for each box checked below. See instructions. A General Business Credit From a Non-Passive Activity F Reserved B General Business Credit Carryloxards G Eligible Small Business Credit Carryloxards G D General Business Credit Carryloxards G Eligible Small Business Credit Carryloxards G D General Business Credit Carryloxards G H H you are filling more than one Part III will box A or B checked. Complete and attach first an additional Part III will box A or B checked. Complete and tach first an additional Part III will box A or B checked. Check here if this is the consolidated Part III Note: On any line where the credit is from more than one source, aseparate Part III is in exertment from addition fform 7207). 1b I investment (Form 3488, Part II only) (attach Form 3468). 1a (e) Enter the ages-through and addition fform 7207). I in Investment (Form 8820). 1d 1d (e) Essible dacess (Form 8820). I charam polyment (Form 8820). 1f (f) Essible dacess (Form 8820). 1f I New market (Form 8847). 1i (f) Essible dacess (Form 8827). 1g I biodiesel, reservable desci, or sustainable aviation from 8827. 1k (f) Essible dacess (Form 8800). 1f I warket (Form 8906). 1f (f) Essible dacess (Form 8906). 1f (f) Essible dacess (Form 8906).	REGEN	TS OF THE UNIVERSITY OF MICHIGAN		38-	6006309
A □ General Business Cedit From a Passive Activity F ■ ■ Beserved B General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards H ■ ■ ●	Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
B General Business Cerdit Carryfoxards F Enserved C General Business Cerdit Carryfoxards H Reserved I If you zer fills more than one Pert II will box A or B checked. complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III Image: Combine	Comple	te a separate Part III for each box checked below. See instructions.			
C Ceneral Business Credit Carryforwards D General Business Credit Carryforwards D General Business Credit Carrybacks I My uare filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III (b) Earce This (a) Description of credit (b) Earce This (b) Earce This (c) Earce This (b) Earce This (c) Earce This (c) Description of credit (c) Earce This	A 🖌 (General Business Credit From a Non-Passive Activity E 🔲 Reserved			
D Ceneral Business Credit Cambacks H Reserved If you are filling more than one Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (e) Enter Filling Interstein II form a plane in the second a separate Part III is needed for each complete and tatch first an additional Part III combining amount. (e) Enter Filling Interstein I form 3468, Part II only (attach Form 3468) 1a (e) Enter Filling b Advanced manufacturing production (Form 7207) 1b (e) Enter Filling c Increasing research activities (Form 6755) 1c 62.3209568 4.582 d Low-income housing (carryforward only) (see instructions) 1d 1d 1d f Brank and Backs (Form 8826) 1f 1d 1d 1d f Small employment Form 8845) 1f 1d	в 🗌 (General Business Credit From a Passive Activity F 📃 Reserved			
D Caneral Business Credit Carybacks H Reserved If you are filling more than one Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (a) Enter ENt Image: Interpret Part III on Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (a) Enter ENt Image: Interpret Part III on Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (a) Enter ENt Image: Interpret Part III on Part III with box A or B checked, complete and tatch first an additional Part III combining amounts (b) Enter ENt Image: Interpret Part III on Part I	c 🗌 (General Business Credit Carryforwards 🛛 🛛 🖬 🗌 Eligible Small Busin	ess C	redit Carryforward	S
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(a) Description of cradit (b) Entry Fixing (c) Charming the value that the non-source, a separate Part III is needed for each diaming the credit form a pass-through entity. (c) Entry Fixing (c) E	I If yo	u are filing more than one Part III with box A or B checked, complete and attach first			
(a) Description of cradit (b) Entry Fixing (c) Charming the value that the non-source, a separate Part III is needed for each diaming the credit form a pass-through entity. (c) Entry Fixing (c) E	from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			· · · · □
Note: On any line where the credit is from more than one source, a separate Part III is needed for each from a genetry. Cline reason genetry. 1a Investment (Form 3468, Part II only) (stach Form 3468) 1a Image: Cline c					
pass-trough entity. Investment (Form 3468, Part II only) (attach Form 3468) 1 1 1 Investment (Form 3468, Part II only) (attach Form 7207) 1 1 1 c Increasing research activities (Form 7565) 1 1 1 1 c Increasing research activities (Form 6765) 1 1 1 1 1 c Disabled access (Form 8426) 1 <td></td> <td></td> <td></td> <td></td> <td>appropriate</td>					appropriate
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b Advanced manufacturing production (Form 7207) Ib Ic c Increasing research activities (Form 6765) 1 1c 82-3609568 4,582 Low-income housing (carryforward only) (see instructions) 1d 1d 1d 1d e Disabled access (Form 8820) 1f 1d 1d 1d f Renewable electricity production (Form 8835) 1f 1d	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
c Increasing research activities (Form 6765) E E 82-3603568 4.582 d Low-income housing (caryforward only) (see instructions) Id d . 1d . Disabled access (Form 8820) If d . If . . If . g Indian employment (Form 8820) If If .					
d Low-income housing (carryforward only) (see instructions) 1 e Disabled access (Form 8826)* 1 f Renewable electricity production (Form 8835) 1 g Indian employment (Form 8845) 1 f Orphan drug (Form 8874) 1 i New markets (Form 8874) 1 i Small employer provided child care facilities and services (Form 8882)* 1 k Employer-provided child care facilities and services (Form 8882)* 1 n Low sulfur diesed help croduction (Form 8896) 1 n Distilled spirits (Form 8906) 1 n Distilled spirits (Form 8906) 1 n Nonconventional source fuel (carryforward only) 10 p Energy efficient appliance (carryforward only) 10 q Alternative fuor whicle (Form 8910) 11 s Attentive notor whicle (Form 8930) 11 u Mine rescue team training (Form 8932) 11 y Agricultural chemicals security (caryforward only) 11 y Qualified plug-in electric whice (Form 8933) 11 y Qualified plu				82-3609568	4.582
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Form 380				Page 3
Name(s) s	hown on return		Identifying nur	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 📃 Reserved			
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D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
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from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			🔲
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
Note: Or	any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate
pass-thr	bugh entity.		entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
с	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
I I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
, m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
	Nonconventional source fuel (carryforward only)	10		
0	Energy efficient home (Form 8908)	-		
p		1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b	87-1256819	17,753
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		17,753
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		17,753
* See ins	tructions for limitation on this credit.			Form 3800 (2022)

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5Add lines 4a through 4z and enter here and on the applicable line of Part II506Add lines 2, 3, and 5 and enter here and on the applicable line of Part II62,809	-				
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6 2,809					0
			-		
	-				Form 3800 (2022)

Form 380	0 (2022)			Page 3
Name(s) s	shown on return		Identifying nun	nber
REGEN	ITS OF THE UNIVERSITY OF MICHIGAN		38-	6006309
Part I	I General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	ete a separate Part III for each box checked below. See instructions.			
A 🖌	General Business Credit From a Non-Passive Activity E			
в 🗌 (General Business Credit From a Passive Activity F 📃 Reserved			
с 🗆 (General Business Credit Carryforwards G 🗌 Eligible Small Busin	iess C	redit Carryforward	S
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved		-	
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
fron	n all Parts III with box A or B checked. Check here if this is the consolidated Part III			🗆
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	Unity!	
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	1c	80-0965931	1,577
d	Low-income housing (carryforward only) (see instructions)	1d		1,011
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g L		1g		
h	Orphan drug (Form 8820)	1h		
1	New markets (Form 8874)	1i		
, i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		1,577
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		<u> </u>
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
C	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	Qualified railroad track maintenance (Form 8900)	4g		
g h	Small employer health insurance premiums (Form 8904)	4h		
i	Increasing research activities (Form 6765)	40 4i		
	Employer credit for paid family and medical leave (Form 8994)			
J		4j		
Z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,577
See ins	structions for limitation on this credit.			Form 3800 (2022)

Form 380				Page 3
. ,	hown on return		Identifying num	nber
-	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
c 🗌 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	ess C	redit Carryforward	S
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ad	ditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			🗆
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
Note: Or	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate
	ough entity.		entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
С	Increasing research activities (Form 6765)	1c	92-0931194	277
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
ĥ	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
р q	Energy efficient appliance (carryforward only)	1q		
ч r	Alternative motor vehicle (Form 8910)	1r		
	Alternative fuel vehicle refueling property (Form 8911)	1s		
S ∔	Enhanced oil recovery credit (Form 8830)	15 1t		
t				
u	Mine rescue team training (Form 8923)	1u		
v		1v		
w	Employer differential wage payments (Form 8932)	1w 1x		
x	Carbon oxide sequestration (Form 8933)			
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
Z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only) Other. Oil and gas production from marginal wells (Form 8904) and certain other	1bb		
ZZ	credits (see instructions)	4		
•		1zz		077
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		277
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884) .	4b		
C	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		277
* See ins	tructions for limitation on this credit.			Form 3800 (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying num	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
c 🗆 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	ess C	redit Carryforwards	S
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			· · · · □
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
 1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	1c	98-1318417	2,577
d	Low-income housing (carryforward only) (see instructions)	1d		
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g h		1g 1h		
h	Orphan drug (Form 8820)			
1	New markets (Form 8874)	1i		
Ţ	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
ο	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		2,577
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		, <u> </u>
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	Qualified railroad track maintenance (Form 8900)	4g		
g b	Small employer health insurance premiums (Form 8900)	49 4h		
h i		4n 4i		
i	Increasing research activities (Form 6765)			
J	Employer credit for paid family and medical leave (Form 8994)	4j		
Z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
<u>6</u>	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		2,577
See ins	tructions for limitation on this credit.			Form 3800 (2022)

C Ceneral Business Credit Carryforwards D General Business Credit Carryforwards D General Business Credit Carryhoaxes I Max are Sling more than one Part II with box A or B checked, complete and attach first an additional Part III combining amounts form all Parts III with box A or B checked. Check here if this is the consolidated Part III (b) Enter Child in the checked. Check here if this is the consolidated Part III (a) Description of credit (b) Enter Child in the checked. Check here if this is the consolidated Part III (b) Enter Child in the credit II from more than one source, a separate Part III is needed for each amount. (b) Enter Child in the credit in the	Form 380	0 (2022)			Page 3
Description Constructions A Constructions A Constructions Constructions	Name(s) s	hown on return		Identifying nun	nber
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2Add lines 1a through 1zz and enter here and on the applicable line of Part I2193Enter the amount from Form 8844 here and on the applicable line of Part II314aInvestment (Form 3468, Part III) (attach Form 3468)4a4abWork opportunity (Form 5884)4b47-4531004957cBiofuel producer (Form 6478)4c4d4ddLow-income housing (Form 8586)4d4d4deRenewable electricity production (Form 8835)4e4e4efEmployer social security and Medicare taxes paid on certain employee tips (Form 8846)4f4ggQualified railroad track maintenance (Form 8900)4g4h4iiIncreasing research activities (Form 6765)4i4i4jjEmployer credit for paid family and medical leave (Form 8994)4j4j957zOtherAdd lines 4a through 4z and enter here and on the applicable line of Part II59576Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6976	ZZ				
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fEmployer social security and Medicare taxes paid on certain employee tips (Form 8846)4fgQualified railroad track maintenance (Form 8900)4ghSmall employer health insurance premiums (Form 8941)4hiIncreasing research activities (Form 6765)4ijEmployer credit for paid family and medical leave (Form 8994)4jzOther4z5Add lines 4a through 4z and enter here and on the applicable line of Part II56Add lines 2, 3, and 5 and enter here and on the applicable line of Part II6	d	Low-income housing (Form 8586)	4d		
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 5 Add lines 4a through 4z and enter here and on the applicable line of Part II 5 6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6 976 	-				
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 6 976					957
			-		
	-		-		Form 3800 (2022)

Form 380	0 (2022)			Page 3
Name(s) s	shown on return		Identifying num	nber
REGEN	ITS OF THE UNIVERSITY OF MICHIGAN		38-6	6006309
Part I	I General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🖌	General Business Credit From a Non-Passive Activity E			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
с 🗆 (General Business Credit Carryforwards 🛛 🛛 🖬 🗌 Eligible Small Busin	ess C	redit Carryforward	S
	General Business Credit Carrybacks H 🗌 Reserved			
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ao	ditional Part III co	mbining amounts
fron	n all Parts III with box A or B checked. Check here if this is the consolidated Part III			· · · · □
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	onity!	
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	1c	98-1184642	8,608
d	Low-income housing (carryforward only) (see instructions)	1d	001101012	0,000
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g L	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
1	New markets (Form 8874)	1i		
, i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
ο	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		8,608
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
C	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	Qualified railroad track maintenance (Form 8900)	4g		
g h	Small employer health insurance premiums (Form 8904)	4h		
i	Increasing research activities (Form 6765)	40 4i		
	Employer credit for paid family and medical leave (Form 8994)			
J		4j		
Z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		8,608
See ins	structions for limitation on this credit.			Form 3800 (2022)

Form 380	0 (2022)			Page 3
Name(s) s	hown on return		Identifying num	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN		38-6	6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity E 🗌 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
c 🗆 🤇	General Business Credit Carryforwards 🛛 🛛 🖬 🗌 Eligible Small Busin	iess C	redit Carryforward	S
	General Business Credit Carrybacks H		2	
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			· · · · □
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
- 1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	Unity!	
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	1c	26-2377163	1,746
d	Low-income housing (carryforward only) (see instructions)	1d	20 2011100	1,110
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g h		1g		
h	Orphan drug (Form 8820)	1h		
1	New markets (Form 8874)	1i		
Ţ	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		1,746
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
9 h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
	Employer credit for paid family and medical leave (Form 8994)	4j		
J Z		ب 4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	42 5		0
5 6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,746
-	Add lines 2, 3, and 3 and enter here and on the applicable line of Part line			Form 3800 (2022)
000 1115				Form JUUU (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying nu	mber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			-6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 📃 Reserved			
с 🗆 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	ess C	redit Carryforward	ls
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			🗌
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
Note: Or	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate
pass-thr	ough entity.		entity.	
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
С	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
ĥ	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
1	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864) .	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
	Employer differential wage payments (Form 8932)	1w		
w	Carbon oxide sequestration (Form 8933)	1x		
×	Qualified plug-in electric drive motor vehicle (Form 8936)			
У	Qualified plug-in electric vehicle (carryforward only)	1y 1z		
Z	Employee retention (Form 5884-A)			
aa ĸĸ	General credits from an electing large partnership (carryforward only)	1aa		
bb	Other. Oil and gas production from marginal wells (Form 8904) and certain other	1bb		
ZZ	credits (see instructions)	4		
•		1zz		0
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a	04.0500700	204
b	Work opportunity (Form 5884) .	4b	84-3530768	204
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		204
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		204
* See ins	tructions for limitation on this credit.			Form 3800 (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying nu	mber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			-6006309
Part II	I General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
с 🗆 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	iess C	redit Carryforward	ds
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	ombining amounts
from	n all Parts III with box A or B checked. Check here if this is the consolidated Part III			🗌
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
Note: Or	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate
pass-thr	ough entity.		entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
С	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
ĥ	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
р q	Energy efficient appliance (carryforward only)	1q		
ч r	Alternative motor vehicle (Form 8910)	1r		
	Alternative fuel vehicle refueling property (Form 8911)	1s		
S ₊	Enhanced oil recovery credit (Form 8830)	15 1t		
t				
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w 1x		
X	Carbon oxide sequestration (Form 8933)			
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
Z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only) Other. Oil and gas production from marginal wells (Form 8904) and certain other	1bb		
ZZ	credits (see instructions)	4		
•		1zz		0
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a	04.0000404	45
b	Work opportunity (Form 5884)	4b	81-2828481	45
C	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e	04.0000.404	45.407
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	81-2828481	15,197
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z		<u> </u>
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		15,242
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		15,242
* See ins	structions for limitation on this credit.			Form 3800 (2022)

C Ceneral Business Credit Carryforwards D General Business Credit Carryforwards D General Business Credit Carryhoaxes I Max are Sling more than one Part II with box A or B checked, complete and attach first an additional Part III combining amounts form all Parts III with box A or B checked. Check here if this is the consolidated Part III (b) Enter Child in the checked. Check here if this is the consolidated Part III (a) Description of credit (b) Enter Child in the checked. Check here if this is the consolidated Part III (b) Enter Child in the credit II from more than one source, a separate Part III is needed for each amount. (b) Enter Child in the credit in the	Form 3800	D (2022)			Page 3
Description Description Description Description A Control to a sparante Part III for each box check of bodies. See instructions. A Control to a sparante Part III for each box check of bodies. See instructions. A Control to a sparante Business Credit From a Passive Activity F Reserved Control to a sparante Business Credit Carryforwards C Eligible Small Business Credit Carryforwards D General Business Credit From a Passive Activity F Reserved If you are fills with box Aor B checked. Check here if this is the consolidated Part III	Name(s) s	hown on return		Identifying nun	nber
Complete a separate Part III for each box checked below. See instructions. A General Business Cedit From a Non-Bassive Activity F Reserved C General Business Cedit Carryforwards G Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards H Reserved If you are flig more than one Part III wilh box A or B checked. Complete and attach first an additional Part III wilh box A or B checked. Check here if this is the consolidated Part III (e) Earth Elift Note: On any line where the credit is from more than one source, a separate Part III is in exection or a entry. (e) Earth Elift (e) Earth Elift Ta Investment (Form 3488, Part II only) (attach Form 3468) 1a (e) Earth Elift (f) Earth Elift D Increasing research activities (Form 7605) 1c 82-4029662 477 D Low-income housing (caryforward only) (see instructions) 1d (f) Earth Elift (f) Earth Elift Now market (Form 8820) 1f (f) (f) Earth Elift (f) Earth Elift (f) Earth Elift (f) Earth Elift Now market (Form 8840) 1f (f) (f) Earth Elift (f) Earth Elift (f)	REGEN	TS OF THE UNIVERSITY OF MICHIGAN		38-	6006309
A □ General Business Cedit From a Passive Activity F ■ ■ Beserved B General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards G ■ Eligible Small Business Cedit Carryforwards D General Business Cedit Carryforwards H ■ ■ ■ ●	Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
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Note: On any line where the credit is from more than one source, a separate Part III is needed for each from a genetin-ugh energy. cline creating the credit is from more than one source, a separate Part III is needed for each from a genetin-ugh energy. cline creating the credit is from a more than one source, a separate Part III is needed for each from a genetin-ugh energy. cline creating the credit is from a more than one source, a separate Part III is needed for each for the source on the source for the sour					
pass-trough entity. Investment (Form 3468, Part II only) (attach Form 3468) 1 1 1 Investment (Form 3468, Part II only) (attach Form 7207) 1 1 1 c Increasing research activities (Form 7565) 1 1 1 1 c Increasing research activities (Form 6765) 1 1 1 1 1 e Disabled access (Form 8426) 1 <td></td> <td></td> <td></td> <td></td> <td>appropriate</td>					appropriate
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b Advanced manufacturing production (Form 7207) Ib c Increasing research activities (Form 8765) 16 82-4029662 477 d Low-income housing (caryforward only) (see instructions) 16 16 82-4029662 477 e Disabled access (Form 8820) 16 11	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
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Form 380				Page 3
Name(s) s	hown on return		Identifying nu	nber
	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II		ructio	ons)	
	te a separate Part III for each box checked below. See instructions.			
	General Business Credit From a Non-Passive Activity E			
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	General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	less C	redit Carryforward	s
	General Business Credit Carrybacks H 🗌 Reserved			
I If yo	ou are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III	• •		🗌
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each ough entity.		claiming the credit from a pass-through entity.	appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
с	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
, k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m.	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
ť	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
y	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
- aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b	85-3284989	1,151
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
е	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
ĥ	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
z	Other	4z	85-3284989	626
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		1,777
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,777
* See ins	tructions for limitation on this credit.			Form 3800 (2022)

Form 380				Page 3
Name(s) s	hown on return		Identifying nu	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗹 (General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved			
в 🗌 (General Business Credit From a Passive Activity F 🗌 Reserved			
c 🗌 (General Business Credit Carryforwards 🛛 🛛 🖸 Eligible Small Busin	ess C	redit Carryforwarc	ls
D 🗌 (General Business Credit Carrybacks H 🗌 Reserved			
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			🔲
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
Note: Or	any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate amount.
pass-thr	ough entity.		entity.	
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
С	Increasing research activities (Form 6765)	1c		
d	Low-income housing (carryforward only) (see instructions)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
ĥ	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
1	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864) .	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
p	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
ч r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
	Employer differential wage payments (Form 8932)	1w		
w	Carbon oxide sequestration (Form 8933)	1x		
Ň	Qualified plug-in electric drive motor vehicle (Form 8936)			
У Z	Qualified plug-in electric vehicle (carryforward only)	1y 1z		
	Employee retention (Form 5884-A)	12 1aa		
aa bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
~~~	credits (see instructions)	4		
0	Add lines 1a through 1zz and enter here and on the applicable line of Part I	1zz 2		0
2 3	Enter the amount from Form 8844 here and on the applicable line of Part II	2		0
	Investment (Form 3468, Part III) (attach Form 3468)	3 4a		
4a		4a 4b	84-5189267	973
b	Work opportunity (Form 5884)	-	04-0109207	975
C	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j	04 - 100	
z	Other	4z	84-5189267	528
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		1,501
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,501
* See ins	tructions for limitation on this credit.			Form <b>3800</b> (2022)

Complete a separate Part III for each box checked below. See instructions.           A         Image: Complete a separate Part III for each box checked below. See instructions.           B         Image: Complete a separate Part III for each box checked below. See instructions.		
Part III       General Business Credits or Eligible Small Business Credits (see instructions)         Complete a separate Part III for each box checked below. See instructions.         A       General Business Credit From a Non-Passive Activity         E       Reserved		
Complete a separate Part III for each box checked below. See instructions.           A         Image: Complete a separate Part III for each box checked below. See instructions.           B         Image: Complete a separate Part III for each box checked below. See instructions.		
A 🗹 General Business Credit From a Non-Passive Activity 🛛 E 🔲 Reserved		
•		
B General Business Credit From a Passive Activity F Reserved		
C 🗌 General Business Credit Carryforwards G 🗌 Eligible Small Business Credit Carryforwards		
D General Business Credit Carrybacks H Reserved		
I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amou	ints	
from all Parts III with box A or B checked. Check here if this is the consolidated Part III		
(a) Description of credit (b) Enter EIN if (c) Enter the		
Note: On any line where the eredit is from more than one equires a concrete Det III is needed for each		
<b>Note:</b> On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.		
1a         Investment (Form 3468, Part II only) (attach Form 3468)         .         .         Image: 1a         Image: 1a <th im<="" td=""><td></td></th>	<td></td>	
b Advanced manufacturing production (Form 7207)		
c Increasing research activities (Form 6765)		
d Low-income housing (carryforward only) (see instructions)		
e Disabled access (Form 8826)*		
f   Renewable electricity production (Form 8835)		
g       Indian employment (Form 8845)       .       .       .       .       .       Image:		
i New markets (Form 8874)		
j Small employer pension plan startup costs and auto-enrollment (Form 8881) <b>1</b> j		
I Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864) 11		
m Low sulfur diesel fuel production (Form 8896)		
n Distilled spirits (Form 8906)		
Nonconventional source fuel (carryforward only)		
p         Energy efficient home (Form 8908)         .         .         .         .         1p		
q   Energy efficient appliance (carryforward only)   .   .   .   .   Iq		
r         Alternative motor vehicle (Form 8910)         .         .         .         .         1r		
s Alternative fuel vehicle refueling property (Form 8911)		
t Enhanced oil recovery credit (Form 8830) 1t		
u Mine rescue team training (Form 8923)		
v    Agricultural chemicals security (carryforward only)    .    .    .    I		
w Employer differential wage payments (Form 8932)		
x         Carbon oxide sequestration (Form 8933)         .         .         .         .         1x		
y Qualified plug-in electric drive motor vehicle (Form 8936) 1y		
z Qualified plug-in electric vehicle (carryforward only)		
aa         Employee retention (Form 5884-A)         .         .         .         .         .         Iaa		
bb General credits from an electing large partnership (carryforward only) 1bb		
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other		
credits (see instructions)		
2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 2	0	
	122	
4a         Investment (Form 3468, Part III) (attach Form 3468)         .         .         .         4a		
<b>b</b> Work opportunity (Form 5884)	261	
c Biofuel producer (Form 6478)		
d Low-income housing (Form 8586)		
e Renewable electricity production (Form 8835)		
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 4f		
g Qualified railroad track maintenance (Form 8900)		
h Small employer health insurance premiums (Form 8941)		
i Increasing research activities (Form 6765)		
j Employer credit for paid family and medical leave (Form 8994)		
z Other		
	261	
	383	
* See instructions for limitation on this credit.		

Form 380				Page <b>3</b>
Name(s) s	hown on return		Identifying nun	nber
REGEN	TS OF THE UNIVERSITY OF MICHIGAN			6006309
Part II	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)	
Comple	te a separate Part III for each box checked below. See instructions.			
A 🗌 (	General Business Credit From a Non-Passive Activity E 🔲 Reserved			
в 🗌 (	General Business Credit From a Passive Activity F 🗌 Reserved			
C 🗹 (	General Business Credit Carryforwards 🛛 🛛 🖬 🗌 Eligible Small Busin	ess C	redit Carryforward	S
D 🗌 (	General Business Credit Carrybacks H 🗌 Reserved		-	
I If yo	u are filing more than one Part III with box A or B checked, complete and attach first	an ao	dditional Part III co	mbining amounts
from	all Parts III with box A or B checked. Check here if this is the consolidated Part III			· · · · □
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit	appropriate
	ough entity.		from a pass-through entity.	amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Advanced manufacturing production (Form 7207)	1b		
c	Increasing research activities (Form 6765)	10		620.541
d	Low-income housing (carryforward only) (see instructions)	1d		020,011
e	Disabled access (Form 8826)*	1e		
f	Renewable electricity production (Form 8835)	1f		
	Indian employment (Form 8845)			
g b		1g 1h		
h :	Orphan drug (Form 8820)			
1	New markets (Form 8874)	1i		
J	Small employer pension plan startup costs and auto-enrollment (Form 8881) .	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	<u>1n</u>		
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
zz	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		620,541
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		122
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		1,620
b	Work opportunity (Form 5884)	4b		54,588
c	Biofuel producer (Form 6478)	4c		,
d	Low-income housing (Form 8586)	4d		
e	Renewable electricity production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		252,941
	Qualified railroad track maintenance (Form 8900)	41 4g		202,041
g b	Small employer health insurance premiums (Form 8900)	49 4h		
h i		4n 4i		
i	Increasing research activities (Form 6765)			
1	Employer credit for paid family and medical leave (Form 8994)	4j		400.451
z		4z		139,451
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		448,600
<u>6</u>	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,069,263
See ins	tructions for limitation on this credit.			Form <b>3800</b> (2022)

4797 Form

Department of the Treasury

Internal Revenue Service

# Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184  $\mathcal{O} \cap \mathcal{O} \mathcal{O}$ 

	Ľ
Attachment Sequence No.	27

Name(s) shown on return Identifying nu					numbe	r		
REGE	REGENTS OF THE UNIVERSITY OF MICHIGAN 38					38-60	06309	
1a	a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions						1a	
b	Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets.							
с	c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets						1c	
Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)								
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	<b>(c)</b> Date sold (mo., day, yr.)	<b>(d)</b> Gross sales price	(e) Depreciation allowed or allowable since	(f) Cost or o basis, plu improvements	is s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	allowed or allowable since acquisition	basis, plu improvements expense of s	and	Subtract (f) from the sum of (d) and (e)
SCH	IEDULE K-1	VARIOUS	VARIOUS	41,362,604				41,362,604
3	Gain, if any, from Form	n 4684, line 39					3	
4	Section 1231 gain fron	n installment sales fron	n Form 6252, line 2	26 or 37			4	
5	Section 1231 gain or (I	oss) from like-kind exc	hanges from Form	n 8824			5	
6	Gain, if any, from line 3	32, from other than cas	sualty or theft .				6	1,466,260
7	Combine lines 2 throug	gh 6. Enter the gain or	(loss) here and on	the appropriate line	as follows		7	42,828,864
	<b>Partnerships and S c</b> line 10, or Form 1120-				ons for Form 1065,	Schedule K,		
	Individuals, partners, from line 7 on line 11 1231 losses, or they w Schedule D filed with y	below and skip lines & rere recaptured in an e	3 and 9. If line 7 is arlier year, enter th	s a gain and you dic ne gain from line 7 as	n't have any prior	year section		
8	Nonrecaptured net sec	ction 1231 losses from	prior years. See ir	nstructions			8	
9	Subtract line 8 from lir line 9 is more than zero capital gain on the Sch	o, enter the amount fro	m line 8 on line 12	below and enter the	e gain from line 9 as	s a long-term	9	
Par	Ordinary Gain	ns and Losses (se	e instructions)					•
10	Ordinary gains and los	ses not included on lin	es 11 through 16	(include property hele	d 1 year or less):			
11	Loss, if any, from line 7	7					11	( )
12	Gain, if any, from line 7	7 or amount from line 8	, if applicable .				12	
13	Gain, if any, from line 3	31					13	0
14	Net gain or (loss) from	Form 4684, lines 31 ar	nd 38a				14	
15	Ordinary gain from inst	tallment sales from For	rm 6252, line 25 or	[.] 36			15	
16	Ordinary gain or (loss)	from like-kind exchang	ges from Form 882	24			16	
17	Combine lines 10 throu	ugh 16					17	0
18	For all except individuate a and b below. For ind				ine of your return a	nd skip lines		
а	If the loss on line 11 inc from income-producing employee.) Identify as fr	property on Schedule	A (Form 1040), line	e 16. (Do not include	any loss on proper	y used as an	18a	
h	Bedetermine the gain						154	

Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 18b (Form 1040), Part I, line 4 

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 130861

Form 4797 (2022)

(see instructions)

Part III

#### (b) Date acquired (c) Date sold 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) Α SECTION 1250 - BAUPOST VALUE PARTNERS, L.P. - IV VARIOUS VARIOUS SECTION 1250 - THACKERAY PARTNERS REALTY FUND IV, L.P. VARIOUS VARIOUS в С SECTION 1250 - VIRTUS REAL ESTATE CAPITAL II, L.P. VARIOUS VARIOUS SECTION 1250 - VIRTUS REAL ESTATE CAPITAL III, LP VARIOUS VARIOUS D **Property A** Property B Property C Property D These columns relate to the properties on lines 19A through 19D. 20 161,990 1.622 1.245.307 57,341 20 Gross sales price (Note: See line 1a before completing.) . 21 Cost or other basis plus expense of sale . . . . 21 22 Depreciation (or depletion) allowed or allowable. . 22 0 0 Adjusted basis. Subtract line 22 from line 21. 23 0 0 23 161,990 1,245,307 24 Total gain. Subtract line 23 from line 20 . 24 1,622 57,341 25 If section 1245 property: Depreciation allowed or allowable from line 22 . . 25a а Enter the **smaller** of line 24 or 25a. . . 25b b 26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291. Additional depreciation after 1975. See instructions 26a а b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions. . . . . . . . 26b Subtract line 26a from line 24. If residential rental property С 161.990 1.622 1.245.307 57.341 or line 24 isn't more than line 26a, skip lines 26d and 26e 26c d Additional depreciation after 1969 and before 1976. 26d 26e Enter the smaller of line 26c or 26d . е Section 291 amount (corporations only) . 26f f 0 0 0 0 Add lines 26b, 26e, and 26f g 26g 27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership. a Soil, water, and land clearing expenses . . . . . 27a Line 27a multiplied by applicable percentage. See instructions 27b b С Enter the smaller of line 24 or 27b 27c If section 1254 property: 28 a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions 28a b Enter the smaller of line 24 or 28a. . . . . . . 28b 29 If section 1255 property: Applicable percentage of payments excluded from а income under section 126. See instructions . . . 29a Enter the smaller of line 24 or 29a. See instructions 29b b Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30. 1.466.260 30 30 31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 . . . 31 0 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from 32 1,466,260 other than casualty or theft on Form 4797, line 6 32 Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions) (a) Section (b) Section 280F(b)(2) 179 33 Section 179 expense deduction or depreciation allowable in prior years. 33

Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

Form	4562	
Form		

Department of the Treasury

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172 2022

Attach to your tax return.

Attachment Sequence No.	179

Depar Interna	ment of the Treasury I Revenue Service	Go to v	vww.irs.gov/Form4562	2 for instruction		est information.		Attachment Sequence No. <b>179</b>
Name	ame(s) shown on return Business or activity to which this form relates							ifying number
REG	ENTS OF THE UNIVE	RSITY OF MICH	IGAN 53000	0				38-6006309
Pa	t Election To	Expense Ce	rtain Property Und	der Section	179			
			ed property, compl			mplete Part I.		
1	Maximum amount (	see instruction	s)				1	1,080,000
2	Total cost of section	n 179 property	placed in service (se	e instructions	)		2	0
3	Threshold cost of se	ection 179 prop	perty before reduction	n in limitation	(see instruction	ons)	3	2,700,000
4	Reduction in limitati	on. Subtract lir	ne 3 from line 2. If zei	ro or less, ent	er-0		4	0
5	Dollar limitation for separately, see instr	•	otract line 4 from lir			r -0 If married filing	5	1,080,000
6		scription of proper		(b) Cost (busin		(c) Elected cost		
7	Listed property. Ent	er the amount	from line 29		7		0	
8	Total elected cost o	f section 179 p	property. Add amount	ts in column (	c), lines 6 and	17	8	0
9	Tentative deduction	. Enter the <b>sm</b> a	aller of line 5 or line 8	В			9	0
10			from line 13 of your				10	0
11						r line 5. See instructions	11	0
12	Section 179 expens	e deduction. A	dd lines 9 and 10, bu	ut don't enter	more than line	e <u>11</u>	12	0
13			to 2023. Add lines 9			13 0		
			for listed property. In					
Par	t II Special Dep	reciation All	owance and Othe	r Depreciat	<b>ion (Don't</b> ir	nclude listed property.	See	instructions.)
14				/ (other than	listed prope	rty) placed in service		
	during the tax year.						14	4,553,473
		.,.	1) election				15	0
	Other depreciation (					· · · · · · · · · · · · · · · · · · ·	16	0
Par	MACRS Dep	preciation (D	on't include listed		e instructior	IS. <b>)</b>		
47	MACDS deductions	for coasta pla	and in convince in tax.	Section A	a boforo 202	2	17	
					•	o one or more general	17	0
10	asset accounts, che	•	•					
					ear Using the	e General Depreciation	Svet	em
(a) (	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Conventior			epreciation deduction
19a	3-year property							
b	, , , , ,							
с	7-year property							
d	10-year property							
е	15-year property							
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property				MM	S/L		
		Assets Place	d in Service During	2022 Tax Ye	ar Using the	Alternative Depreciation	on Sys	stem
20a	Class life					S/L		
	12-year			12 yrs.		S/L		
	30-year			30 yrs.	MM	S/L		
	40-year		<b>`</b>	40 yrs.	MM	S/L		
	IV Summary (		,				6	
	Listed property. Ent						21	0
22			lines 14 through 17, of your return. Partne			(g), and line 21. Enter -see instructions	22	4,553,473
23			ed in service during t section 263A costs .			23 0		

Form	4562 (2022)														Page <b>2</b>
Pa	rt V Listed Property (Incluc entertainment, recreatio				other	vehic	les, ce	ertai	n airc	craft, a	and pr	operty	used f	or	
	<b>Note:</b> For any vehicle for w 24b, columns (a) through (c										ase ex	pense, (	comple	te <b>only</b>	24a,
	Section A–Depreciation and										for nas	senaer	autom	obiles )	
24a	a Do you have evidence to support the			-								idence w		-	No
	(c)				(e)										
	(a) (b) Business/ e of property (list vehicles first) (b) Date placed in service percentage				for depre ness/inves use only)	stment	(f) Recov perio		Met	<b>a)</b> hod/ ention		(h) preciation eduction	El	(i) ected sect cost	
25	Special depreciation allowance the tax year and used more thar									25			0		
26	Property used more than 50% in		-												
	C C	%													
	ç	%													
		%													
27	Property used 50% or less in a c		siness	use:									_		
		%							5/L -				_		
		%							5/L -				_		
		%					0.1		5/L -				_		
	Add amounts in column (h), lines Add amounts in column (i), line 2	-						-		28			0 29		0
29					mation					• •		•	29		0
Com	plete this section for vehicles used t									r." or r	elated r	person.	f vou p	rovided	vehicles
	bur employees, first answer the ques														, enneree
				a)	-	b)		(c)	İ		d)		e)	1	f)
30	Total business/investment miles driv the year ( <b>don't</b> include commuting n	0		cle 1		icle 2	Ve	ehicle	3		cle 4		cle 5	Vehicle 6	
31	Total commuting miles driven durin	g the year													
32	Total other personal (noncommiles driven	mmuting)													
33	Total miles driven during the y lines 30 through 32			0		0		0		(	0		0	(	)
34	Was the vehicle available for per	sonal	Yes	No	Yes	No	Yes	s	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?														
	Was the vehicle used primarily b than 5% owner or related persor	n?													
36	Is another vehicle available for pers														
Ans	Section C—Que wer these questions to determine		-	-						-				who <b>ar</b>	en't
more	e than 5% owners or related perso	ons. See in	structio	ons.											
37	Do you maintain a written policy your employees?				-						-		ng, by 	Yes	No
38	Do you maintain a written policy employees? See the instruction											0, 1			
39	Do you treat all use of vehicles b	y employe	es as p	ersona	l use?										
40	Do you provide more than five vuse of the vehicles, and retain the														
41	Do you meet the requirements co <b>Note:</b> If your answer to 37, 38, 3												· ·		
Par	•	59, 40, 01 4		es, uo	IT L COIT	ipiete .	Section		Jritie	cover	eu ven	icies.			
r ai	Amortization										(e)				
	(a) Description of costs	<b>(b)</b> Date amortiza begins	ation	Amo	<b>(c)</b> tizable ai	mount			(d) section	n	Amortiz perioc	ation I or	Amortiza	<b>(f)</b> ation for th	iis year
42	Amortization of costs that begins	s during yo	ur 2022	2 tax ye	ar (see	instru	ctions)	:				-			
	Amortization of costs that began	-		-								43			0
44	Total. Add amounts in column (	f). See the	instruc	tions fo	r where	e to rep	oort .					44			0
													I	orm <b>456</b>	<b>52</b> (2022)

Form	4562	
Form		

Department of the Treasury

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172 20**9**9

		-
	Attach to your tax return.	
./ =	me AECO for instructions and t	

Attachment	
Sequence No.	17

	ment of the Treasury I Revenue Service	Attachment Sequence No. <b>179</b>						
Name	lame(s) shown on return Business or activity to which this form relates							ifying number
REG	ENTS OF THE UNIVER		38-6006309					
Pa	t Election To	Expense Ce	rtain Property Und	der Section	179			
			ed property, compl			omplete Part I.		
1	Maximum amount (s	see instruction	s)				1	1,080,000
2					,		2	0
3			•			ions)	3	2,700,000
4	Reduction in limitati	on. Subtract lii	ne 3 from line 2. If zer	ro or less, ent	er-0		4	0
5		•	otract line 4 from lir	ne 1. If zero	or less, ente	er -0 If married filing		
	separately, see instr						5	1,080,000
6	(a) De	scription of proper	ty	(b) Cost (busi	ness use only)	(c) Elected cost		
7	Listed property Ent	er the amount	from line 29		7		0	
			property. Add amoun			17	8	0
9			aller of line 5 or line 8				9	0
10							10	0
11	-					or line 5. See instructions	11	0
12				•	,	ne 11	12	0
			to 2023. Add lines 9			13 0		
			for listed property. Ir	,				
Par	t II Special Dep	reciation All	owance and Othe	r Depreciat	ion (Don't i	nclude listed property	. See	instructions.)
14	Special depreciatio	n allowance f	or qualified property	/ (other than	listed prope	erty) placed in service		
	during the tax year.	See instruction	ns				14	0
		.,.	1) election				15	0
-	Other depreciation (						16	0
Par	IIII MACRS Dep	preciation (D	on't include listed		e instructio	ns.)		
		<u> </u>		Section A				
						22	17	695
10	asset accounts, che	• • •		•		· · ·		
						e General Depreciation	Svet	om
	Section B	(b) Month and year	(c) Basis for depreciation	Ĭ			l Oyst	
(a) (	Classification of property	placed in service	(business/investment use only-see instructions)	(d) Recovery period	(e) Conventio	n (f) Method	(g) D	epreciation deduction
19a	3-year property							
b								
с	7-year property							
d	10-year property							
е	15-year property							
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property				MM	S/L		-
		-Assets Place	d in Service During	2022 Tax Ye	ar Using the	Alternative Depreciatio	on Sy	stem
	Class life			10		S/L		
-	12-year			12 yrs.	K # K #	S/L		
	30-year			30 yrs.	MM	S/L		
o Par	40-year	Soo instructio		40 yrs.	MM	S/L		
	Listed property. Ent		,				21	
				lines 10			21	0
22			of your return. Partne			n (g), and line 21. Enter	22	695
23		-	ed in service during t	-	-			
			section 263A costs .			23 0		

Form	4562 (2022)														Page <b>2</b>
Pa	rt V Listed Property (Incluc entertainment, recreatio				other	vehic	les, ce	ertai	n airc	craft, a	and pr	operty	used f	or	
	<b>Note:</b> For any vehicle for w 24b, columns (a) through (c										ase ex	pense, (	comple	te <b>only</b>	24a,
	Section A–Depreciation and										for nas	senaer	autom	obiles )	
24a	a Do you have evidence to support the			-								idence w		-	No
	(c)				(e)										
	(a) (b) Business/ e of property (list vehicles first) (b) Date placed in service percentage				for depre ness/inves use only)	stment	(f) Recov perio		Met	<b>a)</b> hod/ ention		(h) preciation eduction	El	(i) ected sect cost	
25	Special depreciation allowance the tax year and used more thar									25			0		
26	Property used more than 50% in		-												
	C C	%													
	ç	%													
		%													
27	Property used 50% or less in a c		siness	use:									_		
		%							5/L -				_		
		%							5/L -				_		
		%					0.1		5/L -				_		
	Add amounts in column (h), lines Add amounts in column (i), line 2	-						-		28			0 29		0
29					mation					• •		•	29		0
Com	plete this section for vehicles used t									r." or r	elated r	person.	f vou p	rovided	vehicles
	bur employees, first answer the ques														, enneree
				a)	-	b)		(c)	İ		d)		e)	1	f)
30	Total business/investment miles driv the year ( <b>don't</b> include commuting n	0		cle 1		icle 2	Ve	ehicle	3		cle 4		cle 5	Vehicle 6	
31	Total commuting miles driven durin	g the year													
32	Total other personal (noncommiles driven	mmuting)													
33	Total miles driven during the y lines 30 through 32			0		0		0		(	0		0	(	)
34	Was the vehicle available for per	sonal	Yes	No	Yes	No	Yes	s	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?														
	Was the vehicle used primarily b than 5% owner or related persor	n?													
36	Is another vehicle available for pers														
Ans	Section C—Que wer these questions to determine		-	-						-				who <b>ar</b>	en't
more	e than 5% owners or related perso	ons. See in	structio	ons.											
37	Do you maintain a written policy your employees?				-						-		ng, by 	Yes	No
38	Do you maintain a written policy employees? See the instruction											0, 1			
39	Do you treat all use of vehicles b	y employe	es as p	ersona	l use?										
40	Do you provide more than five vuse of the vehicles, and retain the														
41	Do you meet the requirements co <b>Note:</b> If your answer to 37, 38, 3												· ·		
Par	•	59, 40, 01 4		es, uo	IT L COIT	ipiete .	Section		Jritie	cover	eu ven	icies.			
r ai	Amortization										(e)				
	(a) Description of costs	<b>(b)</b> Date amortiza begins	ation	Amo	<b>(c)</b> tizable ai	mount			(d) section	n	Amortiz perioc	ation I or	Amortiza	<b>(f)</b> ation for th	iis year
42	Amortization of costs that begins	s during yo	ur 2022	2 tax ye	ar (see	instru	ctions)	:				-			
	Amortization of costs that began	-		-								43			0
44	Total. Add amounts in column (	f). See the	instruc	tions fo	r where	e to rep	oort .					44			0
													I	orm <b>456</b>	<b>52</b> (2022)

Form	4562	
Form		

Department of the Treasury

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172 20**9**9

	Attach to your tax return.		
/Ear	m/562 for instructions and t	-ha	. 1

Attachment	470
Sequence No.	1/5

Deparl Interna	ment of the Treasury I Revenue Service	Go to v	www.irs.gov/Form4562	2 for instructio		t information.		Attachment Sequence No. <b>179</b>		
Name	s) shown on return		Busine	ss or activity to w	hich this form relat	es		ifying number		
REG	ENTS OF THE UNIVE	RSITY OF MICH	IGAN 71000	0				38-6006309		
Pa	t Election To	Expense Cer	rtain Property Und	der Section	179					
			d property, compl			nplete Part I.				
1	Maximum amount (	see instructions	3)				1	1,080,000		
2	Total cost of section	n 179 property	placed in service (se	e instructions	)		2	0		
3	Threshold cost of se	ection 179 prop	perty before reduction	n in limitation	(see instruction	ns)	3	2,700,000		
4	Reduction in limitati	on. Subtract lir	ne 3 from line 2. If zer	ro or less, ent	er-0		4	0		
5		-	otract line 4 from lir	ne 1. If zero	or less, enter	-0 If married filing				
	separately, see inst						5	1,080,000		
6	<b>(a)</b> De	scription of proper	ty	(b) Cost (busi	ness use only)	(c) Elected cost				
	Lists damage and a Fast		fuere line 00							
			from line 29			7	0			
-			property. Add amoun aller of line 5 or line 8	,			8	0		
9 10			from line 13 of your				9 10	0		
10 11	-		-			ine 5. See instructions	11	0		
12			dd lines 9 and 10, bu		,		12	0		
			to 2023. Add lines 9		-	<b>13</b> 0	-	0		
			for listed property. Ir							
						clude listed property	. See	instructions.)		
					-	y) placed in service				
• •	during the tax year.						14	0		
15	• •		1) election				15	0		
	Other depreciation (	.,	$\sim$				16	0		
Par	MACRS Dep	preciation (D	on't include listed	property. Se	e instructions	S.)				
			-		•		17	422,207		
	If you are electing t	o group any a	-	years beginnir	•	one or more general	17	422,207		
	If you are electing t asset accounts, che	o group any a ck here	ssets placed in serv	vears beginnir ice during the	e tax year into	one or more general				
	If you are electing t asset accounts, che	o group any a ck here — <b>Assets Plac</b>	ssets placed in serv	vears beginnir ice during the	e tax year into					
18	If you are electing t asset accounts, che	o group any a ck here	ssets placed in serv	vears beginnir ice during the	e tax year into	one or more general	n Syst			
18	If you are electing t asset accounts, che Section B	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	years beginnir ice during the  g 2022 Tax Y (d) Recovery	e tax year into	one or more general	n Syst	em		
18 (a) (	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	years beginnir ice during the  g 2022 Tax Y (d) Recovery	e tax year into	one or more general	n Syst	em		
18 (a) ( 19a b c	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	years beginnir ice during the  g 2022 Tax Y (d) Recovery	e tax year into	one or more general	n Syst	em		
18 (a) ( 19a b c d	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	years beginnir ice during the  g 2022 Tax Y (d) Recovery	e tax year into	one or more general	n Syst	em		
18 (a) ( 19a b c d d e	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	years beginnir ice during the  g 2022 Tax Y (d) Recovery	e tax year into	one or more general	n Syst	em		
18 (a) ( 19a b c d d e f	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	years beginnir ice during the <b>g 2022 Tax Y</b> (d) Recovery period	e tax year into	one or more general General Depreciation (f) Method	n Syst	em		
18 (a) ( 19a b c c d d e f g	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	(d) Recovery period	e tax year into	one or more general General Depreciation (f) Method	n Syst	em		
18 (a) ( 19a b c c d d e f g	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	(d) Recovery period (d) Recovery period 25 yrs. 27.5 yrs.	e tax year into ear Using the (e) Convention	one or more general General Depreciation (f) Method (f) Method (f) Method (f) Method (f) Method (f) Method (f) Method (f) Method (f) Method	n Syst	em		
(a) ( 19a b c d e f g h	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	(d) Recovery period (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs.	e tax year into ear Using the (e) Convention MM MM	one or more general General Depreciation (f) Method (f) Method	n Syst	em		
(a) ( 19a b c d e f g h	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 25-year property Residential rental property Nonresidential real	o group any a eck here -Assets Plac (b) Month and year placed in	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use	(d) Recovery period (d) Recovery period 25 yrs. 27.5 yrs.	e tax year into ear Using the (e) Convention (e) MM MM MM	one or more general General Depreciation (f) Method (f) Method S/L S/L S/L S/L S/L S/L	n Syst	em		
(a) ( 19a b c d e f g h	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 25-year property Residential rental property Nonresidential real property	o group any a eck here -Assets Plac (b) Month and year placed in service	ssets placed in service <b>During</b> (c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	e tax year into ear Using the (e) Convention (e) MM MM MM MM MM	one or more general General Depreciation (f) Method (f) Method S/L S/L S/L S/L S/L S/L S/L S/L	(g) D	em lepreciation deduction		
18 (a) ( 19a b c c d d e f f h i	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C-	o group any a eck here -Assets Plac (b) Month and year placed in service	ssets placed in service <b>During</b> (c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	e tax year into ear Using the (e) Convention (e) MM MM MM MM MM	one or more general General Depreciation (f) Method (f) Method	(g) D	em lepreciation deduction		
18 (a) ( 19a b c c d d e f f h h i i 20a	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C– Class life	o group any a eck here -Assets Plac (b) Month and year placed in service	ssets placed in service <b>During</b> (c) Basis for depreciation (business/investment use only—see instructions)	vears beginnir ice during the g 2022 Tax Y (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 2022 Tax Yes	e tax year into ear Using the (e) Convention (e) MM MM MM MM MM	one or more general General Depreciation (f) Method (f) Method S/L S/L S/L S/L S/L S/L S/L S/L	(g) D	em lepreciation deduction		
18 (a) ( 19a b c c d d e f f g h i i 20a b	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C-	o group any a eck here -Assets Plac (b) Month and year placed in service	ssets placed in service <b>During</b> (c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	e tax year into ear Using the (e) Convention (e) MM MM MM MM MM	one or more general General Depreciation (f) Method (f) Method	(g) D	em lepreciation deduction		
18 (a) ( 19a b c c d d e f f f f g g h h i i 20a b c c	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life 12-year	o group any a eck here -Assets Plac (b) Month and year placed in service	ssets placed in service <b>During</b> (c) Basis for depreciation (business/investment use only—see instructions)	vears beginnir ice during the g 2022 Tax Y (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 2022 Tax Yes 12 yrs.	A tax year into	one or more general General Depreciation (f) Method (f) Method	(g) D	em lepreciation deduction		
18 (a) ( 19a b c c d d d e f f g g h h i i 20a b c c d d	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C – Class life 12-year 30-year	o group any a eck here -Assets Plac (b) Month and year placed in service -Assets Place	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use only-see instructions) d in Service During	vears beginnir ice during the g 2022 Tax Y (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 2022 Tax Yes 12 yrs. 30 yrs.	A tax year into ear Using the (e) Convention (e) Convention MM MM MM ar Using the A MM	one or more general General Depreciation (f) Method (f) Method	(g) D	em lepreciation deduction		
18 (a) ( 19a b c c d d e f f g g h i i 20a b c c d d Par	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 20-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C – Class life 12-year 30-year	o group any a eck here -Assets Plac (b) Month and year placed in service -Assets Place -Assets Place -Assets Place	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use only-see instructions) d in Service During ns.)	vears beginnir ice during the g 2022 Tax Y (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 2022 Tax Yes 12 yrs. 30 yrs.	A tax year into ear Using the (e) Convention (e) Convention MM MM MM ar Using the A MM	one or more general General Depreciation (f) Method (f) Method	(g) D	em lepreciation deduction		
18 (a) ( 19a b c d d e f f g h h i i 20a b c c d f Par 21	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 25-year property 25-year property 25-year property Residential rental property Nonresidential real property Nonresidential real property Class life 12-year 30-year 40-year	o group any a eck here -Assets Place (b) Month and year placed in service -Assets Place -Assets Place -Assets Place -Assets Place -Assets Place	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use only-see instructions) d in Service During ns.) n line 28	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 29 yrs. 2022 Tax Yes. 39 yrs. 12 yrs. 30 yrs. 40 yrs.	A tax year into	one or more general General Depreciation (f) Method (f) Method	(g) D	em repreciation deduction		
18 (a) ( 19a b c d d e f f g h h i i 20a b c c d f Par 21	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Nonresidential real property Class life 12-year 30-year 40-year <b>U Summary (</b> S	o group any a eck here -Assets Place (b) Month and year placed in service -Assets Place -Assets Place -Assets Place -Assets Place -Assets Place -Assets Place	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use only-see instructions) d in Service During ns.) n line 28	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.4 yrs. 39 yrs. 2022 Tax Yes. 30 yrs. 40 yrs.	A tax year into ear Using the (e) Convention (e) Convention MM MM MM ar Using the A MM MM ar Using the A MM 20 in column (	one or more general General Depreciation (f) Method (f) Method	(g) D	em repreciation deduction		
18 (a) ( 19a b c d d e f f g h h i i 20a b c c d d Pari 22	If you are electing t asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Nonresidential real property Class life 12-year 30-year 40-year U Summary (S Listed property. Ent Total. Add amount here and on the app For assets shown a	o group any a eck here -Assets Place (b) Month and year placed in service -Assets Place -Assets Place	ssets placed in serv ed in Service During (c) Basis for depreciation (business/investment use only-see instructions) d in Service During ns.) n line 28 lines 14 through 17,	years beginnir ice during the g 2022 Tax Y (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 2022 Tax Yes 12 yrs. 30 yrs. 40 yrs. 40 yrs.	e tax year into         ear Using the         (e) Convention         (e) Convention         MM         MM         MM         MM         MM         MM         MM         MM         MM         On column (corporations— par, enter the	one or more general General Depreciation (f) Method (f) Method	(g) D	em  Pepreciation deduction  Stem  0		

Form	4562 (2022)														Page <b>2</b>
Pa	rt V Listed Property (Incluc entertainment, recreatio				other	vehic	les, ce	ertai	n airc	craft, a	and pr	operty	used f	or	
	<b>Note:</b> For any vehicle for w 24b, columns (a) through (c										ase ex	pense, (	comple	te <b>only</b>	24a,
	Section A–Depreciation and										for nas	senaer	autom	obiles )	
24a	a Do you have evidence to support the			-								idence w		-	No
	(c)				(e)										
	(a) (b) Business/ e of property (list vehicles first) (b) Date placed in service percentage				for depre ness/inves use only)	stment	(f) Recov perio		Met	<b>a)</b> hod/ ention		(h) preciation eduction	El	(i) ected sect cost	
25	Special depreciation allowance the tax year and used more thar									25			0		
26	Property used more than 50% in		-												
	C C	%													
	ç	%													
		%													
27	Property used 50% or less in a c		siness	use:									_		
		%							5/L -				_		
		%							5/L -				_		
		%					0.1		5/L -				_		
	Add amounts in column (h), lines Add amounts in column (i), line 2	-						-		28			0 29		0
29					mation					• •		•	29		0
Com	plete this section for vehicles used t									r." or r	elated r	person.	f vou p	rovided	vehicles
	bur employees, first answer the ques														, enneree
				a)	-	b)		(c)	İ		d)		e)	1	f)
30	Total business/investment miles driv the year ( <b>don't</b> include commuting n	0		cle 1		icle 2	Ve	ehicle	3		cle 4		cle 5		cle 6
31	Total commuting miles driven durin	g the year													
32	Total other personal (noncommiles driven	mmuting)													
33	Total miles driven during the y lines 30 through 32			0		0		0		(	0		0	(	)
34	Was the vehicle available for per	sonal	Yes	No	Yes	No	Yes	s	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?														
	Was the vehicle used primarily b than 5% owner or related persor	n?													
36	Is another vehicle available for pers														
Ans	Section C—Que wer these questions to determine		-	-						-				who <b>ar</b>	en't
more	e than 5% owners or related perso	ons. See in	structio	ons.											
37	Do you maintain a written policy your employees?				-						-		ng, by 	Yes	No
38	Do you maintain a written policy employees? See the instruction											0, 1			
39	Do you treat all use of vehicles b	y employe	es as p	ersona	l use?										
40	Do you provide more than five vuse of the vehicles, and retain the														
41	Do you meet the requirements co <b>Note:</b> If your answer to 37, 38, 3												· ·		
Par	•	59, 40, 01 4		es, uo	IT L COIT	ipiete .	Section		Jritie	cover	eu ven	icies.			
r ai	Amortization										(e)				
	(a) Description of costs	<b>(b)</b> Date amortiza begins	ation	Amo	<b>(c)</b> tizable ai	mount			(d) section	n	Amortiz perioc	ation I or	Amortiza	<b>(f)</b> ation for th	iis year
42	Amortization of costs that begins	s during yo	ur 2022	2 tax ye	ar (see	instru	ctions)	:				-			
	Amortization of costs that began	-		-								43			0
44	Total. Add amounts in column (	f). See the	instruc	tions fo	r where	e to rep	oort .					44			0
													I	orm <b>456</b>	<b>52</b> (2022)

Form <b>8990</b>
(Rev. December 2022)
Department of the Treasury Internal Revenue Service

## Limitation on Business Interest Expense Under Section 163(j)

OMB No. 1545-0123

Attach to your tax return.

Go to www.irs.gov/Form8990 for instructions and the latest information.

Тахр	ayer name(s) shown on tax return		Identificat	ion number
Rege	ents of the University of Michigan		:	38-6006309
Α	If Form 8990 relates to an information return for a foreign entity (for example, Form	n 5471), enter:	•	
	Name of foreign entity			
	Employer identification number, if any			
	Reference ID number			
В	Is the foreign entity a CFC group member? See instructions			
С	Is this Form 8990 filed by the specified group parent for an entire CFC group? See			
D	Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for			
	to complete			🗌 Yes 🔝 No
	rt I Computation of Allowable Business Interest Expense			
	t I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B ne payer is a partner or shareholder of a pass-through entity subject to section 163(j).	ed to be comple	ted before P	art I when the
Sec	tion I-Business Interest Expense			
1	Current year business interest expense (not including floor plan financing interest			
	expense), before the section 163(j) limitation	1	136,085	
2	Disallowed business interest expense carryforwards from prior years. (Does not			
	apply to a partnership)	2	701,914	
3	Partner's excess business interest expense treated as paid or accrued in current			
	year (Schedule A, line 44, column (h)) . . . . . . . . . . . .	3		
4	Floor plan financing interest expense. See instructions	4		
5	Total business interest expense. Add lines 1 through 4		5	837,999
Sec	tion II—Adjusted Taxable Income			
	Tentative Taxable Income			
6	Tentative taxable income. See instructions		6	0
	Additions (adjustments to be made if amounts are taken int	o account on lir	ne 6)	
7	Any item of loss or deduction that is not properly allocable to a trade or business			
	of the taxpayer. See instructions	7		
8	Any business interest expense not from a pass-through entity. See instructions	8		
9	Amount of any net operating loss deduction under section 172	9		
10	Amount of any qualified business income deduction allowed under section 199A	10		
11	Reserved for future use	11		
12	Amount of any loss or deduction items from a pass-through entity. See	10		
40		12		
13	Other additions. See instructions	13		
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14		
45	Total current year S corporation shareholder's excess taxable income (Schedule	14		
15	B, line 46, column (c))	15		
16	Total.         Add lines 7 through 15         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .<		16	<b>5</b> 0
	Reductions (adjustments to be made if amounts are taken in			0
17	Any item of income or gain that is not properly allocable to a trade or business			
	of the taxpayer. See instructions	17 (		
18	Any business interest income not from a pass-through entity. See instructions	18 (	)	
19	Amount of any income or gain items from a pass-through entity. See instructions	19 (	)	
20	Other reductions. See instructions	20 (	)	
21	Total. Combine lines 17 through 20		2	l ( o)
22	Adjusted taxable income. Combine lines 6, 16, and 21. See instructions			

For Paperwork Reduction Act Notice, see the instructions. Cat. No. 37814C Form **8990** (Rev. 12-2022)

Carryforward	Form 8	3990 (Rev. 12-2022)		Page <b>2</b>	
24       Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (g),	Sect	ion III—Business Interest Income			
A, line 44, column (g), and Schedule B, line 46, column (d))       24         25       Total. Add lines 23 and 24       25       0         Section IV – 163(j) Limitation Calculations       26       0         26       Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions       26       27         28       Floor plan financing interest expense (line 4)       27       28       29       0         29       Total. Add lines 26, 27, and 28       29       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0	23				
25       Total. Add lines 23 and 24       25       0         Section IV - 163(j) Limitation Calculations       Limitation on Business Interest Expense       26         26       Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions	24				
Section IV – 163(j) Limitation Calculations         Limitation on Business Interest Expense         26         28         See instructions         28         Floor plan financing interest expense (line 25)         29         29         29         7         29         7         29         29         0         Allowable Business Interest Expense         30         Correct Allowable Business Interest Expense         30         Otal current year business interest expense deduction. See instructions.         30         Total current year business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)         31         Business Interest Expense         30         Divide dusiness interest expense. Enter amount from line 31         32         Excess business Interest Expense         32         Excess business interest expense. Enter am	25		25	0	
Limitation on Business Interest Expense         26       Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions       26         27       Business interest income (line 25)       27         28       Floor plan financing interest expense (line 4)       29         29       Total. Add lines 26, 27, and 28       29         29       Total current year business interest expense (line 4)       30       0         29       Total current year business interest expense deduction. See instructions       30       0         20       Carryforward       31       837,999         29       Part III       Partnership Pass-Through Items       31       837,999         24       Ili only completed by a partnership. See the instructions for more information.       32       82         Excess Business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)       31       837,999         Part III       Partnership Dass-Through Items         Excess Business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)       31       837,999         Excess Business interest expense. Enter amount from line 31       32       32         Excess Business interest expense expense expense exetion 163(i). The partnership items below are a			20	0	
See instructions       26         27       Business interest income (line 25)       27         28       Floor plan financing interest sexpense (line 4)       28         29       Total. Add lines 26, 27, and 28       29         0       Allowable Business Interest Expense         30       Total current year business interest expense deduction. See instructions       30         0       Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (lf zero or less, enter -0)       31       837,999         Part II       Partnership Pass-Through Items       Part an are not carried forward by the partnership. See the instructions for more information.       32         Excess business interest expense. Enter amount from line 31       32         Subtract line 32 from line 5. (lf zero or less, enter -0)       33         33         Subtract the sum of lines 4 and 25 from line 5. (lf zero or less, enter -0)       34         34         Subtract line 31 from line 26. (lf zero or less, enter -0)       34         34         Subtract the sum of lines 4 and 25 from line 5. (lf zero or less, enter -0)       35         34         Subtract the suble income       35					
27       Business interest income (line 25)       27       28         29       Total. Add lines 26, 27, and 28       29       0         Allowable Business Interest Expense         30       Total current year business interest expense deduction. See instructions.       30       0         Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (lf zero or less, enter -0)       31       837,999         Part III       Partnership Pass-Through Items         Fact II is only completed by a partnership items         Part III is only completed by a partnership. See the instructions for more information.         Backerss Business Interest Expense         32         Excess business interest expense. Enter amount from line 31       32         Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33         Subtract line 33 from line 26. (If zero or less, enter -0)       33         34         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       34         35	26	Multiply the adjusted taxable income from line 22 by the applicable percentage.			
28       Floor plan financing interest expense (line 4)       28         29       O         Allowable Business Interest Expense         30       Total current year business interest expense deduction. See instructions.       30       0         Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (lf zero or less, enter -0)       31       837,999         Part II       Partnership Pass-Through Items         Part III sonly completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.         Base State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State State St					
29       Total. Add lines 26, 27, and 28.       29       0         Allowable Business Interest Expense         30       Total current year business interest expense deduction. See instructions.       30       0         Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (lf zero or less, enter -0)       31       837,999         Part III       Partnership Pass-Through Items         Part III sonly completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.         Excess business interest expense. Enter amount from line 31.       32         Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33       Subtract line 34 and 25 from line 5. (lf zero or less, enter -0)       33         Subtract line 34 by line 26. (lf zero or less, enter -0)       34         Subtract line 34 by line 26. (lf zero or less, enter -0)       35         36         Excess Business Interest Income         37         Excess Business Interest Income         37         2					
Allowable Business Interest Expense         30       Total current year business interest expense deduction. See instructions.       30       0         Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)       31       837,999         Part II sonly completed by a partnership that is subject to section 163(i). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.         Excess Business Interest Expense         32       Excess business interest expense. Enter amount from line 31       32         Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33         Subtract line 30 from line 26 (If zero or less, enter -0)       33         34       Subtract line 33 from line 26. (If zero or less, enter -0)       34         50         53         Excess business interest income. Multiply line 35 by line 22       36         50         50         50         50         Carcess Business Interest Income         37         Excess business interest income. S					
30       Total current year business interest expense deduction. See instructions.       30       0         Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)       31       837,999         Part II       Partnership Pass-Through Items         Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.         Sectors Business Interest expense. Enter amount from line 31         32       Excess business interest expense. Enter amount from line 31         33         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         34         Subtract the sum of lines 26. (If zero or less, enter -0)         33         Subtract the sum of lines 26. (If zero or less, enter -0)         35         34         Subtract the sum of lines 26. (If zero or less, enter -0)         35         36         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         37 <td colsp<="" td=""><td>29</td><td></td><td>29</td><td>0</td></td>	<td>29</td> <td></td> <td>29</td> <td>0</td>	29		29	0
Carryforward         31       Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)       31       837,999         Part II       Partnership Pass-Through Items       Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.       32         Excess Business Interest Expense         32       Excess Taxable Income (If you entered an amount on line 31.       32         Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       33         34       Subtract line 33 from line 26. (If zero or less, enter -0)       34         35		•			
31       Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0)       31       837,999         Part II       Partnership Pass-Through Items       Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.       32         Excess Business Interest Expense         32       Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       33         34       Subtract line 33 from line 26. (If zero or less, enter -0)       34         35	30	Total current year business interest expense deduction. See instructions	30	0	
Part II       Partnership Pass-Through Items         Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.         Excess Business Interest Expense         32         Excess business interest expense. Enter amount from line 31         32         Excess business interest expense. Enter amount from line 31         32         Excess business interest expense. Enter amount from line 31         32         Excess business interest expense. Enter amount from line 31         32         Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         34         Subtract line 33 from line 26. (If zero or less, enter -0)         35         36         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         37         Excess Taxable income         37         Excess Taxable inco		Carryforward			
Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.         Excess Business Interest Expense         32       Excess business interest expense. Enter amount from line 31       32         Excess business interest expense. Enter amount from line 31       32         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       33         34         Subtract line 33 from line 26. (If zero or less, enter -0)       34         35         36         Excess business interest income. Multiply line 35 by line 22       36         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         37         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         37         Part III S Orporation Pass-Through Items         Part III S Corporation Pass-Through Items         Part III S Corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Subtract the sum of lines 4 and 25 fr			31	837,999	
and are not carried forward by the partnership. See the instructions for more information.         Excess Business Interest Expense         32 Excess business interest expense. Enter amount from line 31         32         Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)         33         33         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         34         34         Subtract the 33 from line 26. (If zero or less, enter -0)         35         35         5 Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)         36         Excess Business Interest Income         37         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         37         Part III         S Corporation Pass-Through Items         Part III         S Corporation Pass-Through Items         Part III         Is corporation pass-Through Items         Subtract the sum of lines 4 and 25 from line					
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33       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       33         34       Subtract line 33 from line 26. (If zero or less, enter -0)       34         35       Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       35         36       Excess taxable income. Multiply line 35 by line 22       36         Excess business interest income. Multiply line 35 by line 22         36         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         art III         S Corporation Pass-Through Items         Part III         S Corporation Pass-Through Items         Part III S only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Excess Taxable Income         38         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         38         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         39         Subtract the saft from line 26. (If zero or less, enter -0)         39         38 </td <td>32</td> <td>Excess business interest expense. Enter amount from line 31</td> <td>32</td> <td></td>	32	Excess business interest expense. Enter amount from line 31	32		
34       Subtract line 33 from line 26. (If zero or less, enter -0)       34         35       Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       35         36       Excess taxable income. Multiply line 35 by line 22       36         Excess business interest income. Multiply line 35 by line 22         36         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         37         Part III         S Corporation Pass-Through Items         Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Excess Taxable Income         38         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         38         Subtract line 38 from line 26. (If zero or less, enter -0)         39         40         Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)		Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.	)		
35       Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       35	33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	33		
36 Excess taxable income. Multiply line 35 by line 22       36         Excess Business Interest Income         37         Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0)         or enter -0)         or enter -0)         Part III         S Corporation Pass-Through Items         Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Excess Taxable Income         38         Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)         38         39         Output the same of line 26. (If zero or less, enter -0)         39         40         Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	34	Subtract line 33 from line 26. (If zero or less, enter -0)	34		
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enter -0).       37         Part III S Corporation Pass-Through Items         Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Excess Taxable Income         38 Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       38         39 Subtract line 38 from line 26. (If zero or less, enter -0)       39         40 Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       40		Excess Business Interest Income			
Part III       S Corporation Pass-Through Items         Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Excess Taxable Income         38       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       38         39       Subtract line 38 from line 26. (If zero or less, enter -0)       39         40       Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       40	37				
Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.         Excess Taxable Income         38       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)       38         39       Subtract line 38 from line 26. (If zero or less, enter -0)       39         40       Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       40	_	enter -0)	37		
See the instructions for more information.         Excess Taxable Income         38       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)					
38       Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)			ated to	the shareholders.	
39       Subtract line 38 from line 26. (If zero or less, enter -0)       39       39         40       Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)       40       40		Excess Taxable Income			
40 Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	38		
	39	Subtract line 38 from line 26. (If zero or less, enter -0)	39		
41         Excess taxable income. Multiply line 40 by line 22         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         <			-		
	41	Excess taxable income. Multiply line 40 by line 22	41		

**Excess Business Interest Income** 

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less,		
	enter -0)	42	

Form 8990 (Rev. 12-2022)

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.

		ship <b>(b)</b> EIN	Exces	ss Business Interest Exp	pense	(6) Current veger		(h) Excess business	(i) Current year excess busines
	(a) Name of partnership		(c) Current year (see instructions)	(d) Prior year carryforward (see instructions)	<b>(e)</b> Total ((c) plus (d))	(f) Current year excess taxable income	(g) Current year excess business interest income	interest expense treated as paid or accrued (see instructions)	interest expense carryforward (see instructions)
3	See Statement								
14	Total								

#### SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

	(a) Name of S corporation	<b>(b)</b> EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
45				
46	Total			

Form 8990 (Rev. 12-2022)

#### Form 8990 Schedule A - Summary of Partner's Section 163(j) Excess Items

		Excess business Interest E		Expense			Excess business	
					Current year	Current year	interest expense	Current year excess
			Prior Year		excess taxable	excess business	treated as paid or	business interest
Name of Partnership	EIN	Current Year	Carryforward	Total	income	interest income	accrued	expense carryforward
column (a)	column (b)	column (c)	column (d)	column (e)	column (f)	column (g)	column (h)	column (i)
Old Ironsides Energy Fund III-A, L.P.	XX-XXX5117	-	31,780	31,780	-	-	-	31,780
Related Real Estate Fund II, L.P.	XX-XXX6250	-	20,037	20,037	-	-	-	20,037
Battery Ventures XII Side Fund AIV I, L.P.	XX-XXX4464	-	473	473	-	-	-	473
Battery Ventures XII AIV III, L.P.	XX-XXX9026	-	448	448	-	-	-	448
Battery Ventures XII Side Fund AIV III, L.P.	XX-XXX5652	-	419	419	-	-		419
BATTERY VENTURES XII AIV I, LP	XX-XXX9847	-	187	187	-	-	-	187
Redding Ridge Holdings L.P.	XX-XXX9507	-	570,939	570,939	-	-	-	570,939
PETROCAP PARTNERS II, L.P.	XX-XXX1213	20,453	60,844	81,297	-	-		81,297
PETROCAP PARTNERS III, L.P.	XX-XXX1666	85,613	16,787	102,400	-	-		102,400
HCP RADFORD CI, LP	XX-XXX4455	30,019	-	30,019				30,019
Total		136,085	701,914	837,999	-	-	-	837,999

Form 3800 General Business Credits Part I, Line 4

Tax Year	Empowerment	Investment	Work	Credit for	Credit for	Other credit	Total
	zone and	credit	opportunity	increasing	employer social		
	renewal		credit	reseach activities	and security		
	community				medicare taxes		
	employment						
	credit						
FYE 06/30/2012	-	294	1,908	13,264	17,885	-	33,351
FYE 06/30/2013	-	-	2,637	8,430	18,218	-	29,285
FYE 06/30/2014	-	-	802	14,421	24,431	-	39,654
FYE 06/30/2015	-	1,326	4,184	8,934	28,692	-	43,136
FYE 06/30/2016	-	-	1,283	3,137	31,257	-	35,677
FYE 06/30/2017	-	-	7,347	21,511	13,954	-	42,812
FYE 06/30/2018	-	-	7,920	54,584	15,324	-	77,828
FYE 06/30/2019	-	-	880	85,729	36,445	-	123,054
FYE 06/30/2020	-	-	6,636	62,630	34,167	-	103,433
FYE 06/30/2021	120	-	5,528	92,806	4,212	55	102,721
FYE 06/30/2022	2	-	15,463	255,095	28,356	139,396	438,312
FYE 06/30/2023	216		24,165	428,750	18,390	1,154	472,675
Total	338	1,620	78,753	1,049,291	271,331	140,605	1,541,938

### Form 3800 General Business Credits Part III

EIN	Line 4b-Work opportunity credit	Line 1c-Increasing research activities	social security &	Line 3 - Empowerment zone and renewal community employment credit	Line 4z - Other credits	Totals
83-3566571		56,881				56,881
82-2325117		314,129				314,129
82-4533588						-
98-1106850		3,088				3,088
82-2313146						-
47-4196573		30,488				30,488
45-3262896			3,193			3,193
20-8255115		1				1
82-3609568		4,582				4,582
87-1256819	17,753					17,753
98-1540460		2,809				2,809
84-2156939						-
80-0965931		1,577				1,577
92-0931194		277				277
82-3743557						-
98-1318417		2,577				2,577
98-1520367		245				245
98-1577468	1,821	1,246		94		3,161
47-4531004	957	19				976
98-1184642		8,608				8,608
26-2377163		1,746				1,746
84-3530768	204					204
81-2828481	45		15,197			15,242
82-4029562		477				477
85-3284989	1,151				626	1,777
84-5189267	973				528	1,501
47-3296531	1,261			122		1,383
Total	24,165	428,750	18,390	216	1,154	472,675

Tax Year	Foreign Branch Taxes Paid	Passive Taxes Paid	General Taxes Paid	Other Taxes Paid	Foreign Branch Taxes Accrued	Passive Taxes Accrued	General Taxes Accrued	Sub Total
6/30/2013	-	120,627	22,498	-	-	4,697	69,607	217,429
6/30/2014	-	259,769	16,726	-	-	40,183	27,213	343,891
6/30/2015	-	199,698	20,383	-	-	21,621	3,164	244,866
6/30/2016	-	36,669	4,123	-	-	10,485	3,261	54,538
6/30/2017	-	98,611	8,065	-	-	10,995	93,199	210,870
6/30/2018	-	236,025	13,248	-	-	23,782	21,587	294,642
6/30/2019	-	267,248	24,028	-	-	3,547	26,923	321,746
6/30/2020	-	129,137	3,186	-	-	7,438	19,261	159,022
6/30/2021	167	21,122	3,442	-	-	99	320	25,150
6/30/2022	8,652	59,776	22,547	50	5,134	73,621	28,262	198,042
6/30/2023	997	14,354	5,457	-	1	334	2,111	23,254
Total	9,816	1,443,036	143,703	50	5,135	196,802	294,908	2,093,450

#### Ordinary Income Tax Carry Forward Schedule of Foreign Tax Credits

## Form 990-T Backup Withholding Part III, line 6e

EIN/TIN	Backup Withholding Amount
82-2325117	2,829
82-4533588	319
82-2313146	122
84-2156939	99
82-3743557	1,429
13-5582869	3
42-6362604	963
04-6568107	2,011
Total	7,775

## The Regents of the University of Michigan - 38-6006309 Form 990-T For the Year Ended June 30, 2023

**Prior Period Adjustments to Net Operating Losses (NOLs) Post 2017** – Form 990 - Part IV, Line 5, Post-2017 NOL Carryover (attached statement #4) and Schedule A – Part II, Line 17 (attached statement #8)

The University of Michigan (U-M) adjusted the post-2017 NOLs carryover for unrelated business taxable income (UBTI) for certain investments based on Schedule K-1s that impact fiscal years (FY) 2020 through 2022. The prior period adjustments represent a total gain of \$3,491,213 that overall decreases the post-2017 net operating losses (NOLs). The silos adjusted include NAICS Code 52, Finance and Insurance; NAICS Code 53, Real Estate, Rental and Leasing; and Non-NAICS Code 90, Investment Activities. Accordingly, these adjustments do not generate tax liabilities for the income tax returns, Form 990-T filed for FYs 2020 through 2022 and, consequently, are made to the beginning balances of Form 990-T for FY 2023.

Year Ending Ba		ng Balance FY2022	Silo 52 Balance FY2022 Prior Period Adjustment			Beginning Balance FY 2023		
FY 2019	\$	-0-			S	-0-		
FY 2020	\$	(9,314,334)	\$	65,744	\$	(9,248,590)		
FY 2021	\$	(200,754)	\$	-0-	\$	(200,754)		
FY 2022	\$	-0-	\$	-0-	\$	-0-		
FY 2023		N/A			\$	(1,920,859)		
Total	\$	(9,515,088)	\$	<mark>65,744</mark>	\$	(11,370,203)		

Post-2017 NOLs – Adjusted NOLs for Beginning Balances of Silos #52, #53, and #90 for FY 2023

	Silo 53						
Year	Ending Balance FY2022		Prior Period Adjustment		Beginning Balance FY2023		
FY 2019	\$	(2,861,357)			\$	(2,861,357)	
FY 2020	\$	(4,659,414)	\$	-0-	\$	(4,659,414)	
FY 2021	\$	(3,078,218)	\$	-0-	\$	(3,078,218)	
FY 2022	\$	(4,404,493)	\$	3,989	\$	(4,400,504)	
FY 2023		N/A			\$	(4,820,876)	
Total	\$	(15,003,482)	\$	<mark>3,989</mark>	\$	(19,820,369)	

	Silo 90						
Year	Ending Balance FY2022		Prior Period Adjustment		Beginning Balance FY2023		
FY 2019	\$	(110,049,396)			\$	(110,049,396)	
FY 2020	\$	(34,578,913)	\$	(372,537)	\$	(34,951,450)	
FY 2021	\$	(35,609,200)	\$	3,794,017	\$	(31,815,183)	
FY 2022	\$	-0-	\$	-0-	\$	-0-	
FY 2023		N/A			\$	-0-	
Total	\$	(180,237,509)	\$	<mark>3,421,480</mark>	\$	(176,816,029)	

□ Total \$3,491,213 (\$65,744 + \$3,989 + \$3,421,480)

**Prior Period Adjustments to Net Operating Losses (NOLs) Pre-2018** – Form 990 - Part I, Line 6, Deduction for Pre-2018 NOLs which is consistent with Part IV, Line 6 (attached statement #3)

Additionally, U-M decreased the pre-2018 NOLs by \$10,673. Silo 90 for FY 2022 generated an overall gain which included a loss of \$10,673 that due to the adjustments mentioned above should not have been deducted. In which case, the gain must be increased by this loss to reflect the actual UBTI for that year, requiring that the NOLs be decreased accordingly. This reduction is applied to FY 2010, the year in which the NOL was used to offset the gain. The revised NOL carryforward is \$129,919,732 (\$129,930,405 - \$10,673).

The schedule below reflects both the increase in the gain by \$10,673^a for silo 90 for FY 2022 and the decrease of the NOLs as shown on the NOLs carryover schedule for FY 2010 (refer to the attached schedule for Form 990-T, Part I, Line 6, attached statement #3).

Actual Gain That Should Have Been Included on Form 990-T, Part I, Line 5, Total UBIT for	r FY 2022:
Original Gains on the Form 990-T for FY2022	\$10,379,440
Plus: Adjusted amount for loss from silo 90 that should be added back	<u>\$ 10,673ª</u>
Adjusted Gains on the Form 990-T FY2022	<u>\$10,390,113^b</u>
Adjusted NOLs on Form 990-T, Part I, Line 6 for FY2022 as Shown for FY2010	
NOLs Generated	\$(44,333,664)
Less: Amount used in Years Prior to FY2022	<u>\$ 25,291,325</u>
Subtotal	\$ (19,042,339)
Less: Adjusted amount used in FY2022	\$ <u>10,390,113^b</u>
Total Amount Used in the Current Year as Shown in FY2010 for Form 990-T	<u>\$ (8,652,226)^c</u>
Part I, Line 6 for FY2023 (attached statement #3)	
Reconciles with FY2022 Amount Remaining for FY2022 As Shown in FY2010:	
(\$8,662,899 - \$10,673ª = \$8,652,226)°	