### EXTENDED TO MAY 17, 2021

(Rev. January 2020) Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax** 

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

Open to Public Inspection

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

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

A I	For the	$\pm$ 2019 calendar year, or tax year beginning $$ JUL $$ $$ 1 $$ , $$ $$ $$ $$ 2 $$ 0 $$ 1 $$ $$ and endi	ling J	<u>UN 30, 2020</u>				
В	Check if applicabl	C Name of organization		D Employer identifi	cation number			
	Addre chang	ILLINOIS STATE UNIVERSITY FOUNDATION						
	Name chang	Doing business as		**-***57	13			
	Initial return Final return	101 ALIMNT CENTER CAMBIG BOY 8000	m/suite	E Telephone number (309) 438-8901				
	termin ated			G Gross receipts \$	105,470,406.			
	Ameno return			H(a) Is this a group re				
	Applic tion	Finame and address of principal officer: FAI VICKERMAN		for subordinates				
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No			
		empt status: $\mathbf{X}$ 501(c)(3) $\mathbf{S}$ 501(c) ( ) $\mathbf{A}$ (insert no.) $\mathbf{S}$ 4947(a)(1) or $\mathbf{S}$	527	If "No," attach a	list. (see instructions)			
		e: > WWW.ADVANCEMENT.ILLINOISSTATE.EDU/ISU-FO	UND	H(c) Group exemption	on number			
			<b>L</b> Year	of formation: 1948 r	<b>M</b> State of legal domicile: <b>IL</b>			
Pa		Summary						
o)	1	Briefly describe the organization's mission or most significant activities: TO HOLI						
Governance		THE PRIMARY OBJECTIVE OF SERVING THE EDUCAT						
š	2	Check this box 🕨 🔛 if the organization discontinued its operations or disposed of	of more	ı				
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)			27			
		Number of independent voting members of the governing body (Part VI, line 1b)			27			
ies	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			0			
Activities &	6	Total number of volunteers (estimate if necessary)						
Ac	/ a	Total unrelated business revenue from Part VIII, column (C), line 12						
_	D	Net unrelated business taxable income from Form 990-T, line 39	·····					
		Contributions and grants (Port VIII line 1b)		Prior Year 28,582,144.	Current Year 21,594,730.			
Ē	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		94,102.	81,733.			
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,319,613.				
Be	11	Other revenue (Part VIII, column (A), lines 5, 4, and 7d)  Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,237,502.	1,254,094.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		33,233,361.	27,762,269.			
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		9,270,335.	12,655,571.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
ú	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
per	. ь	Total fundraising expenses (Part IX, column (D), line 25)  949,262	•					
ы	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	🗀	2,361,641.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,631,976.				
	19	Revenue less expenses. Subtract line 18 from line 12		21,601,385.	12,592,328.			
Net Assets or	9			ginning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)	2	07,004,248.	215,587,572.			
t As	21	Total liabilities (Part X, line 26)		3,996,130.				
		Net assets or fund balances. Subtract line 21 from line 20	2	03,008,118.	212,103,144.			
	art II	Signature Block						
	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	oreparer	nas any knowledge.				
O:		Signature of officer		I Date				
Sig		PAT VICKERMAN, EXECUTIVE DIRECTOR		Date				
Her	е	Type or print name and title						
_		Print/Type preparer's name  Preparer's signature		Date Check [	PTIN			
Paid	i	JOSH C. CLARK  JOSH C. CLARK		1/29/21 if self-employ				
	- parer	Firm's name KERBER, ECK & BRAECKEL LLP		Firm's EIN ▶	**-***2985			
	Only	Firm's address 3200 ROBBINS ROAD, STE 200A	TIIII 3 LIN					
		SPRINGFIELD, IL 62704		Phone no. 21	7-789-0960			
Ma'	v the If	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No			

Page 2

Га	Objects if Oak adds Oak adds Oak adds of the Compliant in this Dark III
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO HOLD AND ADMINISTER GIFTS WITH THE PRIMARY OBJECTIVE OF SERVING THE
	EDUCATIONAL PURPOSES OF ILLINOIS STATE UNIVERSITY.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$12,655,571. including grants of \$12,655,571. ) (Revenue \$1,275,476. )
	ASSIST IN DEVELOPING AND INCREASING EDUCATION OPPORTUNITIES AND THE
	FACILITIES OF THE UNIVERSITY FOR SERVICE TO ITS STUDENTS, ALUMNI, AND
	CITIZENS OF THE STATE AND NATION BY ENCOURAGING GIFTS OF MONEY AND
	PROPERTY; ACT AS TRUSTEE OF EDUCATIONAL OR CHARITABLE TRUSTS;
	ADMINISTER GIFTS, GRANTS, OR LOANS OF MONEY OR PROPERTY.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	, (
<b>1</b> ~1	Other program convices (Describe on Schodule O.)
4d	Other program services (Describe on Schedule O.)
10	(Expenses \$\frac{\text{including grants of \$}}{12,655,571.}\frac{\text{Revenue \$}}{\text{Revenue \$}}
<u>4e</u>	Total program service expenses \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

# Form 990 (2019) ILLINOIS STATE UNIVERSITY FOUNDATION Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
• •	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	, ,	44-	х	
	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	441	Х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
		19		х
20a	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	·	20a 20b		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	_ 4\_	

#### ILLINOIS STATE UNIVERSITY FOUNDATION Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III ....... Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV ..... c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I ..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes, " complete Schedule R, Part II, III, or IV, and 34 **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V

					Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	85				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?			1c	X		

1019) ILLINOIS STATE UNIVERSITY FOUNDATION

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No					
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		X					
С									
6a									
	any contributions that were not tax deductible as charitable contributions?								
b	<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
_	were not tax deductible?	6b							
7									
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
	<ul> <li>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</li> <li>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required</li> </ul>								
С	to file Form 8282?	7-		Х					
٨	I - I	7c		- 22					
d e		7e		Х					
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h							
8									
	sponsoring organization have excess business holdings at any time during the year?								
9									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans 13b								
	c Enter the amount of reserves on hand 13c								
14a	· · · · · · · · · · · · · · · · · · ·								
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		х					
	excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.	15		- 23					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.	.0							
	ii 199, sampiata i ann 1129, contoado oi								

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 27								
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent 27								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
•	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
	(This decitor is requests information assure policies not required by the internal nevertice dode.)		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	Х						
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14	Х						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Х						
	Other officers or key employees of the organization	15b	X						
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		Х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure	100							
17	List the states with which a copy of this Form 990 is required to be filed ▶IL, AZ, CA, CT, DC, FL, LA, ME, MD	MA.	MI.	MN					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s								
	for public inspection. Indicate how you made these available. Check all that apply.		a, and						
	X Own website Another's website X Upon request Other (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial						
.5	statements available to the public during the tax year.	·····airc							
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
_5	PAT VICKERMAN - 309-438-3135								
	101 ALUMNI CENTER, 1101 N. MAIN ST., CAMPUS BOX 8000, NORMAL, IL	6:	179	0 –					

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

<b>(A)</b> Name and tit <b>l</b> e	(B) Average hours per week	box	not cl	Pos heck i ss per	more rson i	than o s both r/trus	an an	( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERIC E BURWELL	0.50									
CHAIRPERSON		X		Х				0.	0.	0.
(2) KENNETH GLOVER, SR.	0.50									
VICE CHAIRPERSON		X		Х				0.	0.	0 .
(3) JAMES A. KNECHT	0.50								_	_
SECRETARY		X		Х				0.	0.	0 .
(4) DAVID WAMPLER	0.50	ļ								_
TREASURER		X		Х				0.	0.	0,
(5) ANN BAUGHAN	0.50	۱								•
BOARD MEMBER	0.50	X						0.	0.	0 .
(6) GREG AYERS	0.50	٠,,							•	
BOARD MEMBER	0.50	X						0.	0.	0.
(7) CARLA BARNES	0.50	٠,,							0	_
BOARD MEMBER	0.50	X						0.	0.	0
(8) DAVID L. BROWN BOARD MEMBER	0.50	X						0.	0.	0 .
(9) STEVEN DENAULT	0.50	^						0.	0.	0
BOARD MEMBER	0.30	X						0.	0.	0 .
(10) MARC BULANDR	0.50	^						0.	0.	0 .
BOARD MEMBER	0.30	x						0.	0.	0 .
(11) SHARI BUCKELLEW	0.50	1						•	•	
BOARD MEMBER		x						0.	0.	0.
(12) TRISH ROARK	0.50	† <del></del>								
BOARD MEMBER		x						0.	0.	0.
(13) BILL ENGLAND	0.50							-	-	
BOARD MEMBER		x						0.	0.	0.
(14) GARY GEMBERLING	0.50									
BOARD MEMBER		x					L	0.	0.	0.
(15) BENJAMIN HART	0.50									
BOARD MEMBER		X						0.	0.	0 .
(16) COLLEEN KANNADAY	0.50									
BOARD MEMBER		X						0.	0.	0 .
(17) DAN KELLEY	0.50	1								
BOARD MEMBER		X						0.	0.	0

Form **990** (2019)

Part VII Section A. Officers, Directors, Trust	tees. Kev Emr	olov	ees.	and	Hic	ahes	t C	ompensated Employee	S (continued)				
(A)	(B)	B) (C)						(D)	(E)			(F)	
Name and title	Average			Posi		)		Reportable	Reportab <b>l</b> e		Fe	timate	ad.
Name and the	hours per					than o		compensation	compensation			nount	
	week					r/trus		from	from related			other	0.
	(list any	ctor						the	organization			pensa	tion
	hours for	r dire				ted		organization	(W-2/1099-MIS	SC)	fr	om th	е
	related	stee o	nstee.			ensa		(W-2/1099-MISC)			org	anizat	ion
	organizations	al trus	nal tr		loyee	comp						d relat	
	below line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
(18) JOSEPH LOSS	0.50	E E		JJ0	Ke	E E	For						
BOARD MEMBER	0.50	х						0.		0.			0.
(19) JAMES MOUNIER	0.50	Δ						0.		•			<u> </u>
BOARD MEMBER	0.30	х						0.		0.			0.
(20) JACK NORTH	0.50							0.		•			<del>••</del>
BOARD MEMBER	0.50	х						0.		0.			0.
(21) THOMAS REEDY	0.50												
BOARD MEMBER		х						0.		0.			0.
(22) JOHN RIGAS	0.50												
BOARD MEMBER		X						0.		0.			0.
(23) ROBERT RUSH, JR.	0.50												
BOARD MEMBER		X						0.		0.			0.
(24) CARL SNEED	0.50												_
BOARD MEMBER	2 - 2	X						0.		0.			0.
(25) DEREK VOGLER	0.50												_
BOARD MEMBER		X						0.		0.			0.
(26) MARY ANN WEBB	0.50									_			
BOARD MEMBER		X						0.		0.			0.
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Part VII								974,259.		0.		5,5	
d Total (add lines 1b and 1c)							<u> </u>	974,259.		0.	2.	5,5	96.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	)			c
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director tructs	aa l		mnl	01/0		bia	haat aamnanaatad amn	lovos on	1		162	NO
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for st	*	,	•	•	•	,	·		•		3		X
4 For any individual listed on line 1a, is the su								per compensation from t			3		71
and related organizations greater than \$150								•	-		4	Х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	•				•			•			5	Х	
Section B. Independent Contractors													
1 Complete this table for your five highest con	mpensated ind	epe	nde	nt cc	ontra	actor	s th	nat received more than \$	3100,000 of comp	ensat	tion fro	m	
the organization. Report compensation for t	he calendar ye	ear e	ndir	ng w	ith c	or wi	thiņ	the organization's tax y	ear.				
(A)								(B)		_	(C		_
Name and business	address						- 1	Description of s	services	C	ompei	nsatio	n

the organization. Report compensation for the calendar year ending with or within	the organization. Report compensation for the calendar year ending with or within the organization's tax year.											
(A)	(B)	(C)										
Name and business address	Description of services	Compensation										
CORE CONSTRUCTION SERVICES OF ILL, INC.	BONE STUDENT CENTER											
1	PROJECT	625,000.										
RUFFALO LEVITZ												
1	CONSULTING	413,989.										
J.A. FRITCH & SONS, INC.	U-HIGH AIR											
1	CONDITIONING PROJECT	154,931.										
2 Total number of independent contractors (including but not limited to those listed	l above) who received more than											

Form 990 ILLINOIS	STATE U	INI	VE	RS	IT	'Y	FΟ	UNDATION	**_**	5713
Part VII   Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd F	ligh	est	Compensated Employe	ees (continued)	
(A)	(B)	<u> </u>			C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	l (cl				app	(V	compensation	compensation	amount of
	per	<u> </u>				Ė	Ť	from	from related	other
	week					yee		the	organizations	compensation
	(list any	rector				omple		organization	(W-2/1099-MISC)	from the
	hours for	or di	ee			ated		(W-2/1099-MISC)		organization
	re <b>l</b> ated organizations	nstee	trust		99	npens				and related organizations
	below	ndividual trustee or director	rtiona	L	mploy	st cor	_			Organizations
	line)	Indivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) LARRY WILLIAMS	0.50									
BOARD MEMBER		x						0.	0.	0.
(28) PAT VICKERMAN	32.00									
EXECUTIVE DIRECTOR				х				274,301.	0.	7,013.
(29) JILL JONES	32.00									-
CHIEF OPERATIONS OFFICER						Х		159,363.	0.	4,952.
(30) BRIAN BEAM	40.00									
EXEC. DIR. OF MARKETING &						Х		126,922.	0.	4,727.
(31) JOY HUTCHCRAFT	40.00									
EXEC. DIR. OF DEVELOPMENT						Х		132,902.	0.	2,364.
(32) MARK WUNDER	40.00									
ASSISTANT VP OF DEVELOPMEN						Х		167,387.	0.	4,062.
(33) ELIZABETH ADAMS	40.00									
SR. DIR. OF DEVELOPMENT						Х		113,384.	0.	2,478.
							-			
							_			
			<u> </u>							
								054 050		05 506
Total to Part VII, Section A, line 1c								974,259.		25,596.

ı a		•••	_				or note to any lin	o in this Dort \/!!!			
			Check if Schedule O	onta	ains a i	response	or note to any lin	e in this Part VIII	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
ري ري	4	_	Federated campaigns			1a					000000000000000000000000000000000000000
Contributions, Gifts, Grants and Other Similar Amounts	•					1b					
جَ جَ			Membership dues Fundraising events			1c	270,340.				
ξğ			Related organizations			1d	270,340.				
호를			Government grants (contri			1e					
Sir			All other contributions, gifts,			ie					
걸칠		١.		-		4.6	21,324,390.				
문항			similar amounts not included			1f	4,266,596.				
<u>5</u> 2		-	Noncash contributions included in I	ines 1	ia-1f	1g \$	4,200,330.	21,594,730.			
Oa		11	Total. Add lines 1a-1f				Business Code	21,334,730.			
	0	_	OTHER EVENTS/DEPT RO	פחסי			900099	81,733.	81,733.		
<u>i</u>	2		OTHER EVENTO, BELL RO	,1 10			300033	01,733.	01,733.		
E Š		b									
E S		C									
ga Be		d									
Program Service Revenue		e	All other program service	Y01/0							
_			Total. Add lines 2a-2f					81,733.			
	3	9	Investment income (include					02,700.			
	Ü		,	_				903,884.		-70,000.	973,884.
	other similar amounts)  4 Income from investment of tax-exempt bond proce					, ,		, .	, -		
	5 Royalties										
	Ü		rioyanios	·····		Real	(ii) Personal				
	6	2	Gross rents	6a	(1)	, , , , , , ,	()				
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss)								
			Gross amount from sales of	<u> </u>	1	ecurities	(ii) Other				
	'	а	assets other than inventory	72	· · ·	94,222.	(ii) Garioi				
		h	Less: cost or other basis	14	,-	,•					
a			and sales expenses	7h	77 6	66 394.					
ᇎ		_	Gain or (loss)	70	3 9	27 828.					
Revenue		q	Net gain or (loss)	10		, ,		3,927,828.			3,927,828.
e F			Gross income from fundraising					-,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ŧ	Ü	<u> </u>	including \$								
~			contributions reported on								
			Part IV, line 18				102,094.				
		b	Less: direct expenses				41,743.				
			Net income or (loss) from				•	60,351.			60,351.
	9		Gross income from gamin		_						
			Part IV, line 19								
		b	Less: direct expenses								
			Net income or (loss) from			· · · · · · · · · · · · · · · · · · ·					
	10		Gross sales of inventory, I	-	-						
			and allowances								
		b	Less: cost of goods sold				î				
_			Net income or (loss) from			-	<u></u>				
							Business Code				
ons	11	а	OTHER ATHLETIC				900099	707,616.	707,616.		
ane and		b	OTHER REVENUE				900099	486,127.	486,127.		
ĕĕ ĕ		С									
Miscellaneous Revenue		d	All other revenue								
_			Total. Add lines 11a-11d				<b>&gt;</b>	1,193,743.			
	12		Total revenue. See instruction	ns				27,762,269.	1,275,476.	-70,000.	4,962,063.

### Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses							
1	Grants and other assistance to domestic organizations		·									
	and domestic governments. See Part IV, line 21	9,277,057.	9,277,057.									
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22	3,378,514.	3,378,514.									
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,											
	trustees, and key emp <b>l</b> oyees											
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)											
7	Other salaries and wages											
8	Pension plan accruals and contributions (include											
	section 401(k) and 403(b) employer contributions)											
9	Other employee benefits											
10	Payroll taxes											
11	Fees for services (nonemployees):											
а	Management											
b	Legal	2,862.		2,862.								
С	Accounting											
d	Lobbying											
е	Professional fundraising services. See Part IV, line 17											
f	Investment management fees											
g	Other. (If line 11g amount exceeds 10% of line 25,											
	column (A) amount, list line 11g expenses on Sch O.)											
12	Advertising and promotion											
13	Office expenses	221,817.		63,011.	158,806.							
14	Information technology											
15	Royalties											
16	Occupancy	83,358.		72,676.	10,682.							
17	Travel	89,570.		814.	88,756.							
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	13,582.		2,793.	10,789.							
20	Interest	81,397.		81,397.								
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	441,729.		441,729.								
23	Insurance	196,360.		196,360.								
24	Other expenses. Itemize expenses not covered											
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)											
	amount, list line 24e expenses on Schedule 0.)											
а	CONTRACTUAL PAYMENTS	458,834.		48,045.	410,789.							
b	INVESTMENT EXPENSES	371,546.		371,546.	_							
С	MISCELLANEOUS	172,783.		96,576.	76,207.							
d	PROMOTIONAL EXPENSES	166,441.		9,397.	157,044.							
е	All other expenses	214,091.		177,902.	36,189.							
25	<b>Total functional expenses.</b> Add lines 1 through 24e	15,169,941.	12,655,571.	1,565,108.	949,262.							
26	<b>Joint costs.</b> Complete this line only if the organization											
	reported in column (B) joint costs from a combined											
	educational campaign and fundraising solicitation.											
	Check here if following SOP 98-2 (ASC 958-720)											

Form 990 (2019)

Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	120,355.	1	107,415.		
	2	Savings and temporary cash investments			8,631,042.	2	10,496,725.
	3	Pledges and grants receivable, net			17,002,650.	3	16,890,517.
	4	Accounts receivable, net			25,465.	4	22,509.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	contributor, or 35%			
		controlled entity or family member of any of these	e pers	ons		5	
	6	Loans and other receivables from other disqualifi	ed per	rsons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ϋ́	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	12,931,001.			
	b	Less: accumulated depreciation	10b	5,771,154.	7,514,926.		7,159,847. 107,571,694.
	11	Investments - publicly traded securities	103,428,284.		107,571,694.		
	12	Investments - other securities. See Part IV, line 1	64,749,413.	12	67,917,425.		
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	5,532,113.	15	5,421,440.		
	16	Total assets. Add lines 1 through 15 (must equa			207,004,248.	16	215,587,572.
	17	Accounts payable and accrued expenses	703,594.	17	272,032.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
≣		trustee, key employee, creator or founder, substa					
Liabilities		controlled entity or family member of any of these			2 449 202	22	2 225 764
_	23	Secured mortgages and notes payable to unrelat			2,448,292.	23	2,335,764.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines of Schedule D		•	844,244.	0.5	876,632.
	26	of Schedule D  Total liabilities. Add lines 17 through 25			3,996,130.		3,484,428.
_	20	Organizations that follow FASB ASC 958, chec	k her	<u> </u>	3,330,130.	20	3,101,120.
S		and complete lines 27, 28, 32, and 33.	JK HEH				
Š	27				19,957,108.	27	20,202,111.
3ala	28				183,051,010.	28	191,901,033.
Þ		Organizations that do not follow FASB ASC 95					
Ξ		and complete lines 29 through 33.	,				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equ				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
et	32	Total net assets or fund balances			203,008,118.	32	212,103,144.
~	33				207,004,248.	33	215,587,572.

Form 990 (2019) ILLINOIS STATE UNIVERSITY FOUNDATION **-**5						
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	27,	762	2,2	<u>69.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,			
3	Revenue less expenses. Subtract line 2 from line 1	3				28.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	203,	008	3,1	<u> 18.</u>
5	Net unrealized gains (losses) on investments	5	-3,	459	9,1	88.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-38	3,1	14.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	212,	10:	3,1	<u>44.</u>
Pa	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	g <b>l</b> e Audi	:			
	Act and OMB Circular A-133?		L	3а		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>

Form **990** (2019)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

# Name of the organization ILLINOIS STATE UNIVERSITY FOUNDATION

Employer identification number \*\*-\*\*5713

Pa	rt I	Reason for Public (	Charity Status (/	All organizations must co	omp <b>l</b> ete th	is part.) Se	e instructions.		
he	organi	zation is not a private found	ation because it is: (F	or lines 1 through 12, c	heck only	one box.)			
1									
2	П	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
	H	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
3	$\vdash$	•						0 1 20 0	
4		A medical research organiza	ation operated in cor	njunction with a nospital	aescribea	in sectio	n 1/U(b)(1)(A)(III). Enter	the nospital's name,	
		city, and state:							
5	X	An organization operated for	or the benefit of a col	lege or university owned	d or operat	ed by a go	vernmental unit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that normal	Ilv receives a substar	ntial part of its support f	rom a gove	ernmental	unit or from the general i	oub <b>l</b> ic described in	
		section 170(b)(1)(A)(vi). (C	•		3		J ,		
8		A community trust describe		1\(\Lambda\(\varphi\) (Complete Par	+ 11 \				
9	H					nd in agnic	unation with a land grant	collogo	
9		An agricultural research org				-	=		
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the	name, city	, and state of the college	or	
		university:							
10		An organization that normal	-					-	
		activities related to its exem	npt functions - subjec	et to certain exceptions,	and (2) no	more than	33 1/3% of its support	from gross investment	
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the organization a	after June 30, 1975.	
		See section 509(a)(2). (Cor	mp <b>l</b> ete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ve <b>l</b> y for the benefit of, to	perform t	he function	ns of, or to carry out the	purposes of one or	
		more publicly supported org	ganizations describe	d in <b>section 509(a)(1)</b> d	r section	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box in	
		lines 12a through 12d that	=						
а		Type I. A supporting orga	= -				=	aivina	
		the supported organization	•	•		•		•	
		organization. You must o	., .		i majority c	in the direc	1010 01 11001000 01 1110 01	apporting	
h		1	•		tion with it	o oupporte	d organization(s), by bay	ina	
b		Type II. A supporting orga	•				• ,,,	•	
		control or management o			ame perso	ns that coi	ntrol or manage the supp	σοπεα	
		organization(s). You mus	•						
С		Type III functionally inte	-					ed with,	
		its supported organization	n(s) (see instructions)	). You must complete l	Part <b>IV</b> , Se	ections A,	D, and E.		
d		Type III non-functionally	<b>integrated.</b> A supp	orting organization oper	ated in co	nnection w	rith its supported organiz	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	uirement and an attentiv	veness .	
		requirement (see instructi	ions). <b>You must con</b>	nplete Part IV, Sections	s A and D,	and Part	V.		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III		
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.			
f	Ente	r the number of supported o	organizations						
a		ride the following information	-	d organization(s).					
Ŭ		) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
				above (see instructions)					
					-				
					-				

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	17061022.	10582299.	18179445.	29858186.	25861325.	101542277	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge	2248812.	2446698.	2457018.	2513254.	2539487.	12205269.	
4	Total. Add lines 1 through 3					28400812.		
	The portion of total contributions							
_	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						7918853.	
6	Public support. Subtract line 5 from line 4.						105828693	
	etion B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total	
		19309834.						
	Gross income from interest.				020722201			
Ü	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	1273347.	1058761.	1524987.	2044966.	973,884.	6875945.	
9	Net income from unrelated business	12/334/•	10307010	1324307	20113001	373,004.	0073343.	
3	activities, whether or not the							
	business is regularly carried on	-84,727.	1,623.		-72,708.	-70 000	-225,812.	
10	Other income. Do not include gain	01,727.	1,023.		72,7001	70,000.	223,012.	
10	or loss from the sale of capital							
	assets (Explain in Part VI.)	1220853.	1104489	1460937	1487279.	1275476.	6549034.	
	Total support. Add lines 7 through 10	1220055.	110440).	1400007	140/2/5		126946713	
12	Gross receipts from related activities,	eta (see instructio	\			12	120540715	
	First five years. If the Form 990 is for			d fourth or fifth to	v voor oo o oootior			
13	organization, check this box and stop		ilist, second, triil	u, iouitii, oi iiitii ta	ix year as a section	1301(0)(3)	ightharpoonup	
Sec	ction C. Computation of Publi	c Support Per	centage					
	Public support percentage for 2019 (I			olumn (fl)		14	83.36 %	
15	Public support percentage from 2018					15	81.11 %	
	33 1/3% support test - 2019. If the o	,	,					
	stop here. The organization qualifies	•					▶ 👽	
b	33 1/3% support test - 2018. If the o		•					
-	and <b>stop here.</b> The organization qual	•				or more, ericent an		
17a	10% -facts-and-circumstances test							
174	and if the organization meets the "fac							
	meets the "facts-and-circumstances"			•		•	<b>.</b> .	
h	10% -facts-and-circumstances test	-			•			
D	more, and if the organization meets the							
	•						, 	
40	organization meets the "facts-and-circ			•				
<u> 18</u>	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

section A. Public Support	below, please com	plete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and	(4) 2010	(5) 2010	(0) 2011	(4) 2010	(0) 2010	(i) rotai
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			•			
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
9 Amounts from line 6					,	,,
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)						
14 First five years. If the Form 990 is f		s first, second, thir	d, fourth. or fifth to	ax year as a sectio	n 501(c)(3) organiza	ation.
check this box and stop here				•	. , . , .	<b>.</b>
Section C. Computation of Pub	lic Support Pe					
15 Public support percentage for 2019	(line 8. column (f).	divided by line 13.	column (fl)		15	%
<b>16</b> Public support percentage from 201	•	•			16	%
Section D. Computation of Inve						
17 Investment income percentage for 2			ine 13. column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2019. If the						
more than 33 1/3%, check this box						<b>~</b> —
b 33 1/3% support tests - 2018. If the	-			•		
line 18 is not more than 33 1/3%, ch	eck this box and <b>s</b>	top here. The orga	anization qua <b>l</b> ifies a	as a publicly suppo	orted organization	
20 Private foundation. If the organizat	ion did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	<b>&gt;</b>

### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
3a		
3b		
3с		
4a		
4b		
-+10		
4c		
5a		
5b		
5c		
6		
7		
8		
8		
9a		
9b		
90		
9c		
10a		
10b		

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

trustees of each of the supported organizations? Provide details in Part VI.

За

Sche	dule A (Form 990 or 990-EZ) 2019 ILLINOIS STATE UNIVERSI	TY FO	OUNDATION	**-***5713 Page 6
Pa				rage v
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (explain in	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must co			,
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
_2_	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
_5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by .035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4 unless subject to			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2019

emergency temporary reduction (see instructions).

instructions).

	dule A (Form 990 or 990-EZ) 2019 ILLINOIS S'I'A'I'.  † V   Type III Non-Functionally Integrated 509(			*-***5713 Page 7
	Type III real rained and image into grantous every	(a)(3) Supporting Orga	inizations (continued)	
	ion D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4_	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
_	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	(:)	(::)	(:::)
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ILLINOIS STATE UNIVERSITY FOUNDATION

**Employer identification number** \*\*-\*\*\*5713

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring
_			Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea		f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru	. ,	
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year ▶	_	
4	Number of states where property subject to conservation eas	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conserva	tion easements during the year
	December 2011 and 201	and the state of a state of 170/	LV(4VDV)
8	Does each conservation easement reported on line 2(d) abov		
_			
9	In Part XIII, describe how the organization reports conservation	·	
	balance sheet, and include, if applicable, the text of the footr	lote to the organization's financial statement	ents that describes the
Pai	organization's accounting for conservation easements.  t III   Organizations Maintaining Collections of	Art. Historical Treasures, or Ot	her Similar Assets
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 95	· · · · · · · · · · · · · · · · · · ·	and balance sheet works
	of art, historical treasures, or other similar assets held for pub		
	service, provide in Part XIII the text of the footnote to its finar		•
h	If the organization elected, as permitted under FASB ASC 95		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(i) Revenue included on Form 990, Part VIII, line 1		🕨 \$
2	If the organization received or held works of art, historical treations		
_	the following amounts required to be reported under FASB A		· · · · · · · · · · · · · · · · · · ·
а	Revenue included on Form 990, Part VIII, line 1	•	> \$
	4 I		<b>S</b>

Pai	rt III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Oth	er Simila	r Assets	(continu	ed)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the t	ollowing that make	significant	use of its			
	collection items (check all that apply):								
а	X Public exhibition	d	l 🔲 Loan or exc	hange program					
b	b Scholarly research e Other								
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's ex	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other simi <b>l</b>	ar assets				
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's co	llection?			Yes	X No	
Pai	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" o	on Form 99	0, Part <b>I</b> V,	ine 9, or		
	reported an amount on Form 990, Par	t X, <b>l</b> ine 21.							
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other assets no	t included				
	on Form 990, Part X?						Yes	X No	
b	If "Yes," explain the arrangement in Part XIII								
							Amount		
С	Beginning balance				1c				
	Additions during the year								
	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo						Yes	☐ No	
b	If "Yes," explain the arrangement in Part XIII.								
Pai	rt V Endowment Funds. Complete i	f the organization an	swered "Yes" on Fo	rm 990, Part IV, line	e 10.				
		(a) Current year	<b>(b)</b> Prior year	(c) Two years back	(d) Three	years back	(e) Four y	ears back	
1a	Beginning of year balance	144,350,035.	128,825,072.	113,043,510	. 97,	062,178.	102,6	58,200.	
b	12 COA 075 11 454 702 0 500 501 0 250 722 2 751 200								
С	767 700 10 247 500 11 405 052 12 011 222 2 204 252								
d	Grants or scholarships 5,372,025. 4,710,531. 4,165,411. 4,064,644. 5,880,941.								
	Other expenditures for facilities								
	and programs	222,056.	266,866.	254,535	.	245,234.	3	301,976.	
f	Administrative expenses	845,241.	1,200,020.	880,106	•	779,746.	8	80,050.	
g	End of year balance	151,372,576.	144,350,035.	128,825,072	. 113,	043,510.	97,0	062,178.	
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a)	) he <b>l</b> d as:					
а	Board designated or quasi-endowment	2.39	%						
b	Permanent endowment ►85.96	%							
С	Term endowment ►11.65	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are he <mark>l</mark> d ar	nd administered for	the organiz	ation			
	by:						\	res No	
	(i) Unrelated organizations						3a(i)	X	
	(ii) Related organizations						3a(ii)	X	
b	If "Yes" on line 3a(ii), are the related organiza						3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Pai	rt VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answere	d "Yes" on Form 990	), Part IV, line 11a. S	ee Form 990, Part	X, <b>l</b> ine 10.				
	Description of property	(a) Cost or o basis (investn	1 , ,	' '	Accumulat depreciation		(d) Book	value	
1a	Land	500		0,000.			1,580	,631.	
	Buildings				,625,6		5,563		
	Leasehold improvements		'				-		
	Equipment		16	0,756.	145,4	75.	15	,281.	
	Other				-				
	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990 Part	X. column (B) line 1	Oc.)		. ▶	7,159	,847.	
	ISSIGITITION OF								

edu <b>l</b> e D (Form 990) 2019	ILLINOIS	STATE	UNIVERSITY	FOUNDATION	**-***5713	Page 3
rt VII Investments	<ul> <li>Other Securities</li> </ul>					

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) REAL ASSETS MARKETABLE			
(B) FUNDS	23,631,586.	END-OF-YEAR MARKET	VALUE
(C) HEDGED AND ALTERNATIVE			
(D) FUNDS	44,285,839.	END-OF-YEAR MARKET	VALUE
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	67,917,425.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"		1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		1d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	15.)	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" (	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	/Is \ D = a la contra
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OBLIGATIONS UNDER SPLIT-IN	NTEKEST		076 622
(3) AGREEMENTS			876,632.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			056 600
Total, (Column (b) must equal Form 990, Part X, col. (B) line	25.)	<b>▶</b>	876,632.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

329,803.

15,169,941.

4c

5

Scho	dule D (Form 990) 2019 ILLINOIS STATE UNI	VERSTTY	FOUND	ATTON	**_	***5713 Page 4
	t XI Reconciliation of Revenue per Audited Finar					
	Complete if the organization answered "Yes" on Form 990			•		
1	Total revenue, gains, and other support per audited financial state				1	26,474,651.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses) on investments		2a	-3,459,188.		
b	Donated services and use of facilities		··· —	2,539,487.		
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)			-38,114.		
е	Add lines 2a through 2d		_		2e	-957,815.
3	Subtract line 2e from line 1				3	27,432,466.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b		4a	371,546.		
b	Other (Describe in Part XIII.)			-41,743.		
С	Add lines 4a and 4b				4c	329,803.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Pa				5	27,762,269.
Pa	t XII Reconciliation of Expenses per Audited Fina	ncial Staten	nents Wit	h Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990	, Part IV, line 12	a			
1	Total expenses and losses per audited financial statements				1	17,379,625.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1			
а	Donated services and use of facilities		2a	2,539,487.		
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII.)		2d			
е	Add lines 2a through 2d				2e	2,539,487
3	Subtract line 2e from line 1				3	14,840,138.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | Part XIII | Supplemental Information.

**b** Other (Describe in Part XIII.)

c Add lines 4a and 4b

Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b

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

#### PART III, LINE 4:

THE ART COLLECTION IS DISPLAYED IN A PROPERTY HELD IN AN ENDOWMENT BY THE FOUNDATION.

#### PART V, LINE 4:

TO SERVE THE EDUCATIONAL PURPOSES OF ILLINOIS STATE UNIVERSITY.

#### PART X, LINE 2:

THE INTERNAL REVENUE SERVICE HAS RECOGNIZED THE FOUNDATION AS EXEMPT FROM INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE FOUNDATION FOLLOWS THE ACCOUNTING GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE FOUNDATION IS SUBJECT TO FEDERAL AND

# SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

Inspection

Name of the organization

**Employer identification number** 

$\mathbf{I}\mathbf{\Gamma}_{\cdot}$	LINOIS STATE	UNIVERST	ry Found	ATION		**-***573	L3
	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ		
	Form 990, Part I\			·			
1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gra	nts and other a	assistance,	
	the grantees' eligibility fo	or the grants or a	assistance, and t	the selection criteria used to award the	grants or assis	tance?	Yes X No
2	For grantmakers. Desc United States.	ribe in Part V the	organization's <sub>l</sub>	procedures for monitoring the use of its	grants and oth	ner assistance outs	side the
3				an be duplicated if additional space is n			
	<b>(a)</b> Region	(b) Number of offices in the region	employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, specific type (s) in the region	(f) Total expenditures for and investments in the region
CEN	TRAL AMERICA AND						
THE	CARRIBEAN	0	0	INVESTMENTS			18,241,775.
							1.0
	Subtotal	0	0				18,241,775.
b	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a	,					<u> </u>
_	and 3b)	0	0				18,241,775.

and 3b)

Schedule	Schedule F (Form 990) 2019	ILLINOIS STA	STATE	ATE UNIVERSITY FOUNDATION	FOUNDA	ATION **-**5713	ı
Part II	Part II Grants and Other Assistance to Organizations or	nce to Organizati	ons or Enti	ties Outside the Unit	ed States.	r Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any	
	recipient who received more than \$5,000. Part II car	re than \$5,000. Pa	rt II can be	can be duplicated if additional space is needed.	I space is ne	eeded,	

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2019
(h) Description of noncash assistance						Sched
(g) Amount of noncash assistance					empt	•
(f) Manner of cash disbursement					ecognized as tax-ex	
(e) Amount of cash grant					oreign country, r	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
(c) Region					is listed above that are re	r entities
(b) IRS code section and EIN (if applicable)					recipient organization th the grantee or cour	other organizations or
1 (a) Name of organization						3 Enter total number of other organizations or entities

\*\*-\*\*5713

Page 3

Schedule F (Form 990) 2019 ILLINOIS STATE UNIVERSITY FOUNDATION \*\*-\*\*5713

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

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2019
(g) Description of noncash assistance						Schedule
(f) Amount of noncash assistance	0.					
(e) Manner of cash disbursement	TRANSFER TO UNIVERSITY ACCOUNT					
(d) Amount of cash grant	263,910.					
(c) Number of recipients	236					
(b) Region	VARIOUS					
(a) Type of grant or assistance (b) Region	SCHOLARSHIPS					

Page 4

Part IV	Foreign	<b>Forms</b>

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2019

932075 10-12-19 Schedule F (Form 990) 2019

#### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

\*\*-\*\*\*5713

Name of the organization

Employer identification number

ILLINOI	S STATE UNIVERSITY	FOU	JND	ATION	**_***!	5713
	Complete if the organization answe				ine 17. Form 990-E	Z filers are not
<ul> <li>1 Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, Patron b If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the</li> </ul>	ed funds through any of the following and solicitate and solicitate and solicitate are villed are villed and solicitate are villed and solicitate are villed and solicitate ar	tion of tion of fundra (incluc rofessi	non-g gover lising ling of ona <b>l</b> fu	overnment grants nment grants events ficers, directors, trus undraising services?	Ye	<del></del>
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody tro <b>l</b> of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
otal			<b>•</b>			
3 List all states in which the organizatio or licensing.				or has been notified	it is exempt from r	egistration

Revenue			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
es.	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct F	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	
а	ls t	ter the state(s) in which the organization condu- the organization licensed to conduct gaming ac No," explain:	tivities in each of these s	states?		Yes No
	_					
		ere any of the organization's gaming licenses re Yes," explain:		•		Yes No
	_					
93208	2 09	9-11-19			Schedule G (Fo	rm 990 or 990-EZ) 2019
					•	•

Sch	edule G (Form 990 or 990-EZ) 2019 ILLINOIS STATE UNIVERSITY FOUNDATION **-*	<u>**57</u>	13 Page 3
	Does the organization conduct gaming activities with nonmembers?	Y	es No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	•	_
	to administer charitable gaming?		es No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
		13b	
	An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events books and records:	LISD	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. — Y	es No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation  \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Y	es No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year ▶ \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III, lines	s 9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule (	990 or 990-E7)	TLLINOTS	STATE	UNTVERSTTY	FOUNDATION	**-***5713	Page 4
Part IV	G (Form 990 or 990-EZ)  Supplemental Infor	mation (continue	ed)	<del></del>		<u> </u>	r ago r
		(OOMENTA C	, u,				

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

► Attach to Form 990.

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

2019	Open to Public Inspection
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**≗** 

**Employer identification number** \*\*-\*\*5713 X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ILLINOIS STATE UNIVERSITY FOUNDATION General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part I

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II	Grants and Other Assistance to Domestic Organizations and	Jomestic Organiz	ations and Domestic	Governments. C	omplete if the orga	anization answered "Y	Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	IV, line 21, for any
	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000. Part II can I	be duplicated if additic	onal space is neede	ed.			
1 (a) h	<b>1 (a)</b> Name and address of organization or government	( <b>a)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
ILLINOIS S' CAMPUS BOX NORMAL, IL	ILLINOIS STATE UNIVERSITY CAMPUS BOX NORMAL, IL 61761	**-**4070		5,679,854.	3,597,203.	PRICE LISTS, ESTIMATED FMV	ART, EQUIPMENT	TO SUPPORT THE UNIVERSITY, INSTRUCTION, RESEARCH, AND PUBLIC SERVICE ACTIVITIES
2 Ente	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	nd government org	lanizations listed in the	line 1 table				
1_	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ons for Form 990.					Schedule I (Form 990) (2019)

\*\*-\*\*5713

Schedule I (Form 990) (2019) ILLINOIS STATE UNIVERSITY FOUNDATION

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
TUDENT SCHOLARSHIPS	2346	3,378,514.	.0		
Part IV   Supplemental Information. Provide the information required in	uired in Part I, line	e 2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	ditional information.	
PART I, LINE 2:					
BRANT FUNDS ARE DISBURSED AND MONITORED	TORED BASED	NO	REQUESTS FROM	AUTHORIZED	
'ISCAL AGENTS. FUNDS MUST PROVIDE D	DIRECT BE	BENEFIT TO I	ILLINOIS ST	STATE	
JNIVERSITY AND BE SUPPORTED BY APPROPR	ROPRIATE	DOCUMENTAT	IATE DOCUMENTATION. ILLINOIS	OIS STATE	
JNIVERSITY FISCAL AGENTS REQUEST DI	DISBURSEMENT	NT OF FUNDS	S FOR SCHOLARSHIPS	LARSHIPS	
AWARDED IN ACCORDANCE WITH SPECIFIC	C CRITERIA	OF THE	SCHOLARSHIP MAY	MAY INCLUDE	
IDUCATIONAL ACHIEVEMENT, FINANCIAL	NEED, AND	OTHER	FACTORS. FOU	FOUNDATION	
PERSONNEL REVIEW REQUESTS TO DETERMINE	H	GUIDELINES	ARE MET.		

### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

ILLINOIS STATE UNIVERSITY FOUNDATION

Employer identification number \*\*-\*\*5713

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  X Health or social club dues or initiation fees			
	X Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		Х
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
4	organization or a related organization:			
2		4a		Х
h	Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The root to any of lines ha of list are personne and approxime an outro for such items in a different and in			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		L

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

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	- other deferred compensation		(B)(i)·(D)	in column (B) reported as deferred on prior Form 990
(1) PAT VICKERMAN	Ξ	274,301.	0	0.	0	7,013.	281,314.	0.
EXECUTIVE DIRECTOR	(ii)		• 0	• 0		• 0	• 0	0.
(2) JILL JONES	(i)	159,36	• 0	• 0		4,952.	164,315.	0.
CHIEF OPERATIONS OFFICER	(ii)	• 0	• 0	• 0	• 0	• 0	• 0	• 0
(3) MARK WUNDER	(i)	167,38	* 0	• 0	• 0	4,062.	171,449.	0
ASSISTANT VP OF DEVELOPMEN	(ii)	0	• 0	• 0	• 0	0.	• 0	0
	(i)							
	(ii)							
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	(ii)							
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#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

ILLINOIS STATE UNIVERSITY FOUNDATION

Employer identification number \*\*-\*\*\*5713

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermini		s
1	Art - Works of art	X	5	387.451.	APPRAISAL			
2	Art - Historical treasures			307,1321				
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	63	664 059.	MARKET QUOT	ΔΨΤΟ	)N	
10	Securities - Closely held stock	- 22	- 3	001,033.	IMMINIMI QUOI		<u>/11</u>	
11	Securities - Oldsely field stock Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential					-		
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ( <u>EQUIPMENT</u> )	X	4		ESTIMATED F.	AIR	VAI	JUE
26	Other (GRAIN)	X	5	5,334.	SALES PRICE	1		
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	_	<del>-</del>					
	for which the organization completed Form 828	3, Part <b>I</b> V, [	Donee Acknow <b>l</b> edg	gement 29		— т		
						$\longrightarrow$	Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date			· · · · · · · · · · · · · · · · · · ·				
	exempt purposes for the entire holding period?					30a		Х
	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance po	-	•	•	ions?	31	Х	
32a	Does the organization hire or use third parties o		=	·			, l	
_	contributions?					32a	X	
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co describe in Part II.	olumn (c) for	r a type of property	tor which column (a) is ched	;Kea,			

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

Schedule M (Form 990) 2019

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#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

# Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

ILLINOIS STATE UNIVERSITY FOUNDATION

**Employer identification number** \*\*-\*\*\*5713

FORM 990, PART VI, SECTION B, LINE 11B:

THE FOUNDATION'S AUDIT AND FINANCE COMMITTEES REVIEW THE FORM 990 BEFORE IT IS FILED, AND THOSE COMMITTEES REPORT THEIR FINDINGS TO THE BOARD OF DIRECTORS AT ITS NEXT SCHEDULED MEETING.

PART VI, SECTION B, LINE 12C: FORM 990,

THE BOARD POLICY STATES THAT EACH DIRECTOR, PRINCIPAL OFFICER, OR COMMITTEE MEMBER OF THE BOARD WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST WITH THE FOUNDATION MUST DISCLOSE THE EXISTENCE OF SUCH INTEREST TO THE BOARD OF DIRECTORS, WHICH SHALL DECIDE IF A CONFLICT OF INTEREST ACTUALLY EXISTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE SALARY OF A KEY EMPLOYEE OF THE ORGANIZATION IS DETERMINED ANNUALLY BY THE PRESIDENT OF ILLINOIS STATE UNIVERSITY WHO MAY CONSIDER SUCH FACTORS AS TIME IN THE POSITION, PERFORMANCE, AND SALARIES OF COMPARABLE POSITIONS WITHIN THE UNIVERSITY AND AT COMPARABLE UNIVERSITIES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

IL, AZ, CA, CT, DC, FL, LA, ME, MD, MA, MI, MN, NJ, OH, OR, SC, UT, WA

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION MAKES ITS AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE PUBLIC.

FORM 990. PART XI, LINE 9, CHANGES IN NET ASSETS:

# SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

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

Employer identification number \*\*-\*\*5713

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I

ILLINOIS STATE UNIVERSITY FOUNDATION

Direct controlling 4,539,210. ISU FOUNDATION 600,631, ISU FOUNDATION End-of-year assets **e** 。 。 Total income € Legal domicile (state or foreign country) ILLINOIS ILLINOIS REAL ESTATE INVESTMENT REAL ESTATE INVESTMENT Primary activity LLC (USES FOUNDATION EIN) LAUNCHING FUTURES II, LLC (USES FOUNDATION Name, address, and EIN (if applicable) EIN), CAMPUS BOX 8000, NORMAL, IL of disregarded entity NORMAL, IL 61790-8000 LAUNCHING FUTURES, CAMPUS BOX 8000 61790-8000

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II

	10,40	(cı )(n)		No						
	(9)	controlle	entity?	Yes						
	( <del>t</del> )	Direct controlling	entity							
	(e)	Public charity	status (if section	501(c)(3))						
	(p)	ę	section							
	(0)	Legal domicile (state or	foreign country)							
	(q)	Primary activity								
6	(a)	Name, address, and EIN	of related organization							

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

FOUNDATION STATE UNIVERSITY

Page 2

\*\*-\*\*5713

ILLINOIS Schedule R (Form 990) 2019

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

( <del>K</del>	General or Percentage managing ownership partner?									
9	eneral or anaging artner?	Yes No								
<b>(E)</b>	E ŏ	K-1 (Form 1065)								
æ	Disproportionate allocations?	Yes No								
(b)	Share of end-of-year									
	Share of total income									
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)								
(p)	Direct controlling entity									
(c)	Legal domicile (state or	toreign country)								
(Q)	Primary activity									
(a)	Name, address, and EIN of related organization									

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

1			ı	l		ı		ı		l			
	Ξ	Section 512(b)(13) controlled entity?	ક										
	ć	512 69.	Yes										
	(F)	Percentage ownership											
	(6)	Share of end-of-year	dssets										
	€	2											
	(e)	Type of entity (C corp, S corp,	or trust)										
	(p)	Direct controlling Type of entity S entity (C corp, S corp.)											
	(၁)	Legal domicile (state or foreign	country)										
	(q)	Primary activity											
	(a)	Name, address, and EIN of related organization											

Schedule R (Form 990) 2019

Page 3 \*\*-\*\*\*5713

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

				╙
yte: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedu	3	:	<u> </u>	Yes No
During the tax year, and the organization engage in any of the following	s with one or more re	transactions with one of more related organizations listed in Parts II-1V?	In Parts II-1V?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			<b>1</b> a
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b> p
(S)				10
				7
				2 ,
e Loans or loan guarantees by related organization(s)				Э
f Dividends from related organization(s)				#
<b>g</b> Sale of assets to related organization(s)				1g
Purchase of assets from related organization(s)				<b>1</b>
				÷
Evoluting of account of the control of the control of the collection (a)				-
J Lease of racilities, equipment, or other assets to related organization(s)				=
and the second continues of th				÷
R rease of Idellines, equipment, of other assets not related organization(s)				¥
<ul> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> </ul>	nization(s)			=
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1m
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			<b>1</b>
o Sharing of paid employees with related organization(s)				10
				2
Boimbureament poid to related presuitation(e) for expanses				5
				2 ,
<b>q</b> Heimbursement paid by related organization(s) for expenses				19
r Other transfer of cash or property to related organization(s)				4
s Other transfer of cash or property from related organization(s)				1s
2 If the answer to any of the above is "Yes," see the instructions for information on wh	ho must complete th	is line, including covered r	mation on who must complete this line, including covered relationships and transaction thresholds.	
<b>(a)</b> Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	olved
	type (a-s)			
<del>()</del>				
(5)				
(3)				
(4)				
(5)				
(9)				
932163 09-10-19			Schedule	Schedule R (Form 990) 2019

Page 4

Part VI

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	1	1	1	1	ı		1		_
Code V-UBI General or Percentage amount in box 20 managing of Schedule K-1 partner? Pess Non (Form 1065)									Schedule R (Form 990) 2019
or Perc									ш 99(
(j) General or managing partner? Yes No									3 (For
BI G 0X 20 " K-1 1									dule F
(i) de V-Ul nt in bo nedule m 106									Sche
Coc amour of Sch (For									
Disproportionate allocations?									
Dist in the thick the thic									
of /ear ts									
(g) Share of end-of-year assets									
Ð									
(f) Share of total income									
Sh. t									
Sec									
(e) Are all 501(c)(3) 0.052.7  Yes No									
(d) Predominant income prelated, unrelated, excluded from tax undersections 512-514)									
(d) nant inc , unrelat rom tax s 512-5									
domin dated, ded fro									
Pre (re exclu se									
nicile reign y)									
(c) Legal domicile (state or foreign country)									
Lega (state c									
(b) Primary activity									
(b) nary a									
Prin									
Z H									
s, anc ity									
(a) Name, address, and EIN of entity									
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# TAX RETURN FILING INSTRUCTIONS

ILLINOIS FORM AG990-IL

#### FOR THE YEAR ENDING

June 30, 2020

#### **Prepared For:**

Mr. Pat Vickerman Illinois State University Foundation 1101 N. Main St., Campus Box 8000 Normal, IL 61790-8000

#### Prepared By:

Kerber, Eck & Braeckel LLP 3200 Robbins Road, Ste 200A Springfield, IL 62704

#### Amount of Tax:

Balance due of \$15

### Make Check Payable To:

Illinois Charity Bureau Fund

#### Mail Tax Return To:

Office of the Attorney General Charitable Trust Bureau 100 West Randolph St., 11th Floor Chicago, IL 60601-3175

### Return Must Be Mailed On Or Before:

March 1, 2021

#### **Special Instructions:**

The report should be signed and dated by an authorized individual(s).

For Off	ice Use Only ILLINOIS CHARITABLE ORGANIZATION ANNUAL	REPORT		Form AG990-II
PMT		_		Revised 1/19
	Charitable Trust Bureau, 100 West Randol 11th Floor, Chicago, Illinois 60601	ph (		1-005956
		Г		all items attached:
AMT	· · · · · · · · · · · · · · · · · · ·	7		of IRS Return ed Financial Statements
		Make Checks L Payable to		of Form IFC
INIT		the Illinois		O Annual Report Filing Fee
		Charity Bureau Fund		00 Late Report Filing Fee
Feder	al ID# **-***5713 MO DAY YR			MO DAY YR
Are co		ganization was cr	eated:	05/07/1948
	LEGAL NAME ILLINOIS STATE UNIVERSITY FOUNDATION	Year-end amounts		
	MAIL	A) ASSETS	Δ) \$	215,587,572.
Ar	DDRESS 101 ALUMNI CENTER, CAMPUS BOX 8000	B) LIABILITIES	B) \$	3,484,428.
1	STATE NORMAL, IL	C) NET ASSETS		212,103,144.
Z	P CODE 61790-8000			
I.	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE		AMOUNT
	D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	78.329		21,778,557.
	E) GOVERNMENT GRANTS & MEMBERSHIP DUES F) OTHER REVENUES	21.671	% E) \$ % F) \$	6,025,455.
	F) OTHER REVENUES	21.071	70 17 Ψ	0,023,433.
	G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100	% G) \$	27,804,012.
II.	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:			
	H) OPERATING CHARITABLE PROGRAM EXPENSE	0.274	% H) \$	41,743.
			.	
	I) EDUCATION PROGRAM SERVICE EXPENSE		% I) \$	
	J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	0.274	% J) \$	41,743.
	· · · · · · · · · · · · · · · · · · ·		7. J. J. T.	•
	J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J):	T		
	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	83.196		12,655,571.
	K) GRANTS TO OTHER GRANTABLE ORGANIZATIONS	03.170	70 K) Ф	12,055,571.
	L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	83.471	% L)\$	12,697,314.
	M) MANAGEMENT AND GENERAL EXPENSE	10.289	% M)\$	1,565,108.
	N) FUNDRAISING EXPENSE	6.240	% N) \$	949,262.
	II) I ONDITAIONA EN ENGE	0,570	70 Ν, φ	J 15 / 2 0 2 0
	0) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100	<u>% 0)\$</u>	15,211,684.
III.	SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:			
	(Attach Attorney General Report of Individual Fundraising Campaign-Form IFC. One for each PFR.)			
	PROFESSIONAL FUNDRAISERS: P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100	% P)\$	0.
	1) TOTAL ANNOUNT INNOCED BY TAIL THOI EGGIOWAL TONDIVIOLITO	100	/0   1 / Ψ	
	Q) TOTAL FUNDRAISERS FEES AND EXPENSES		% Q) \$	
	R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)		% R) \$	
	PROFESSIONAL FUNDRAISING CONSULTANTS:		S) \$	0.
IV.	S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS  COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR	AR:	σ, ψ	
	T) NAME, TITLE:		T) \$	
	U) NAME, TITLE:		U) \$	
	V) NAME, TITLE:		V) \$	
٧.	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED CODE CATEGORIES	D)	List	on back side of instructions
22-20	W) DESCRIPTION: COLLEGES & UNIVERSITY		W)#	003
998091 04-22-20	x) DESCRIPTION: SCHOLARSHIPS		X) #	200
9980	Y) DESCRIPTION:		Y) #	

IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO
		Į		
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		X
2.	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY	ļ		
	COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?	2.		X
_				
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS,			
	DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS,			
	DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE	ļ		
	ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		X
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE			77
	THAN 10% OF THE OUTSTANDING SHARES?	4.		X
_	TO ANY PROPERTY OF THE ORGANIZATION HELD IN THE MANE OF OR COMMUNICIES HAVE THE PROPERTY OF ANY OTHER PERCON			
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON	_		37
	OR ORGANIZATION?	5.		X
	DID THE ODGANIZATION HOE THE OFDWOLG OF A DROFFGOIONAL FUNDRAIGED (ATTACH FORM IFO)	١		Х
b <b>.</b>	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.		^
70	DID THE ODCAMIZATION ALL OCATE THE COST OF ANY COLICITATION, MAILING, ADVEDTICEMENT OD LITEDATURE COSTS			
/a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS	7.		Х
	BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	′-		Λ
7h	IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$; (ii) THE AMOUNT			
70.	ALLOCATED TO PROGRAM SERVICES \$; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND			
	GENERAL \$; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$			
	, AND (IV) THE AMOUNT ALLOCATED TO TONDITAIOING \$\psi			
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8.		Х
		Ī		
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR			
	REVOKED BY ANY GOVERNMENTAL AGENCY?	9.		Х
10.	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION,	Į		
	COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.		X
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS			
	THREE LARGEST ACCOUNTS:			
	CUA CE DANTE DI COMINGUONI II			
	CHASE BANK, BLOOMINGTON, IL			
	COMMERCE TRUST COMPANY, BLOOMINGTON, IL			
	Committee Troot Continuty Bucontinutory 12			
	THE COMMON FUND, WILTON, CT			
	DAM INTOXIDADA			
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: PAT VICKERMAN - 309-438-3135			
ΔΙΙ	ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS			

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS, AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

#### BE SURE TO INCLUDE ALL FEES DUE:

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- 2.) FOR FEES DUE SEE INSTRUCTIONS.
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

### PAT VICKERMAN

PRESIDENT or TRUSTEE (PRINT NAME) **SIGNATURE** DATE TREASURER or TRUSTEE (PRINT NAME) **SIGNATURE** DATE

### JOSH C. CLARK

# EXTENDED TO MAY 17, 2021

(Rev. January 2020) Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax** 

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

Open to Public Inspection

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

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

A I	For the	$\pm$ 2019 calendar year, or tax year beginning $$ JUL $$ $$ 1 $$ , $$ $$ $$ $$ 2 $$ 0 $$ 1 $$ $$ and endi	ling J	<u>UN 30, 2020</u>						
В	Check if applicabl	C Name of organization		D Employer identifi	cation number					
	Addre chang	ILLINOIS STATE UNIVERSITY FOUNDATION								
	Name chang	Doing business as		**-***5713						
	Initial return Final return	101 ALIMNT CENTER CAMBIG BOY 8000	m/suite	te E Telephone number (309) 438-8901						
	termin ated			G Gross receipts \$	105,470,406.					
	Ameno return			H(a) Is this a group return						
	Applic tion	Finame and address of principal officer: FAI VICKERMAN		for subordinates						
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No					
		empt status: $\mathbf{X}$ 501(c)(3) $\mathbf{S}$ 501(c) ( ) $\mathbf{A}$ (insert no.) $\mathbf{S}$ 4947(a)(1) or $\mathbf{S}$	527	If "No," attach a	list. (see instructions)					
		e: > WWW.ADVANCEMENT.ILLINOISSTATE.EDU/ISU-FO	UND	H(c) Group exemption	on number					
			<b>L</b> Year	of formation: 1948 r	<b>M</b> State of legal domicile: <b>IL</b>					
Pa		Summary								
o)	1	Briefly describe the organization's mission or most significant activities: TO HOLI								
Governance		THE PRIMARY OBJECTIVE OF SERVING THE EDUCAT								
š	2	Check this box 🕨 🔛 if the organization discontinued its operations or disposed of	of more	ı						
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)			27					
		Number of independent voting members of the governing body (Part VI, line 1b)			27					
ies	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			0					
Activities &	6	Total number of volunteers (estimate if necessary)								
Ac	/ a	Total unrelated business revenue from Part VIII, column (C), line 12								
_	D	Net unrelated business taxable income from Form 990-T, line 39	·····							
		Contributions and grants (Port VIII line 1b)		Prior Year 28,582,144.	Current Year 21,594,730.					
Ē	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		94,102.	81,733.					
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,319,613.						
Be	11	Other revenue (Part VIII, column (A), lines 5, 4, and 7d)  Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,237,502.	1,254,094.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		33,233,361.						
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		9,270,335.	12,655,571.					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
ú	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
per	. ь	Total fundraising expenses (Part IX, column (D), line 25)  949,262	•							
ы	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	🗀	2,361,641.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,631,976.						
	19	Revenue less expenses. Subtract line 18 from line 12		21,601,385.	12,592,328.					
Net Assets or	9			ginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)	2	07,004,248.	215,587,572.					
t As	21	Total liabilities (Part X, line 26)		3,996,130.						
		Net assets or fund balances. Subtract line 21 from line 20	2	03,008,118.	212,103,144.					
	art II	Signature Block								
	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is					
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	oreparer	nas any knowledge.						
O:		Signature of officer		I Date						
Sig		PAT VICKERMAN, EXECUTIVE DIRECTOR		Date						
Her	е	Type or print name and title								
_		Print/Type preparer's name  Preparer's signature		Date Check [	PTIN					
Paid	i	JOSH C. CLARK  JOSH C. CLARK	1/29/21 if self-employ	, <u> </u>						
	- parer	Firm's name KERBER, ECK & BRAECKEL LLP		Firm's EIN ▶	**-***2985					
	Only	Firm's address 3200 ROBBINS ROAD, STE 200A								
		SPRINGFIELD, IL 62704		Phone no. 21	7-789-0960					
Ma'	v the <b>I</b> F	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No					

Page 2

Га	Objects if Oak adds Oak adds Oak adds of the Control of the Contro
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO HOLD AND ADMINISTER GIFTS WITH THE PRIMARY OBJECTIVE OF SERVING THE
	EDUCATIONAL PURPOSES OF ILLINOIS STATE UNIVERSITY.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$12,655,571. including grants of \$12,655,571. ) (Revenue \$1,275,476. )
	ASSIST IN DEVELOPING AND INCREASING EDUCATION OPPORTUNITIES AND THE
	FACILITIES OF THE UNIVERSITY FOR SERVICE TO ITS STUDENTS, ALUMNI, AND
	CITIZENS OF THE STATE AND NATION BY ENCOURAGING GIFTS OF MONEY AND
	PROPERTY; ACT AS TRUSTEE OF EDUCATIONAL OR CHARITABLE TRUSTS;
	ADMINISTER GIFTS, GRANTS, OR LOANS OF MONEY OR PROPERTY.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	, (
<b>1</b> ~1	Other program convices (Describe on Schodule O.)
4d	Other program services (Describe on Schedule O.)
10	(Expenses \$\frac{\text{including grants of \$}}{12,655,571.}\frac{\text{Revenue \$}}{\text{Revenue \$}}
<u>4e</u>	Total program service expenses 12,655,571.

# Form 990 (2019) ILLINOIS STATE UNIVERSITY FOUNDATION Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
• •	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	, ,	44-	х	
	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	441	Х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
		19		х
20a	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	·	20a 20b		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	_ 4\_	

#### ILLINOIS STATE UNIVERSITY FOUNDATION Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III ....... Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV ..... c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I ..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes, " complete Schedule R, Part II, III, or IV, and 34 **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V

					Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	85					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0					
С	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?			1c	X			

1019) ILLINOIS STATE UNIVERSITY FOUNDATION

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No							
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b									
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X								
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X							
b	If "Yes," enter the name of the foreign country										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X							
b	, , , , , , , , , , , , , , , , , , , ,										
С	, , , , , , , , , , , , , , , , , , , ,										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		37							
	any contributions that were not tax deductible as charitable contributions?	6a		X							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts										
_	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).	_	v								
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7-		Х							
٨	I - I	7c		-23							
d e		7e		Х							
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X							
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?										
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?										
	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the										
	sponsoring organization have excess business holdings at any time during the year?	8									
9											
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12										
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b										
11	Section 501(c)(12) organizations. Enter:										
а	Gross income from members or shareholders										
b	Gross income from other sources (Do not net amounts due or paid to other sources against										
	amounts due or received from them.)										
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
а	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note: See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans 13b										
	Enter the amount of reserves on hand	14a		Х							
14a Did the organization receive any payments for indoor tanning services during the tax year?											
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		х							
	excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.	15		- 23							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х							
	If "Yes," complete Form 4720. Schedule O.	.0									
	ii 199, sampiata i ann 1129, contoado oi										

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 27			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This decitor is requests information assure policies not required by the internal nevertice dode.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶IL, AZ, CA, CT, DC, FL, LA, ME, MD	MA.	MI.	MN
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s			
	for public inspection. Indicate how you made these available. Check all that apply.		a, and	
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
.5	statements available to the public during the tax year.	·····airc		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_5	PAT VICKERMAN - 309-438-3135			
	101 ALUMNI CENTER, 1101 N. MAIN ST., CAMPUS BOX 8000, NORMAL, IL	6:	179	0 –

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

<b>(A)</b> Name and tit <b>l</b> e	(B) Average hours per week	box	not cl	Pos heck i ss per	more rson i	than o s both r/trus	an an	( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERIC E BURWELL	0.50									
CHAIRPERSON		X		Х				0.	0.	0.
(2) KENNETH GLOVER, SR.	0.50									
VICE CHAIRPERSON		X		Х				0.	0.	0 .
(3) JAMES A. KNECHT	0.50								_	_
SECRETARY		X		Х				0.	0.	0 .
(4) DAVID WAMPLER	0.50	ļ								_
TREASURER		X		Х				0.	0.	0,
(5) ANN BAUGHAN	0.50	۱								•
BOARD MEMBER	0.50	X						0.	0.	0 .
(6) GREG AYERS	0.50	٠,,							•	
BOARD MEMBER	0.50	X						0.	0.	0.
(7) CARLA BARNES	0.50	٠,,							0	_
BOARD MEMBER	0.50	X						0.	0.	0
(8) DAVID L. BROWN BOARD MEMBER	0.50	X						0.	0.	0 .
(9) STEVEN DENAULT	0.50	^						0.	0.	0
BOARD MEMBER	0.30	X						0.	0.	0 .
(10) MARC BULANDR	0.50	^						0.	0.	0 .
BOARD MEMBER	0.30	x						0.	0.	0 .
(11) SHARI BUCKELLEW	0.50	1						•	•	
BOARD MEMBER		x						0.	0.	0.
(12) TRISH ROARK	0.50	† <del></del>								
BOARD MEMBER		x						0.	0.	0.
(13) BILL ENGLAND	0.50							-	-	
BOARD MEMBER		x						0.	0.	0.
(14) GARY GEMBERLING	0.50									
BOARD MEMBER		x					L	0.	0.	0.
(15) BENJAMIN HART	0.50									
BOARD MEMBER		X						0.	0.	0 .
(16) COLLEEN KANNADAY	0.50									
BOARD MEMBER		X						0.	0.	0 .
(17) DAN KELLEY	0.50	1								
BOARD MEMBER		X						0.	0.	0

Form **990** (2019)

Part VII Section A. Officers, Directors, Trust	tees. Kev Emr	olov	ees.	and	Hic	ahes	t C	ompensated Employee	S (continued)				
(A)	(A) (B)							(D)	(E)			(F)	
Name and title	Average		<b>(C)</b> Position			)		Reportable	Reportab <b>l</b> e		Fe	timate	ad he
Name and the	hours per		(do not check more than one box, unless person is both an					compensation				nount	
	week		officer and a director/trustee)					from	from related			other	0.
	(list any	ctor						the	organization			pensa	tion
	hours for	r dire				ted		organization	(W-2/1099-MIS	SC)	fr	om th	е
	related	stee o	nstee			ensa		(W-2/1099-MISC)			org	anizat	ion
	organizations	al trus	nal tr		loyee	comp						d relat	
	below line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
(18) JOSEPH LOSS	0.50	E E		JJ0	Ke	E E	For						
BOARD MEMBER	0.50	х						0.		0.			0.
(19) JAMES MOUNIER	0.50	Δ						0.		•			<u> </u>
BOARD MEMBER	0.30	х						0.		0.			0.
(20) JACK NORTH	0.50							0.		•			<del>••</del>
BOARD MEMBER	0.50	х						0.		0.			0.
(21) THOMAS REEDY	0.50												
BOARD MEMBER		х						0.		0.			0.
(22) JOHN RIGAS	0.50												
BOARD MEMBER		X						0.		0.			0.
(23) ROBERT RUSH, JR.	0.50												
BOARD MEMBER		X						0.		0.			0.
(24) CARL SNEED	0.50												_
BOARD MEMBER	2 - 2	X						0.		0.			0.
(25) DEREK VOGLER	0.50												_
BOARD MEMBER		X						0.		0.			0.
(26) MARY ANN WEBB	0.50									_			
BOARD MEMBER		X						0.		0.			0.
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Part VII								974,259.		0.		5,5	
d Total (add lines 1b and 1c)							<u> </u>	974,259.		0.	2.	5,5	96.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	)			c
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director tructs	aa l		mnl	01/0		bia	haat aamnanaatad amn	lovos on	1		162	NO
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for st	*	,	•	•	•	,	·		•		3		X
4 For any individual listed on line 1a, is the su								per compensation from t			3		71
and related organizations greater than \$150								•	-		4	Х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	•				•			•			5	Х	
Section B. Independent Contractors													
1 Complete this table for your five highest con	mpensated ind	epe	nde	nt cc	ontra	actor	s th	nat received more than \$	3100,000 of comp	ensat	tion fro	m	
the organization. Report compensation for t	he calendar ye	ear e	ndir	ng w	ith c	or wi	thiņ	the organization's tax y	ear.				
(A)								(B)		_	(C		_
Name and business	address						- 1	Description of s	services	C	ompei	nsatio	n

the organization. Report compensation for the calendar year ending with or within the organization stax year.											
(A)	(B)	(C)									
Name and business address	Description of services	Compensation									
CORE CONSTRUCTION SERVICES OF ILL, INC.	BONE STUDENT CENTER										
1	PROJECT	625,000.									
RUFFALO LEVITZ											
1	CONSULTING	413,989.									
J.A. FRITCH & SONS, INC.	U-HIGH AIR										
1	CONDITIONING PROJECT	154,931.									
2 Total number of independent contractors (including but not limited to those listed	l above) who received more than										

Form 990 ILLINOIS	STATE U	INI	VE	RS	IT	'Y	FΟ	UNDATION	**_**	5713
Part VII   Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd F	ligh	est	Compensated Employe	ees (continued)	
(A)	(B)	<u> </u>			C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	(check all that apply)					(V	compensation	compensation	amount of
	per	<u> </u>				Ė	Ť	from	from related	other
	week					yee		the	organizations	compensation
	(list any	rector				omple		organization	(W-2/1099-MISC)	from the
	hours for	or di	ee			ated		(W-2/1099-MISC)		organization
	re <b>l</b> ated organizations	nstee	trust		99	npens				and related organizations
	below	ndividual trustee or director	rtiona	L	mploy	st cor	_			Organizations
	line)	Indivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) LARRY WILLIAMS	0.50									
BOARD MEMBER		x						0.	0.	0.
(28) PAT VICKERMAN	32.00									
EXECUTIVE DIRECTOR				х				274,301.	0.	7,013.
(29) JILL JONES	32.00									-
CHIEF OPERATIONS OFFICER						Х		159,363.	0.	4,952.
(30) BRIAN BEAM	40.00									
EXEC. DIR. OF MARKETING &						Х		126,922.	0.	4,727.
(31) JOY HUTCHCRAFT	40.00									
EXEC. DIR. OF DEVELOPMENT						Х		132,902.	0.	2,364.
(32) MARK WUNDER	40.00									
ASSISTANT VP OF DEVELOPMEN						Х		167,387.	0.	4,062.
(33) ELIZABETH ADAMS	40.00									
SR. DIR. OF DEVELOPMENT						Х		113,384.	0.	2,478.
							-			
							_			
			<u> </u>							
								054 050		05 506
Total to Part VII, Section A, line 1c								974,259.		25,596.

ı a		•••	_				or note to any lin	o in this Dort \/!!!			
			Check if Schedule O	onta	ains a i	response	or note to any lin	e in this Part VIII	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
ري ري	4	_	Federated campaigns			1a					000000000000000000000000000000000000000
智	•					1b					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues Fundraising events			1c	270,340.				
			Related organizations			1d	270,340.				
호를			Government grants (contri			1e					
Sir			All other contributions, gifts,			ie					
걸칠		١.		-		4.6	21,324,390.				
문항			similar amounts not included			1f	4,266,596.				
<u>5</u> 2		-	Noncash contributions included in I	ines 1	ia-1f	1g \$	4,200,330.	21,594,730.			
Oa		11	Total. Add lines 1a-1f				Business Code	21,334,730.			
	0	_	OTHER EVENTS/DEPT RO	פחסי			900099	81,733.	81,733.		
<u>i</u>	2		OTHER EVENTO, BELL RO	,1 10			300033	01,733.	01,733.		
E Š		b									
E S		C									
ga Be		d									
Program Service Revenue		e	All other program service	Y01/0							
_			Total. Add lines 2a-2f					81,733.			
	3	9	Investment income (include					02,700.			
	Ü		,	_				903,884.		-70,000.	973,884.
	other similar amounts)  Income from investment of tax-exempt bond proceeds  Royalties					, ,		, .	, -		
	Ü		rioyanios	·····		Real	(ii) Personal				
	6	2	Gross rents	6a	(1)	, , , , , , ,	()				
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss)								
			Gross amount from sales of	<u> </u>	1	ecurities	(ii) Other				
	'	а	assets other than inventory	72	· · ·	94,222.	(ii) Garioi				
		h	Less: cost or other basis	14	,-	,•					
a			and sales expenses	7h	77 6	66 394.					
ᇎ		_	Gain or (loss)	70	3 9	27 828.					
Revenue		ч	Net gain or (loss)	10		, ,		3,927,828.			3,927,828.
e F			Gross income from fundraising					-,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ŧ	Ü	<u> </u>	including \$								
~			contributions reported on								
			Part IV, line 18				102,094.				
		b	Less: direct expenses				41,743.				
			Net income or (loss) from				•	60,351.			60,351.
	9		Gross income from gamin		_						
			Part IV, line 19								
		b	Less: direct expenses								
			Net income or (loss) from			· · · · · · · · · · · · · · · · · · ·					
	10		Gross sales of inventory, I	-	-						
			and allowances 10a								
		b	Less: cost of goods sold				î				
_			Net income or (loss) from			-	<u></u>				
							Business Code				
ons	11	а	OTHER ATHLETIC				900099	707,616.	707,616.		
ane and		b	OTHER REVENUE				900099	486,127.	486,127.		
ĕĕ ĕ		С									
Miscellaneous Revenue		d	All other revenue								
_			Total. Add lines 11a-11d				<b>&gt;</b>	1,193,743.			
	12		Total revenue. See instruction	ns				27,762,269.	1,275,476.	-70,000.	4,962,063.

# Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses			
1	Grants and other assistance to domestic organizations		·					
	and domestic governments. See Part IV, line 21	9,277,057.	9,277,057.					
2	Grants and other assistance to domestic							
	individuals. See Part IV, line 22	3,378,514.	3,378,514.					
3	Grants and other assistance to foreign							
	organizations, foreign governments, and foreign							
	individuals. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors,							
	trustees, and key emp <b>l</b> oyees							
6	Compensation not included above to disqualified							
	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)							
7	Other salaries and wages							
8	Pension plan accruals and contributions (include							
	section 401(k) and 403(b) employer contributions)							
9	Other employee benefits							
10	Payroll taxes							
11	Fees for services (nonemployees):							
а	Management							
b	Legal	2,862.		2,862.				
С	Accounting	-						
d	Lobbying							
е	Professional fundraising services. See Part IV, line 17							
f	Investment management fees							
g	Other. (If line 11g amount exceeds 10% of line 25,							
_	column (A) amount, list line 11g expenses on Sch O.)							
12	Advertising and promotion							
13	Office expenses	221,817.		63,011.	158,806.			
14	Information technology							
15	Royalties							
16	Occupancy	83,358.		72,676.	10,682.			
17	Travel	89,570.		814.	88,756.			
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	13,582.		2,793.	10,789.			
20	Interest	81,397.		81,397.				
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	441,729.		441,729.				
23	Insurance	196,360.		196,360.				
24	Other expenses. Itemize expenses not covered							
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)							
	amount, list line 24e expenses on Schedule 0.)							
а	CONTRACTUAL PAYMENTS	458,834.		48,045.	410,789.			
b	INVESTMENT EXPENSES	371,546.		371,546.	_			
С	MISCELLANEOUS	172,783.		96,576.	76,207.			
d	PROMOTIONAL EXPENSES	166,441.		9,397.	157,044.			
е	All other expenses	214,091.		177,902.	36,189.			
25	<b>Total functional expenses.</b> Add lines 1 through 24e	15,169,941.	12,655,571.	1,565,108.	949,262.			
26	<b>Joint costs.</b> Complete this line only if the organization							
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation.							
	Check here if following SOP 98-2 (ASC 958-720)							

Form 990 (2019)

Part X | Balance Sheet

Pa	Part X Balance Sheet							
	Check if Schedule O contains a response or note to any line in this Part X							
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year	
	1	Cash - non-interest-bearing			120,355.	1	107,415.	
	2	Savings and temporary cash investments			8,631,042.	2	10,496,725.	
	3	Pledges and grants receivable, net			17,002,650.	3	16,890,517.	
	4	Accounts receivable, net	25,465.	4	22,509.			
	5	Loans and other receivables from any current or						
		trustee, key employee, creator or founder, substa						
		controlled entity or family member of any of these		5				
	6	Loans and other receivables from other disqualifi	ed per	rsons (as defined				
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6		
S	7	Notes and loans receivable, net				7		
Assets	8	Inventories for sale or use				8		
Ass	9	Prepaid expenses and deferred charges				9		
	10a	Land, buildings, and equipment: cost or other						
		basis. Complete Part VI of Schedule D	10a	12,931,001.				
	b	Less: accumulated depreciation	7,514,926.		7,159,847. 107,571,694.			
	11	Investments - publicly traded securities	103,428,284.		107,571,694.			
	12	Investments - other securities. See Part IV, line 1	64,749,413.	12	67,917,425.			
	13	Investments - program-related. See Part IV, line 1		13				
	14	Intangible assets		14				
	15	Other assets. See Part IV, line 11			5,532,113.	15	5,421,440.	
	16	Total assets. Add lines 1 through 15 (must equa			207,004,248.	16	215,587,572.	
	17	Accounts payable and accrued expenses			703,594.	17	272,032.	
	18	Grants payable				18		
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
	21	Escrow or custodial account liability. Complete F				21		
es	22	Loans and other payables to any current or former						
Liabilities		trustee, key employee, creator or founder, substa						
jab		controlled entity or family member of any of these			2 440 202	22	2 225 764	
_	23	Secured mortgages and notes payable to unrelat			2,448,292.	23	2,335,764.	
	24	Unsecured notes and loans payable to unrelated				24		
	25	Other liabilities (including federal income tax, pay						
		parties, and other liabilities not included on lines		•	844,244.	0.5	876,632.	
	06	of Schedule D			3,996,130.		3,484,428.	
	26	Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check		~ <b>Y</b>	3,330,130.	20	3,404,420.	
S		and complete lines 27, 28, 32, and 33.	K Her	21				
20	27				19,957,108.	27	20,202,111.	
sala	28	***************************************			183,051,010.	28	191,901,033.	
P P	20	Organizations that do not follow FASB ASC 95			103/031/0101	20	191/901/0001	
Ē		and complete lines 29 through 33.	, one	ok here				
ō	29	Capital stock or trust principal, or current funds				29		
ets	30	Paid-in or capital surplus, or land, building, or equ				30		
Ass	31	Retained earnings, endowment, accumulated inc				31		
Net Assets or Fund Balances	32	Total net assets or fund balances			203,008,118.	32	212,103,144.	
Z	33				207,004,248.	33	215,587,572.	
	, 55				,,			

	orm 990 (2019) ILLINOIS STATE UNIVERSITY FOUNDATION **-***5						
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI					X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	27,	76	2,2	<u>69.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2				41.	
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  4 203						
5	Net unrealized gains (losses) on investments 5 -3						
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-3	3,1	14.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	212,	10	3,1	44.	
Pai	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
			_		Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.	Г				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	g <b>l</b> e Audi	t [				
	Act and OMB Circular A-133?						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audi	: [				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>	

Form **990** (2019)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

# Name of the organization ILLINOIS STATE UNIVERSITY FOUNDATION

Employer identification number \*\*-\*\*5713

Pa	rt I	Reason for Public (	Charity Status (/	All organizations must co	omp <b>l</b> ete th	is part.) Se	e instructions.		
he	organi	zation is not a private found	ation because it is: (F	or lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch					IVAYi).		
2	П	A school described in <b>secti</b>					·/(· ·/(·/-		
	H						:1		
3	$\vdash$	A hospital or a cooperative						0 1 20 0	
4		A medical research organiza	ation operated in cor	njunction with a nospital	aescribea	in sectio	n 1/U(b)(1)(A)(III). Enter	the nospital's name,	
		city, and state:							
5	X	An organization operated for	or the benefit of a col	lege or university owned	d or operat	ed by a go	vernmental unit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that normal	Ilv receives a substar	ntial part of its support f	rom a gove	ernmental	unit or from the general i	oub <b>l</b> ic described in	
		section 170(b)(1)(A)(vi). (C	•		3		J ,		
8		A community trust describe		1\(\Lambda\)\(\vi\) (Complete Par	+ 11 \				
9	H					nd in agnic	unation with a land grant	collogo	
9		An agricultural research org				-	=	=	
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the	name, city	, and state of the college	or	
		university:							
10		An organization that normal	-					-	
		activities related to its exem	npt functions - subjec	et to certain exceptions,	and (2) no	more than	33 1/3% of its support	from gross investment	
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the organization a	after June 30, 1975.	
		See section 509(a)(2). (Cor	mp <b>l</b> ete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ve <b>l</b> y for the benefit of, to	perform t	he function	ns of, or to carry out the	purposes of one or	
		more publicly supported org	ganizations describe	d in <b>section 509(a)(1)</b> d	r section	509(a)(2).	See section 509(a)(3).	Check the box in	
		lines 12a through 12d that	=						
а		Type I. A supporting orga	= -				=	aivina	
		the supported organization	•	•		•		•	
		organization. You must o	., .		i majority c	in the direc	1010 01 11001000 01 1110 01	apporting	
h		7	•		tion with it	o oupporte	d organization(s), by bay	ina	
b		Type II. A supporting orga	•				• ,,,	•	
		control or management o			ame perso	ns that coi	ntrol or manage the supp	σοπεα	
		organization(s). <b>You mus</b>	•						
С		Type III functionally inte	-					ed with,	
		its supported organization	n(s) (see instructions)	). You must complete	Part <b>IV</b> , Se	ections A,	D, and E.		
d		Type III non-functionally	<b>integrated.</b> A supp	orting organization oper	ated in co	nnection w	rith its supported organiz	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	uirement and an attentiv	veness .	
		requirement (see instructi	ions). <b>You must con</b>	nplete Part IV, Sections	s A and D,	and Part	V.		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III		
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.			
f	Ente	r the number of supported o	organizations						
a		ride the following information	-	d organization(s).					
Ŭ		) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
				above (see instructions)					
					-				
					-				

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	17061022.	10582299.	18179445.	29858186.	25861325.	101542277		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge	2248812.	2446698.	2457018.	2513254.	2539487.	12205269.		
4	Total. Add lines 1 through 3	19309834.	13028997.	20636463.	32371440.				
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						7918853.		
6	Public support. Subtract line 5 from line 4.						105828693		
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total		
7	Amounts from line 4	19309834.	13028997.		32371440.	28400812.			
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	1273347.	1058761.	1524987.	2044966.	973,884.	6875945.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on	-84,727.	1,623.		-72,708.	-70,000.	-225,812.		
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)	1220853.	1104489.	1460937.	1487279.				
11	Total support. Add lines 7 through 10						126946713		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12			
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3)			
_	organization, check this box and stor	here					<b>&gt;</b>		
Sec	ction C. Computation of Publi	c Support Per	centage			T .			
14	Public support percentage for 2019 (I	ine 6, co <b>l</b> umn (f) di	vided by line 11, c	olumn (f))		14	83.36 %		
15	Public support percentage from 2018	,	,			15	81.11 %		
16a	33 1/3% support test - 2019. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this box			
	stop here. The organization qualifies as a publicly supported organization								
b	33 1/3% support test - 2018. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box		
	and stop here. The organization qual								
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	is box and stop h	<b>nere.</b> Explain in Pa	rt VI how the orgar	nization		
	meets the "facts-and-circumstances"	-			•				
b	10% -facts-and-circumstances test								
	more, and if the organization meets the						•		
	organization meets the "facts-and-circ			•			▶Щ		
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	below, please com	plete Part II.)						
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1 Gifts, grants, contributions, and	(4) 2010	(5) 2010	(0) 2011	(4) 2010	(0) 2010	(i) rotai		
membership fees received. (Do not								
include any "unusual grants.")								
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3 Gross receipts from activities that								
are not an unrelated trade or business under section 513								
4 Tax revenues levied for the organ-								
ization's benefit and either paid to or expended on its behalf								
5 The value of services or facilities								
furnished by a governmental unit to	0							
the organization without charge								
6 Total. Add lines 1 through 5								
<b>7a</b> Amounts included on lines 1, 2, an								
3 received from disqualified persor								
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
c Add lines 7a and 7b								
8 Public support. (Subtract line 7c from line 6.)								
Section B. Total Support				•				
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
9 Amounts from line 6								
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								
<b>b</b> Unrelated business taxable income								
(less section 511 taxes) from business acquired after June 30, 1975								
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated busines activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>								
12 Other income. Do not include gain or loss from the sale of capital								
assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12								
14 First five years. If the Form 990 is		s first, second. thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiza	ation,		
check this box and <b>stop here</b>			<i>′</i>	•	. , . , .	<b>.</b>		
Section C. Computation of Pu	blic Support Pe							
15 Public support percentage for 2019	9 (line 8, column (f), 0	divided by line 13,	column (f))		15	%		
16 Public support percentage from 20	118 Schedu <b>l</b> e A, Part	: III, line 15			16	%		
Section D. Computation of Inv								
17 Investment income percentage for	<b>2019</b> (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%		
18 Investment income percentage from					18	%		
19a 33 1/3% support tests - 2019. If t								
more than 33 1/3%, check this box						<b>~</b> —		
b 33 1/3% support tests - 2018. If	•			•				
line 18 is not more than 33 1/3%, o	-							
O Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b	-	
5c		
6		
7		
•		
8		
9a		
9b		
9с		
10a		
10b		

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

trustees of each of the supported organizations? Provide details in Part VI.

За

Sche	dule A (Form 990 or 990-EZ) 2019 ILLINOIS STATE UNIVERSI	TY FO	OUNDATION	**-***5713 Page 6
Pa				rage v
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (explain in	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must co			,
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
_2_	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
_5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by .035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4 unless subject to			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2019

emergency temporary reduction (see instructions).

instructions).

	dule A (Form 990 or 990-EZ) 2019 ILLINOIS S'I'A'I'.  † V   Type III Non-Functionally Integrated 509(			*-***5713 Page 7
	Type III real rained and image into grantous cook	(a)(3) Supporting Orga	inizations (continued)	
	ion D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpose	3		
4_	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
_	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	(:)	(::)	(:::)
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

### Schedule A

### Identification of Excess Contributions Included on Part II, Line 5

2019

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
STATE FARM COMPANIES FOUNDATION	9,767,587.	7,228,653.
FRED GLETTEN FAMILY TRUST	2,592,306.	53,372.
SCHLUMBERGER	3,175,762.	636,828.
		F 040 050
otal Excess Contributions to Schedule A, Part II, Line 5		7,918,85

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ILLINOIS STATE UNIVERSITY FOUNDATION

**Employer identification number** \*\*-\*\*\*5713

Pa			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Bonor advised failes	(b) I dilds and other accounts
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	uriting that the assets held in donor advis	sed funds
Ŭ	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
Ŭ	for charitable purposes and not for the benefit of the donor or		
		denot devices, or for any case, purpose	
Pa			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreat	` · · · · · · · · · · · · · · · · · · ·	f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	- · · · · · · · · · · · · · · · · · · ·		•
С	Number of conservation easements on a certified historic stru	ıcture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year ▶		
4	Number of states where property subject to conservation eas	ement is located 🕨	
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations, and enforcing cons	servation easements during the year
	<b>—</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statem	ents that describes the
Pa	organization's accounting for conservation easements.  rt III   Organizations Maintaining Collections of	Art Historical Treasures or Ot	ther Similar Assets
ı a	Complete if the organization answered "Yes" on Form	· ·	inci olilijai Assets.
			and balance about works
ia	If the organization elected, as permitted under FASB ASC 956	•	
	of art, historical treasures, or other similar assets held for pub service, provide in Part XIII the text of the footnote to its finan		•
h	If the organization elected, as permitted under FASB ASC 958		
b	art, historical treasures, or other similar assets held for public	•	
	•	exhibition, education, or research in furti	nerance of public service,
	provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(i) Revenue included on Form 990, Part VIII, line 1		100 011
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under FASB A		a gani, provido
а	Revenue included on Form 990, Part VIII, line 1	_	<b>&gt;</b> \$
			k
			········ <b>F</b> Ψ

Pai	rt III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Oth	er Simila	r Assets	(continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the t	ollowing that make	significant	use of its		
	collection items (check all that apply):							
а	X Public exhibition	d	l 🔲 Loan or exc	hange program				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.							
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other simi <b>l</b>	ar assets			
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's co	llection?			Yes	X No
Pai	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" o	on Form 99	0, Part <b>I</b> V,	ine 9, or	
	reported an amount on Form 990, Par	t X, <b>l</b> ine 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other assets no	t included			
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII							
							Amount	
С	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on Fo						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.							
Pai	rt V Endowment Funds. Complete i	f the organization an	swered "Yes" on Fo	rm 990, Part IV, line	e 10.			
		(a) Current year	<b>(b)</b> Prior year	(c) Two years back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance	144,350,035.	128,825,072.	113,043,510	. 97,	062,178.	102,6	58,200.
b	Contributions	12,694,075.	11,454,792.	9,596,561	. 8,:	259,732.	3,7	751,298.
С	Net investment earnings, gains, and losses	767,788.	10,247,588.	11,485,053	. 12,	811,223.	-2,2	284,353.
d	Grants or scholarships	5,372,025.	4,710,531.	4,165,411	. 4,	064,644.	5,8	880,941.
	Other expenditures for facilities							
	and programs	222,056.	266,866.	254,535	.	245,234.	3	301,976.
f	Administrative expenses	845,241.	1,200,020.	880,106	•	779,746.	8	80,050.
g	End of year balance	151,372,576.	144,350,035.	128,825,072	. 113,	043,510.	97,0	062,178.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a)	) he <b>l</b> d as:				
а	Board designated or quasi-endowment	2.39	%					
b	Permanent endowment ►85.96	%						
С	Term endowment ►11.65	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are he <mark>l</mark> d ar	nd administered for	the organiz	ation		
	by:						\	res No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza						3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pai	rt VI Land, Buildings, and Equipm	ent.						
	Complete if the organization answere	d "Yes" on Form 990	), Part IV, line 11a. S	ee Form 990, Part	X, <b>l</b> ine 10.			
	Description of property	(a) Cost or o basis (investn	1 , ,	' '	Accumulat depreciation		(d) Book	value
1a	Land	500		0,000.			1,580	,631.
	Buildings				,625,6		5,563	
	Leasehold improvements		'				-	
	Equipment		16	0,756.	145,4	75.	15	,281.
	Other				-			
	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990 Part	X. column (B) line 1	Oc.)		. ▶	7,159	,847.
	ISSIGITITIES THUSE C							

edu <b>l</b> e D (Form 990) 2019	ILLINOIS	STATE	UNIVERSITY	FOUNDATION	**-***5713	Page 3
rt VII Investments	<ul> <li>Other Securities</li> </ul>					

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) REAL ASSETS MARKETABLE			
(B) FUNDS	23,631,586.	END-OF-YEAR MARKET	VALUE
(C) HEDGED AND ALTERNATIVE			
(D) FUNDS	44,285,839.	END-OF-YEAR MARKET	VALUE
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	67,917,425.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"		1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		1d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	15.)	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" (	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	/Is \ D = a la contra
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OBLIGATIONS UNDER SPLIT-IN	NTEKEST		076 622
(3) AGREEMENTS			876,632.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			056 600
Total, (Column (b) must equal Form 990, Part X, col. (B) line	25.)	<b>▶</b>	876,632.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

329,803.

15,169,941.

4c

5

Scho	dule D (Form 990) 2019 ILLINOIS STATE UNI	VERSTTY	FOUND	ATTON	**_	***5713 Page 4
	t XI Reconciliation of Revenue per Audited Finar					
	Complete if the organization answered "Yes" on Form 990			•		
1	Total revenue, gains, and other support per audited financial state				1	26,474,651.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses) on investments		2a	-3,459,188.		
b	Donated services and use of facilities		··· —	2,539,487.		
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)			-38,114.		
е	Add lines 2a through 2d		_		2e	-957,815.
3	Subtract line 2e from line 1				3	27,432,466.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b		4a	371,546.		
b	Other (Describe in Part XIII.)			-41,743.		
С	Add lines 4a and 4b				4c	329,803.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Pa				5	27,762,269.
Pa	t XII Reconciliation of Expenses per Audited Fina	ncial Staten	nents Wit	h Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990	, Part IV, line 12	a			
1	Total expenses and losses per audited financial statements				1	17,379,625.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1			
а	Donated services and use of facilities		2a	2,539,487.		
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII.)		2d			
е	Add lines 2a through 2d				2e	2,539,487
3	Subtract line 2e from line 1				3	14,840,138.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | Part XIII | Supplemental Information.

**b** Other (Describe in Part XIII.)

c Add lines 4a and 4b

Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b

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

#### PART III, LINE 4:

THE ART COLLECTION IS DISPLAYED IN A PROPERTY HELD IN AN ENDOWMENT BY THE FOUNDATION.

### PART V, LINE 4:

TO SERVE THE EDUCATIONAL PURPOSES OF ILLINOIS STATE UNIVERSITY.

### PART X, LINE 2:

THE INTERNAL REVENUE SERVICE HAS RECOGNIZED THE FOUNDATION AS EXEMPT FROM INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE FOUNDATION FOLLOWS THE ACCOUNTING GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE FOUNDATION IS SUBJECT TO FEDERAL AND

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service **Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2019
Open to Public Inspection

Name of the organization

**Employer identification number** 

	LINOIS STATE	UNIVERSI'	ry found	ATION		**-***571	
Pa	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "	Yes" on
	Form 990, Part IV	/, line 14b.					
1				ds to substantiate the amount of its gra			
	the grantees' eligibility fo	or the grants or a	assistance, and t	he selection criteria used to award the	grants or assis	stance?	Yes X No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's <sub>l</sub>	procedures for monitoring the use of its	grants and otl	her assistance outs	side the
3				n be duplicated if additional space is n			1
	<b>(a)</b> Region	(b) Number of offices in the region	employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
CENT	TRAL AMERICA AND						
	CARRIBEAN	0	0	INVESTMENTS			18,241,775.
3 a	Subtotal	0	0				18,241,775.
b	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a						1

18,241,775.

and 3b)

Schedule	Schedule F (Form 990) 2019	ILLINOIS STA	STATE	ATE UNIVERSITY FOUNDATION	FOUNDA	ATION **-**5713	ı
Part II	Part II Grants and Other Assistance to Organizations or	nce to Organizati	ons or Enti	ties Outside the Unit	ed States.	r Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any	
	recipient who received more than \$5,000. Part II car	re than \$5,000. Pa	rt II can be	can be duplicated if additional space is needed.	I space is ne	eeded,	

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2019
(h) Description of noncash assistance						Sched
(g) Amount of noncash assistance					empt	•
(f) Manner of cash disbursement					ecognized as tax-ex	
(e) Amount of cash grant					oreign country, r	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
(c) Region					is listed above that are re	r entities
(b) IRS code section and EIN (if applicable)					recipient organization th the grantee or cour	other organizations or
1 (a) Name of organization						3 Enter total number of other organizations or entities

\*\*-\*\*5713

Page 3

Schedule F (Form 990) 2019 ILLINOIS STATE UNIVERSITY FOUNDATION \*\*-\*\*5713

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

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2019
(g) Description of noncash assistance						Schedule
(f) Amount of noncash assistance	0.					
(e) Manner of cash disbursement	TRANSFER TO UNIVERSITY ACCOUNT					
(d) Amount of cash grant	263,910.					
(c) Number of recipients	236					
(b) Region	VARIOUS					
(a) Type of grant or assistance (b) Region	SCHOLARSHIPS					

Page 4

Part IV	Foreign	<b>Forms</b>

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2019

932075 10-12-19 Schedule F (Form 990) 2019

### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

\*\*-\*\*\*5713

Name of the organization

Employer identification number

ILLINOI	S STATE UNIVERSITY	FOU	JND	ATION	**_***!	5713
	Complete if the organization answe				ine 17. Form 990-E	Z filers are not
<ul> <li>1 Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, Patron b If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the</li> </ul>	ed funds through any of the following and solicitate and solicitate and solicitate are villed are villed and solicitate are villed and solicitate are villed and solicitate ar	tion of tion of fundra (incluc rofessi	non-g gover lising ling of ona <b>l</b> fu	overnment grants nment grants events ficers, directors, trus undraising services?	Ye	<del></del>
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody tro <b>l</b> of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
otal			<b>•</b>			
3 List all states in which the organizatio or licensing.				or has been notified	it is exempt from r	egistration

Revenue			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))							
Reve	1	Gross revenue											
es.	2	Cash prizes											
Direct Expenses	3	Noncash prizes											
Direct F	4	Rent/facility costs											
	5	Other direct expenses											
	6	Volunteer labor	Yes % No	Yes % No	Yes % No								
	7 Direct expense summary. Add lines 2 through 5 in column (d)												
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>								
а	ls t	ter the state(s) in which the organization condu- the organization licensed to conduct gaming ac No," explain:	tivities in each of these s	states?		Yes No							
	_												
		ere any of the organization's gaming licenses re Yes," explain:		•		Yes No							
	_												
93208	2 09	9-11-19			Schedule G (Fo	rm 990 or 990-EZ) 2019							
					•	•							

Sch	edule G (Form 990 or 990-EZ) 2019 ILLINOIS STATE UNIVERSITY FOUNDATION **-*	<u>**57</u>	13 Page 3
	Does the organization conduct gaming activities with nonmembers?	Y	es No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	•	_
	to administer charitable gaming?		es No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
		13b	
	An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events books and records:	LISD	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. — Y	es No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation  \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Y	es No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year ▶ \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III, lines	s 9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule (	990 or 990-E7)	TLLINOTS	STATE	UNTVERSTTY	FOUNDATION	**-***5713	Page 4
Part IV	G (Form 990 or 990-EZ)  Supplemental Infor	mation (continue	ed)	<del></del>		<u> </u>	r ago r
		(OOMENTA C	, c.,				

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Open to Public Inspection

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

			9.90%   0.000	the latest IIIIOIII	anoli.		
Name of the organization ILLINOIS	STATE UNIVERSITY		FOUNDATION				Employer identification number $**-**5713$
Part I General Information on Grants and Assistance	ind Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate the	amount of the grants	or assistance, the o	grantees' eligibility	for the grants or assis	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	oring the use of grant I	funds in the United	States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.	Domestic Organiz	zations and Domestic	Governments.	omplete if the orga	anization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicat	\$5,000. Part II can	be duplicated if addition	ed if additional space is needed.	ed.	-	_	-
1 (a) Name and address of organization or government	( <b>p</b> )	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ILLINOIS STATE UNIVERSITY CAMPUS BOX NODWAL 11.61761	OCO		η 0 1 1	2 507 203	PRICE LISTS,	ING TITOR HOLD	TO SUPPORT THE UNIVERSITY, INSTRUCTION, RESEARCH, AND PUBLIC REPOYLCE ACCURATES
3			*#	•	VB1 C015511C0		991111111111111111111111111111111111111
2 Enter total number of section 501(c)(3) and government organizations	ınd government orç	ganizations listed in the	listed in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	table					<b>A</b>
THA For Paperwork Reduction Act Notice, see the Instructions for For	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2019)

\*\*-\*\*5713

Schedule I (Form 990) (2019) ILLINOIS STATE UNIVERSITY FOUNDATION

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
TUDENT SCHOLARSHIPS	2346	3,378,514.	.0		
Part IV   Supplemental Information. Provide the information required in	uired in Part I, line	e 2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	ditional information.	
PART I, LINE 2:					
BRANT FUNDS ARE DISBURSED AND MONITORED	TORED BASED	NO	REQUESTS FROM	AUTHORIZED	
'ISCAL AGENTS. FUNDS MUST PROVIDE D	DIRECT BE	BENEFIT TO I	ILLINOIS ST	STATE	
JNIVERSITY AND BE SUPPORTED BY APPROPR	ROPRIATE	DOCUMENTAT	IATE DOCUMENTATION. ILLINOIS	OIS STATE	
JNIVERSITY FISCAL AGENTS REQUEST DI	DISBURSEMENT	NT OF FUNDS	S FOR SCHOLARSHIPS	LARSHIPS	
AWARDED IN ACCORDANCE WITH SPECIFIC	C CRITERIA	OF THE	SCHOLARSHIP MAY	MAY INCLUDE	
IDUCATIONAL ACHIEVEMENT, FINANCIAL	NEED, AND	OTHER	FACTORS. FOU	FOUNDATION	
PERSONNEL REVIEW REQUESTS TO DETERMINE	H	GUIDELINES	ARE MET.		

### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

ILLINOIS STATE UNIVERSITY FOUNDATION

Employer identification number \*\*-\*\*5713

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  X Health or social club dues or initiation fees			
	X Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		Х
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
4	organization or a related organization:			
2		4a		Х
h	Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The root to any of lines ha of list are personne and approxime an outro for such items in a different and in			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		L

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

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	- other deferred compensation		(B)(i)·(D)	in column (B) reported as deferred on prior Form 990
(1) PAT VICKERMAN	Ξ	274,301.	0	0.	0	7,013.	281,314.	0.
EXECUTIVE DIRECTOR	(ii)		• 0	• 0		• 0	• 0	• 0
(2) JILL JONES	(i)	159,36	• 0	• 0		4,952.	164,315.	0.
CHIEF OPERATIONS OFFICER	(ii)	• 0	• 0	• 0	• 0	• 0	• 0	• 0
(3) MARK WUNDER	(i)	167,38	* 0	• 0	• 0	4,062.	171,449.	0
ASSISTANT VP OF DEVELOPMEN	(ii)	0.	• 0	• 0	• 0	0.	• 0	0
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### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

ILLINOIS STATE UNIVERSITY FOUNDATION

Employer identification number \*\*-\*\*\*5713

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermini		s
1	Art - Works of art	X	5	387.451.	APPRAISAL			
2	Art - Historical treasures			307,1321				
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	63	664 059.	MARKET QUOT	ΔΨΤΟ	)N	
10	Securities - Closely held stock	- 22	- 3	001,033.	IMMINIMI QUOI		<u>/11</u>	
11	Securities - Oldsely field stock Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential					-		
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ( <u>EQUIPMENT</u> )	X	4		ESTIMATED F.	AIR	VAI	JUE
26	Other (GRAIN)	X	5	5,334.	SALES PRICE	1		
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	_	<del>-</del>					
	for which the organization completed Form 828	3, Part <b>I</b> V, [	Donee Acknow <b>l</b> edg	gement 29		— т		
						$\longrightarrow$	Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date			· · · · · · · · · · · · · · · · · · ·				
	exempt purposes for the entire holding period?					30a		Х
	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance po	-	•	•	ions?	31	Х	
32a	Does the organization hire or use third parties o		=	·			, l	
_	contributions?					32a	X	
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co describe in Part II.	olumn (c) for	r a type of property	tor which column (a) is chec	;Kea,			

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

Schedule M (Form 990) 2019

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#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

ILLINOIS STATE UNIVERSITY FOUNDATION

**Employer identification number** \*\*-\*\*\*5713

FORM 990, PART VI, SECTION B, LINE 11B:

THE FOUNDATION'S AUDIT AND FINANCE COMMITTEES REVIEW THE FORM 990 BEFORE IT IS FILED, AND THOSE COMMITTEES REPORT THEIR FINDINGS TO THE BOARD OF DIRECTORS AT ITS NEXT SCHEDULED MEETING.

PART VI, SECTION B, LINE 12C: FORM 990,

THE BOARD POLICY STATES THAT EACH DIRECTOR, PRINCIPAL OFFICER, OR COMMITTEE MEMBER OF THE BOARD WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST WITH THE FOUNDATION MUST DISCLOSE THE EXISTENCE OF SUCH INTEREST TO THE BOARD OF DIRECTORS, WHICH SHALL DECIDE IF A CONFLICT OF INTEREST ACTUALLY EXISTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE SALARY OF A KEY EMPLOYEE OF THE ORGANIZATION IS DETERMINED ANNUALLY BY THE PRESIDENT OF ILLINOIS STATE UNIVERSITY WHO MAY CONSIDER SUCH FACTORS AS TIME IN THE POSITION, PERFORMANCE, AND SALARIES OF COMPARABLE POSITIONS WITHIN THE UNIVERSITY AND AT COMPARABLE UNIVERSITIES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

IL, AZ, CA, CT, DC, FL, LA, ME, MD, MA, MI, MN, NJ, OH, OR, SC, UT, WA

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION MAKES ITS AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE PUBLIC.

FORM 990. PART XI, LINE 9, CHANGES IN NET ASSETS:

## SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

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

Employer identification number \*\*-\*\*5713

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I

ILLINOIS STATE UNIVERSITY FOUNDATION

Direct controlling 4,539,210. ISU FOUNDATION 600,631, ISU FOUNDATION End-of-year assets **e** 。 。 Total income € Legal domicile (state or foreign country) ILLINOIS ILLINOIS REAL ESTATE INVESTMENT REAL ESTATE INVESTMENT Primary activity LLC (USES FOUNDATION EIN) LAUNCHING FUTURES II, LLC (USES FOUNDATION Name, address, and EIN (if applicable) EIN), CAMPUS BOX 8000, NORMAL, IL of disregarded entity NORMAL, IL 61790-8000 LAUNCHING FUTURES, CAMPUS BOX 8000 61790-8000

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II

	10,40	(cı )(n)		No						
	(9)	controlle	entity?	Yes						
	( <del>t</del> )	Direct controlling	entity							
	(e)	Public charity	status (if section	501(c)(3))						
	(p)	ę	section							
	(0)	Legal domicile (state or	foreign country)							
	(q)	Primary activity								
6	(a)	Name, address, and EIN	of related organization							

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

FOUNDATION STATE UNIVERSITY

Page 2

\*\*-\*\*5713

ILLINOIS Schedule R (Form 990) 2019

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

( <del>K</del>	General or Percentage managing ownership partner?									
9	eneral or anaging artner?	Yes No								
€	E ŏ	K-1 (Form 1065) Y								
æ	Disproportionate allocations?	Yes No								
(b)	Share of end-of-year									
	Share of total income									
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)								
(p)	Direct controlling entity									
(c)	Legal domicile (state or	toreign country)								
(Q)	Primary activity									
(a)	Name, address, and EIN of related organization									

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

1			l		ı		ı		l			
	(i)	Section 512(b)(13) controlled entity?	ž									
	Ċ	512 con	Yes									
	(y)	Percentage ownership										
	(6)	Share of end-of-year	dssets									
	(£)	20										
	(e)	Type of entity (C corp, S corp,	or trust)									
	(p)	Direct controlling Type of entity S entity (C corp, S corp.)										
	(o)	Legal domicile (state or foreign	country)									
,	(q)	Primary activity										
-	(a)	Name, address, and EIN of related organization										

Schedule R (Form 990) 2019

Page 3 \*\*-\*\*\*5713

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

				╙
yte: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedu	3	-	Ç = = - -	Yes
During the tax year, and the organization engage in any of the following	is with one or more re	transactions with one of more related organizations listed in Parts II-1V?	In Parts II:1V ?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<del>Q</del>
(S)				10
				7
				2 ,
e Loans or Ioan guarantees by related organization(s)				Je
<ul><li>f Dividends from related organization(s)</li></ul>				#
<b>g</b> Sale of assets to related organization(s)				1g
Purchase of assets from related organization(s)				-th
				;
:   FACTOR BY OF GOOD WITH FORMER OF USE AND A STATE OF THE CONTRACT OF THE CO				;
J Lease of Tacilities, equipment, or other assets to related organization(s)				F
and the second continues of th				Ť
K Lease of Idollines, equipment, of other assets not related organization(s)				¥
<ul> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> </ul>	anization(s)			=
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			1m
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			Tr.
o Sharing of paid employees with related organization(s)				10
				:
boimburcoment poid to related organization(e) for expenses				5
				2 ,
q Keimbursement paid by related organization(s) for expenses				рг
r Other transfer of cash or property to related organization(s)				+
s Other transfer of cash or property from related organization(s)				1s
2 If the answer to any of the above is "Yes," see the instructions for information on w	who must complete th	is line, including covered I	mation on who must complete this line, including covered relationships and transaction thresholds.	
<b>(a)</b> Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	olved
	type (a-s)			
(1)				
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(3)				
Ŝ				
(5)				
Ş				
(V) 932163 09-10-19			Schedule	Schedule R (Form 990) 2019

Page 4

Part VI

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

l a		l	1	1	I	1	1		_
Code V-UBI General or Percentage amount in box 20 partner? eventage of Schedule K-1 partner? eventage (Form 1065) ves No									Schedule R (Form 990) 2019
or Perc									ш 99(
(j) General or managing partner? Yes No									3 (For
BI G 0x 20 " K-1 L									dule F
(i) te V-Ul nt in bo nedule m 106									Sche
Coc amour of Scl (For									
Disproportionate allocations?									
Dis ti allo									
e of year yesr									
(g) Share of end-of-year assets									
<b>.</b>									
<b>4</b>									
(f) Share of total income									
(e) Are all Are all 501(c)(3) 0.05.7 Yes No									
(e) Are all partners sec 501(c)(3) orgs.? Yes No									
(d) Predominant income prelated, unrelated, excluded from tax undersections 512-514)									
(d) nant in , unrel rom ta s 512-									
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(c) Legal domicile (state or foreign country)									
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(b) Primary activity									
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								<del>                                     </del>	
(a) Name, address, and EIN of entity									
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### CONSOLIDATED FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

June 30, 2020 and 2019

### CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT	3
FINANCIAL STATEMENTS	
CONSOLIDATED STATEMENTS OF FINANCIAL POSITION	5
CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGE IN NET ASSETS	6
CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES	8
CONSOLIDATED STATEMENTS OF CASH FLOWS	10
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS	12



### **Independent Auditors' Report**

Board of Directors Illinois State University Foundation and Subsidiaries

We have audited the accompanying consolidated financial statements of Illinois State University Foundation and subsidiaries ("Foundation"), which comprise the consolidated statements of financial position as of June 30, 2020 and 2019, and the related consolidated statements of activities and change in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### **Auditors' Responsibility**

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### **Opinion**

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Illinois State University Foundation and subsidiaries as of June 30, 2020 and 2019, and the changes in their net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated September 24, 2020, on our consideration of Illinois State University Foundation and subsidiaries' internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to solely describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Illinois State University Foundation and subsidiaries' internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Illinois State University Foundation and subsidiaries' internal control over financial reporting and compliance.

Kerber, Eck & Braukel UP

Springfield, Illinois September 24, 2020

### ILLINOIS STATE UNIVERSITY FOUNDATION AND SUBSIDIARIES

### CONSOLIDATED STATEMENTS OF FINANCIAL POSITION

### June 30

	<u>2020</u>	<u>2019</u>
ASSETS		
Cash and cash equivalents	\$ 9,505,317	\$ 6,714,900
Pledges receivable, net	16,890,517	17,002,650
Accounts receivable and prepaid expenses	22,509	25,465
Investments - at fair value	176,587,943	170,211,195
Investment in real estate	600,631	600,631
Assets held under split-interest agreements	1,429,012	1,406,107
Beneficial interests in trusts	2,422,781	2,458,195
Beneficial interests in split-interest agreements	357,751	360,451
Property and equipment, net	6,549,221	6,896,984
Assets held as collections, net	9,994	17,310
Cash surrender value of life insurance	1,211,896	1,310,360
TOTAL ASSETS	\$ 215,587,572	\$ 207,004,248
LIABILITIES AND NET ASSETS		
Liabilities		
Accounts payable and other liabilities	\$ 272,032	\$ 703,594
Obligations under split-interest agreements	876,632	844,244
Note payable	2,335,764	2,448,292
TOTAL LIABILITIES	3,484,428	3,996,130
Net Assets		
Without donor restrictions	20,202,111	19,957,108
With donor restrictions	191,901,033	183,051,010
TOTAL NET ASSETS	212,103,144	203,008,118
TOTAL LIABILITIES AND NET ASSETS	\$ 215,587,572	\$ 207,004,248

### ILLINOIS STATE UNIVERSITY FOUNDATION AND SUBSIDIARIES

### CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGE IN NET ASSETS

### For the year ended June 30, 2020

	Without Donor <u>Restrictions</u>	With Donor <u>Restrictions</u>	<u>Total</u>
Support and revenue			
Contributions and grants, net of discount and allowance for uncollectible receivables  Net investment gain (loss)	\$ 124,439 1,692,473	\$ 21,470,291 (691,495)	\$ 21,594,730 1,000,978
Change in value of beneficial interests in trusts and split-interest agreements Service contract with the University	- 2,539,487	(38,114)	(38,114) 2,539,487
Other revenue	2,339,487	1,129,908	1,377,570
	4,604,061	21,870,590	26,474,651
Net assets released from restrictions	13,020,567	(13,020,567)	
Total support and revenue	17,624,628	8,850,023	26,474,651
Expenses			
Program services			
Student aid, scholarships and awards	3,378,514	-	3,378,514
University programs	9,318,800		9,318,800
Total program services	12,697,314	-	12,697,314
Support services			
Management and general	2,244,725	-	2,244,725
Fundraising	2,437,586		2,437,586
Total support services	4,682,311		4,682,311
Total expenses	17,379,625		17,379,625
Change in net assets	245,003	8,850,023	9,095,026
Net assets - beginning of year	19,957,108	183,051,010	203,008,118
Net Assets - End of Year	\$ 20,202,111	\$ 191,901,033	\$ 212,103,144

## CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGE IN NET ASSETS - CONTINUED

## For the year ended June 30, 2019

	Without Donor <u>Restrictions</u>		
Support and revenue			
Contributions and grants, net of discount and			
allowance for uncollectible receivables	\$ 1,710,668	\$ 26,871,476	\$ 28,582,144
Net investment gain	2,588,245	9,577,317	12,165,562
Change in value of beneficial interests in			
trusts and split-interest agreements	-	(20,844)	(20,844)
Service contract with the University	2,513,254	-	2,513,254
Other revenue	235,192	1,514,557	1,749,749
	7,047,359	37,942,506	44,989,865
Net assets released from restrictions	10,002,961	(10,002,961)	
Total support and revenue	17,050,320	27,939,545	44,989,865
Expenses			
Program services			
Student aid, scholarships and awards	2,893,317	_	2,893,317
University programs	6,795,163	<u>-</u>	6,795,163
can casely freguena			
Total program services	9,688,480	-	9,688,480
Support services			
Management and general	2,658,292	_	2,658,292
Fundraising	2,008,453		2,008,453
Total support services	4,666,745	<del>-</del> _	4,666,745
Total expenses	14,355,225		14,355,225
Change in net assets	2,695,095	27,939,545	30,634,640
Net assets - beginning of year	17,262,013	155,111,465	172,373,478
Net Assets - End of Year	\$ 19,957,108	\$ 183,051,010	\$ 203,008,118

## CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES

## For the year ended June 30, 2020

	Program Services	Management and General	Fundraising	Total
Salaries and benefits	\$ 1,478,877	\$ 1,019,533	\$ 1,332,519	\$ 3,830,929
Student aid, scholarships and awards	3,378,514	-	1,920	3,380,434
Contractual services	239,253	48,045	410,789	698,087
Bank and investment fees	20,882	30,939	-	51,821
Computer	141,427	-	16,445	157,872
Conferences	155,767	2,793	10,789	169,349
Depreciation	-	441,729	-	441,729
Equipment and facility expense	4,918,798	133,058	127,231	5,179,087
Insurance	42,972	196,360	-	239,332
Interest	-	81,397	-	81,397
Memberships	77,112	4,000	14,405	95,517
Miscellaneous	403,218	102,431	84,495	590,144
Professional fees	4,832	2,862	-	7,694
Occupancy	57,317	96,493	44,404	198,214
Postage and printing	104,193	3,754	121,257	229,204
Promotional expense	687,592	9,397	157,044	854,033
Supplies	321,584	59,257	21,104	401,945
Telecommunications	4,231	11,863	6,428	22,522
Travel	660,745	814	88,756	750,315
	\$ 12,697,314	\$ 2,244,725	\$ 2,437,586	\$ 17,379,625

## CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES - CONTINUED

## For the year ended June 30, 2019

-	Program Services	Management and General Fundraising		Total
Salaries and benefits	\$ 1,359,159	\$ 1,342,261	\$ 1,025,016	\$ 3,726,436
Student aid, scholarships and awards	2,893,317	-	1,698	2,895,015
Contractual services	632,192	57,578	397,776	1,087,546
Bank and investment fees	14,919	27,963	=	42,882
Computer	87,414	-	-	87,414
Conferences	161,732	4,192	12,275	178,199
Depreciation	-	440,269	-	440,269
Equipment and facility expense	1,392,856	200,841	122,877	1,716,574
Insurance	38,333	166,615	-	204,948
Interest	-	84,924	-	84,924
Memberships	67,818	3,572	13,373	84,763
Miscellaneous	413,284	92,973	15,445	521,702
Professional fees	14,750	5,767	=	20,517
Occupancy	100,129	163,263	30,545	293,937
Postage and printing	119,011	1,778	87,976	208,765
Promotional expense	1,229,087	20,153	178,373	1,427,613
Supplies	311,534	31,318	13,809	356,661
Telecommunications	9,646	12,614	6,809	29,069
Travel	843,299	2,211	102,481	947,991
<u>-</u>	\$ 9,688,480	\$ 2,658,292	\$ 2,008,453	\$ 14,355,225

## CONSOLIDATED STATEMENTS OF CASH FLOWS

## For the years ended June 30

	<u>2020</u>	<u>2019</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Contributions, gifts and pledges	\$ 12,207,890	\$ 10,021,366
Service fee revenues	81,733	98,386
Payments on behalf of ISU departments and programs	(9,736,760)	(6,509,580)
Payments for operating expenses	(1,207,021)	(1,221,841)
Payments for scholarships and fellowships	(3,378,952)	(2,894,905)
Other receipts	1,195,836	1,621,362
Other expenditures	(373,430)	(483,335)
Net cash provided by (used in) operating activities	(1,210,704)	631,453
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds from sales and maturities of investments	81,594,222	98,406,354
Purchase of investments	(86,785,334)	(103,005,272)
Purchase of property and equipment	(86,650)	(73,180)
Net cash used in investing activities	(5,277,762)	(4,672,098)
CASH FLOWS FROM FINANCING ACTIVITIES		
Principal paid on debt	(112,528)	(109,001)
Private gifts for endowment purposes	9,498,974	5,232,702
Payments to annuitants	(107,563)	(91,613)
Net cash provided by financing activities	9,278,883	5,032,088
NET INCREASE IN CASH AND CASH EQUIVALENTS	2,790,417	991,443
CASH AND CASH EQUIVALENTS - BEGINNING OF YEAR	6,714,900	5,723,457
CASH AND CASH EQUIVALENTS - END OF YEAR	\$ 9,505,317	\$ 6,714,900

## CONSOLIDATED STATEMENTS OF CASH FLOWS - CONTINUED

## For the years ended June 30

	<u>2020</u>		<u>2019</u>
RECONCILIATION OF CHANGE IN NET ASSETS			
TO NET CASH PROVIDED BY (USED IN)			
OPERATING ACTIVITIES			
Change in net assets	\$ 9,095,026	\$	30,634,640
Depreciation	441,729		440,269
Contributions held as assets under split-interest agreements	(100,000)		(30,000)
Gain on investments	(1,000,978)	(	12,165,562)
Change in value of interests in beneficial trusts			
and split-interest agreements	38,114		20,844
Private gifts for endowment purposes	(9,498,974)		(5,232,702)
Decrease in accounts receivable and prepaid expenses	2,956		12,784
(Increase) decrease in pledges receivable	112,133	(	13,328,076)
Decrease in cash surrender value life insurance	98,464		83,274
Increase (decrease) in accounts payable			
and accrued liabilities	(431,562)		269,189
Increase (decrease) in beneficiary payments payable	32,388		(73,207)
NET CASH PROVIDED BY (USED IN)			
OPERATING ACTIVITIES	\$ (1,210,704)		631,453
CASH PAID FOR INTEREST	\$ 81,397	\$	84,924

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2020 and 2019

#### **NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

## **Nature of Operations**

The Illinois State University Foundation (Foundation) was incorporated in May 1948 under the *General Not-for-Profit Corporation Act* for the principal purpose of providing fund raising and other assistance to Illinois State University (University) in order to attract private gifts to support the University's instructional, research and public service activities. The Foundation is an organization as described in Section 501(c)(3) of Internal Revenue Code and, accordingly, exempt from federal income tax.

The Foundation is a component unit of the University, and the Foundation's financial statements are also included as part of the University's financial statements and the State of Illinois Comprehensive Annual Financial Report.

The Foundation has formed two limited liability companies (LLC) to assist in carrying out the Foundation's mission to assist the University. The Foundation is the sole member of each of these LLCs. The governing board for each LLC, known as "Launching Futures, LLC" and "Launching Futures II, LLC", consists of the executive officers of the Foundation. LLC activity is included as part of the Foundation's consolidated financial statements. All significant intercompany transactions have been eliminated.

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows:

#### **Basis of Presentation**

The financial statements are presented on the accrual basis of accounting. Net assets and revenues, gains and losses are classified based on donor-imposed restrictions as follows:

<u>Net Assets Without Donor Restrictions</u> - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, proving services, and receiving interest from operating investments, less expenses incurred in providing program-related services, raising contributions, and preforming administrative functions.

Net Assets With Donor Restrictions - These net assets result from gifts of cash and others assets that are received with donor stipulations that limit the use of the donated assets, either temporarily until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished, or permanently, in which the donor has stipulated the funds be maintained in perpetuity.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

**JUNE 30, 2020 and 2019** 

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues, expenses gains, losses and other changes in net assets during the reporting period. Actual results could differ from those estimates.

#### Cash and Cash Equivalents

The Foundation considers all liquid debt instruments purchased with original maturities of three months or less to be cash equivalents that are not designated for investment purposes.

#### Receivables

Unconditional promises to give (pledges) are recorded as an asset and contribution in the period in which they are received. Conditional promises to give are recorded in the period in which the conditions have been met or it is deemed that it is remote that the condition will not be met. Matching gift expectances are not accrued as receivable but are recognized upon receipt.

Promises to give that are collectable beyond one year are recorded at fair value of their estimated future cash flows. All pledges are presented net of an allowance for doubtful collections. Management calculates the allowance based upon collection history of prior contributions receivable.

#### **Investments**

Investments in common stock, mutual funds, hedged and alternative funds, bank common trusts, and limited partnerships are recorded at fair value as determined by quoted market prices and management's estimates. Real estate investments are carried at cost, which approximates fair value. Most long-term and endowment investments are pooled for the purposes of allocating realized gains and losses, unrealized gains and losses and ordinary income, net of investment fees, to Foundation accounts on the basis of percentage of share in the pool.

Management's valuation of the investment in limited partnerships is primarily based on valuations by the General Partner. Although the General Partner uses its best judgment in estimating the fair value of the limited partnership investments, there are inherent limitations. Therefore, the values presented are not necessarily indicative of the amount that the Partnerships could currently realize. Future events could affect the estimates of fair value and could also affect the amount realized upon liquidation of the limited partnership investments.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

**JUNE 30, 2020 and 2019** 

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### **Investments - Continued**

Foundation policy states that assets are to be invested in a diversified portfolio of equity, fixed income and alternative strategies. No investment is to be made that will cause the total investment in equities or fixed income securities issued or guaranteed by any one person, firm, or corporation to exceed 5% of the then fair market value of the Foundation; provided, this restriction is not to apply to either well diversified mutual funds, pooled funds, unit trust, or the like, or direct obligations of the U.S. Government and its fully guaranteed agencies. Equity investments have an asset allocation range from 45% to 70% of the portfolio with a target weight of 55%; fixed income investments have an asset allocation range from 0% to 30% with a target weight of 10%; and real assets have an asset allocation range from 0% to 20% with a target weight of 10%; and real assets have an asset allocation range from 0% to 25% with a target weight of 15%.

#### **Split-Interest Agreements**

Split-interest agreements are valued at fair value at the time of donation with a corresponding liability recorded for the present value of the expected payments due to the donors or third-party beneficiary with the difference recorded as contributions in the net asset type based on the donor's restriction. On an annual basis, the Foundation revalues the liability to make distributions to the designated beneficiaries based on actuarial assumptions.

#### **Beneficial Interests in Trusts**

The Foundation recognizes beneficial interests in trusts as contribution income upon receipt based on the Foundation's share of fair value of the underlying trust assets. Subsequent to initial contribution recognition, changes in fair value of the underlying trust assets are recognized separately in the Consolidated Statements of Activities and Change in Net Assets of the Foundation.

#### **Beneficial Interests in Split-Interest Agreements**

The Foundation is the beneficiary of certain split-interest agreements held by independent trustees. Contribution revenue is recognized at the date a trust has been established with an initial valuation based on the expected present value of the Foundation's interest in a trust's assets. Present value computations consider, among other factors, appropriate interest rates and estimated donor mortality which are assessed annually for reasonableness. Subsequent to initial valuation, changes are recognized separately in the Consolidated Statements of Activities and Change in Net Assets of the Foundation.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### **Property and Equipment**

Property and equipment are recorded at cost at the date of acquisition or fair value if acquired by gift. For financial statement reporting, the Foundation uses the following estimated useful lives:

Category	Capitalization <u>Threshold</u>	Estimated <u>Useful Lives</u>
Land	\$ 100,000	-
Buildings	\$ 100,000	30-60 years
Building Improvements	\$ 25,000	30 years
Site Improvements	\$ 25,000	15 years
Leasehold Improvements	\$ 25,000	remaining term of lease
Furniture and Equipment	\$ 5,000	7 years

Depreciation is computed using the straight-line method over the estimated useful lives of the assets.

#### **Collections**

Collections are recorded at fair market value at the date of donation and are valued based upon the appraisal submitted along with the donation. For financial statement reporting, the Foundation uses a \$ 5,000 capitalization threshold and a 7-year estimated useful life.

Depreciation is computed using the straight-line method over the estimated useful lives of the assets.

#### **Cash Surrender Value of Life Insurance**

Cash surrender value of life insurance represents the surrender value of insurance policies where donors have transferred ownership of the policies to the Foundation, and the Foundation is named as beneficiary. Life insurance policies are carried at net cash surrender value. Changes in value (realized and unrealized) are recorded in the Consolidated Statements of Activities and Change in Net Assets of the Foundation.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### **Contributions and Net Assets**

Contributions are recognized at fair value in the period in which the pledges are made. Contributions received are distinguished between those that increase net assets with donor restrictions and those that increase net assets without donor restrictions. Restricted net assets result from donor restrictions that the contributions are to be used for restricted purposes or due to the passage of time. When the restriction has been met, the restricted net assets are released to unrestricted net assets.

Restricted contributions received in the same year in which the restriction is met are recorded as net assets with donor restrictions.

#### **Contributed Assets and Services**

Real estate and other objectively measurable assets that are available for financial support are recorded at their fair value at the date of contribution. Non-monetary assets, art objects, equipment and various services contributed directly to the University through the Foundation for direct benefit of a University department are not included in the financial statements, although donors receive recognition for such contributions.

The value of contributed services of a number of volunteers is not reflected in the financial statements since the services are not specialized services that would otherwise be purchased.

#### **Expense Allocation**

The costs of providing programs and other activities have been summarized on a functional basis in the Consolidated Statements of Activities and Change in Net Assets. The Consolidated Statements of Functional Expenses present the natural classifications of expenses by function. Directly identifiable expenses are charged to programs and supporting services. Expenses related to more than one function are charged to program and supporting services on the basis of periodic time and expense studies. Management and general expenses include expenses not directly identifiable with any other specific function, but provide for overall support and direction of the Foundation.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### **Income Taxes**

The Internal Revenue Service has recognized the Foundation as exempt from income taxes under provisions of Section 501(c)(3) of the Internal Revenue Code. The Foundation follows the accounting guidance for accounting for uncertainty in income taxes. The Foundation is subject to federal and state income taxes to the extent it has unrelated business income. In accordance with the guidance for uncertainty in income taxes, management has evaluated their material tax positions and determined that there are no income tax effects with respect to its financial statements.

#### Fair Value of Financial Instruments

The carrying amounts of cash and cash equivalents, accounts payable and other liabilities, deposits held for others approximate fair value due to the short maturity of these financial instruments. Receivables are initially recorded at fair value using an appropriate discount rate and approximate fair value at year-end. Investments, beneficial interests in trusts and split-interest agreements, assets held under split-interest agreements and obligations under split-interest agreements are carried at fair value.

#### **Future Adoption of Accounting Pronouncements**

In May 2014, the Financial Accounting Standards Board issued Accounting Standards Update 2014-09, *Revenue from Contracts with Customers (Topic 606)*, as amended by Accounting Standards update 2015-14, which supersedes or replaces nearly all GAAP revenue recognition guidance. The Update establishes a new contract and control-based revenue recognition model, changes the basis for deciding when revenue is recognized over time or at a point in time and expands the disclosure about revenue. The Update, as amended, is effective for non-public entities for annual reporting periods beginning after December 15, 2019. The standard requires retrospective application to each prior reporting period presented or with the cumulative effect being recognized at the date of initial application. The Foundation is assessing the potential impact of this standard on its operations and financial statements.

#### **Subsequent Events**

Subsequent events have been evaluated through the date of the Independent Auditors' Report, which is the date the financial statements were available to be issued.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 2 - CASH AND CASH EQUIVALENTS

Cash and cash equivalents consist of the following at June 30:

	2020		20	019		
	Bank	Bank Carrying Bank		Carrying		
	<u>Balance</u>	<u>Amount</u>	<u>Balance</u>	<u>Amount</u>		
Cash and cash equivalents	\$ 10,703,086 \$	10,615,915	\$ 8,895,347	\$ 8,760,933		

Custodial credit risk is the risk that in the event of a bank failure, deposits may not be returned. The Federal Deposit Insurance Corporation or the Security Investor Protection Corporation insured account balances of \$ 1,218,013 and \$ 2,166,387 at June 30, 2020 and 2019, respectively. Bank balances of \$ 9,485,073 and \$ 6,728,960 at June 30, 2020 and 2019, respectively, were invested in investment sweep funds secured by U.S. government obligations. The Foundation does not have a formal policy for custodial credit risk.

Carrying amount of cash and cash equivalents at June 30:

	2020		<u>2019</u>
Cash & equivalents without donor restrictions Cash & equivalents with donor restrictions	\$ 9,505,317 	\$	6,714,900 2,046,033
	<u>\$ 10,615,915</u>	<u>\$</u>	8,760,933

Cash and cash equivalents with donor restrictions are included in investments and assets held under split-interest agreements at June 30, 2020 and 2019.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### **NOTE 3 - INVESTMENTS**

Investments at June 30, 2020, consisted of the following:

		<u>Cost</u>		Fair Value	
Common stock	\$	509,331	\$	736,216	
Mutual funds - investing in					
Stocks	5	4,160,772	7	75,014,662	
Bonds	2	9,970,420	3	31,820,816	
Hedged and alternative funds	3	0,744,270	۷	14,285,839	
Real assets marketable funds	2	1,902,593	2	23,631,586	
Cash and cash equivalents		1,098,824		1,098,824	
	<u>\$ 13</u>	8,386,210	<u>\$ 17</u>	76,587,943	

Investments at June 30, 2019, consisted of the following:

		<u>Cost</u>		air Value
Common stock	\$	439,339	\$	683,633
Mutual funds - investing in				
Stocks		50,271,656		73,222,817
Bonds		28,244,932		29,521,834
Hedged and alternative funds		29,135,040		41,549,496
Real assets marketable funds		17,855,437		23,199,917
Cash and cash equivalents		2,033,498		2,033,498
	<u>\$ 1</u>	<u>27,979,902</u>	<u>\$_1</u>	70,211,195

Total investment return was comprised of \$ 903,884 and \$ 1,972,258 of dividend and interest income netted against \$ 371,546 and \$ 208,150 of fees for the years ended June 30, 2020 and 2019, respectively. Realized gains totaled \$ 3,927,828 and \$ 1,347,355 for the years ended June 30, 2020 and 2019, respectively. Unrealized losses totaled \$ 3,459,188 for the year ended June 30, 2020. Unrealized gains totaled of \$ 9,054,099 for the year ended June 30, 2019.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## NOTE 4 - ASSETS HELD AND OBLIGATIONS UNDER SPLIT-INTEREST AGREEMENTS

Split-interest agreements are agreements where donors enter into a trust or other arrangement under which the Foundation is the beneficiary. Charitable gift annuities are agreements in which the Foundation accepts a contribution and agrees to an obligation to make periodic stipulated payments to donors or third-party beneficiaries for a specified time. Charitable lead trusts are agreements in which the Foundation accepts a contribution and receives all income generated by the investment during the life of the donor. Upon death of the donor, the annuity is then transferred to the beneficiary.

On an annual basis, the Foundation revalues the liability to make distributions to the designated beneficiaries based on actuarial assumptions. Adjustments to reflect the present value of the estimated annuity payments and changes in actuarial assumptions are included in the Consolidated Statements of Activities and Change in Net Assets. The present value of the estimated future payments is calculated using an actuarial discount rate of 4% and applicable mortality tables.

#### **NOTE 5 - BENEFICIAL INTERESTS IN TRUSTS**

As of June 30, 2020 and 2019, the Foundation has recorded its beneficial interests in four perpetual trusts. Interests in the perpetual trusts have been recorded as permanent endowments based on the intent for the trusts to operate in perpetuity.

These trusts consist of investment portfolios which are in the custody of an independent trustee who has the authority to manage investment decisions. The Foundation retains the sole interest in two of the trusts and a one-third and a one-half interest in the other two trusts, respectively. The trustees do not have variance power to redirect the interests in the trusts to other entities. Net decreases in the value of beneficial interests in trusts totaled \$ 35,414 for the year ended June 30, 2020. Net increases in the value of beneficial interests in trusts totaled \$ 4,729 for the year ended June 30, 2019.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 6 - BENEFICIAL INTERESTS IN SPLIT-INTEREST AGREEMENTS

The Foundation has been named the beneficiary of two charitable remainder trusts which are managed by third parties. Under the terms of one trust, the third party trustee pays specified distributions to individual beneficiaries and to two organizations, of which the Foundation is one, during the agreement's term. At the time of the last individual's death, the trust will convert to a perpetual trust, with the Foundation having a one-half interest. The income from the trust is restricted to scholarships.

According to the terms of the second trust, an individual beneficiary is entitled to annual payments during his lifetime. The Foundation is the beneficiary of two-thirds of the remaining trust assets upon the death of the individual beneficiary or 25 years after the death of the donor, whichever occurs first. The proceeds distributed from the trust will be restricted to scholarships.

Net decreases in the beneficial interest of split-interest agreements totaled \$ 2,700 and \$ 25,573 for the years ended June 30, 2020 and 2019, respectively. The recorded beneficial interests are based on the present value of future cash flows to the Foundation.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

#### **JUNE 30, 2020 and 2019**

#### **NOTE 7 - FAIR VALUE MEASUREMENTS**

The Foundation follows the fair value measurement guidance for financial assets and financial liabilities. This guidance defines fair value, establishes a framework for measuring fair value and expands disclosure about fair value measurements.

Fair value is defined to be the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between the market participants at the measurement date.

A three-level hierarchy has been established for fair value measurements based upon the inputs to the valuation of an asset or liability as follows:

Level 1 - Valuation is based on quoted prices for identical assets and liabilities in active markets.

Level 2 - Valuation is derived from inputs, other than quoted prices included in Level 1, which are observable for the asset or liability either directly or indirectly. Investments classified as Level 2 are generally valued by benchmarking model-derived prices to quoted market prices and trade data for identical or comparable securities. The significant inputs used in this approach include interest rates, prepayment timing, yield spreads, maturities, credit losses and credit ratings of the securities.

Level 3 - Valuation is derived from unobservable inputs that are not corroborated by market data.

Fair values for the Foundation's debt and mutual fund securities are based on prices provided by its investment managers and its custodian bank. Both the investment managers and the custodian bank use a variety of pricing sources to determine market valuations. The Foundation analyzes market valuations received to verify reasonableness and to understand the key assumptions used and their sources.

Fair values of equity securities have been determined by the Foundation from observable market quotations as provided by its investment managers and its custodian bank.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 7 - FAIR VALUE MEASUREMENTS - Continued

Fair values of investments in alternative investments are provided by management of the funds. Such investments include private investment entities in which public market quotations to enter and exit the investments are not provided. Each entity provides the Foundation with a net asset value per unit invested. Each of the entities financial statements are prepared in a manner consistent with investment companies and report their investments at fair value.

Cash equivalents are comprised of short-term fixed income securities. Because of the nature of these assets, carrying amounts approximate fair values, which have been determined from public quotations, when available.

The Foundation has elected to measure any existing obligation under split-interest agreements at fair value. To better match the estimated cash flows of the obligation under split-interest agreements, the Foundation changes the present value of annuity rate to match the current distribution amount when calculating the present value of annuity.

Beneficial interests in trusts are valued at the proportional share of interest at the closing price on which the trusts' underlying individual assets are based as reported to the Foundation by the trustees.

There have been no changes in valuation techniques used for any assets measured at fair value during the year ended June 30, 2020.

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## **NOTE 7 - FAIR VALUE MEASUREMENTS - Continued**

The following table presents the Foundation's fair value hierarchy for those assets and liabilities measured at fair value on a recurring basis as of June 30, 2020:

		Level 1		Level 2		Level 3		<u>Total</u>
Investments Common stock Mutual funds Cash and cash equivalents	\$	736,216 1,342,807 1,098,824	\$	- - -	\$	- - -	\$	736,216 1,342,807 1,098,824
Total investments in the fair Value hierarchy	<u>\$</u>	3,177,847	<u>\$</u>	<del>-</del>	<u>\$</u>			3,177,847
Investments measured at Net asset value							_1	73,410,096
Investments at fair value							<u>\$1</u>	76,587,943
Assets held under split- interest agreements U.S. treasury notes Mutual funds Hedged and alternative funds Real assets marketable funds Cash and cash equivalents	\$	32,612 1,233,902 - - 11,774	\$	- 136,510 14,214	\$	- - - -	\$	32,612 1,233,902 136,510 14,214 11,774
Split interests at fair value	<u>\$</u>	1,278,288	<u>\$</u>	150,724	<u>\$</u>		<u>\$</u>	1,429,012
Beneficial interests in trusts	<u>\$</u>	<u>-</u>	<u>\$</u>	<del>-</del>	<u>\$</u>	2,422,781	<u>\$</u>	2,422,781
Beneficial interests in split-interest agreements	<u>\$</u>	<del>_</del>	<u>\$</u>	<u>-</u>	<u>\$</u>	357,751	<u>\$</u>	357,751
Obligation under split-interest agreements	<u>\$</u>	<u>-</u>	<u>\$</u>	<u>-</u>	<u>\$</u>	(876,632)	<u>\$</u>	(876,632)

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## **NOTE 7 - FAIR VALUE MEASUREMENTS - Continued**

The following table presents the Foundation's fair value hierarchy for those assets and liabilities measured at fair value on a recurring basis as of June 30, 2019:

		Level 1		<u>Level 2</u>		Level 3		<u>Total</u>
Investments Common stock Mutual funds Cash and cash equivalents	\$	683,633 1,252,693 2,033,498	\$	- - -	\$	- - -	\$	683,633 1,252,693 2,033,498
Total investments in the fair Value hierarchy	<u>\$</u>	3,969,824	<u>\$</u>	<u>-</u>	<u>\$</u>			3,969,824
Investments measured at Net asset value							_1	66,241,371
Investments at fair value							<u>\$1</u>	70,211,195
Assets held under split- interest agreements	•	24 602	4		Φ.			<b>21</b> (02
U.S. treasury notes Mutual funds Hedged and alternative funds Real assets marketable funds Cash and cash equivalents	\$	31,683 1,207,260 - 12,535	\$ _	144,491 10,138	\$ 	- - - -	\$ 	31,683 1,207,260 144,491 10,138 12,535
Split interests at fair value	<u>\$</u>	1,251,478	<u>\$</u>	<u>154,629</u>	<u>\$</u>	<u>-</u>	<u>\$</u>	1,406,107
Beneficial interests in trusts	<u>\$</u>		<u>\$</u>	<del>-</del>	<u>\$</u>	2,458,195	<u>\$</u>	2,458,195
Beneficial interests in split-interest agreements	<u>\$</u>		<u>\$</u>		<u>\$</u>	360,451	<u>\$</u>	360,451
Obligation under split-interest agreements	<u>\$</u>		<u>\$</u>	<del>_</del>	<u>\$</u>	(844,244)	<u>\$</u>	(844,244)

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 7 - FAIR VALUE MEASUREMENTS - Continued

The following tables represents a reconciliation of all Level 3 assets and liabilities measured at fair value on a recurring basis for the years ended June 30, 2020 and 2019:

		Beneficial	Obligation
	Beneficial	Interests in	Under
	Interests in	Split-Interest	Split-Interest
	<u>Trusts</u>	<u>Agreements</u>	Agreements
Balance as of June 30, 2018	\$ 2,453,466	\$ 386,024	\$ (917,451)
Investment income	59,084	-	-
Net appreciation	72,071	7,713	-
Contributions	-	-	(18,406)
Payments to beneficiaries	(126,426)	(33,286)	91,613
Balance as of June 30, 2019	2,458,195	360,451	(844,244)
Investment income	58,699	-	-
Net appreciation	35,836	12,687	-
Contributions	-	-	(139,951)
Payments to beneficiaries	(129,949)	(15,387)	107,563
Balance as of June 30, 2020	<u>\$ 2,422,781</u>	<u>\$ 357,751</u>	\$ (876,632)

## NOTE 8 - INVESTMENTS IN ENTITIES THAT CALCULATE NET ASSET VALUE PER SHARE

As part of the Foundation's investment portfolio, there are investments in entities in which purchases and withdrawals within these entities are not made in an open market. Instead, the purchases and withdrawals occur with the entities, and in certain circumstances, those transactions are entirely controlled and/or restricted by the entity. The fair value of these investments is determined by the management of the entities and is reported to the Foundation as the Foundation's proportionate share of the net asset fair value of the entity.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## NOTE 8 - INVESTMENTS IN ENTITIES THAT CALCULATE NET ASSET VALUE PER SHARE - Continued

The table below provides information relative to these types of investments. The additional information that follows the table provides information associated with these investments. None of the investments are probable of being sold at an amount different from net asset value per share. For the investments shown below, the Foundation is not able to redeem the investments until the termination date of the fund. As such, there is no redemption frequency or redemption notice period shown below. The final termination date of each fund is presented in the table. This termination date is estimated as most funds have an option of extending the fund for an additional two years, if desired.

		Fair	Value	<b>.</b>	11	nfunded	Termination Date
Category		<u>2020</u>	varue	2019		<u>nmitments</u>	of the Fund
Limited partnerships							
Capital Partners 2000	\$	259,784	\$	432,801	\$	58,909	12/31/2013
Global Distressed Investors		205,901		358,898		488,320	Indefinite
Emerging Markets 2013		1,162,492		1,129,260		130,000	12/11/2024
International Private							
Equity Partners		1,129,421		1,292,246		216,009	3/31/2020
							to 2/9/2022
SSG Realty Opportunities		1,627,592		2,372,051		778,008	4/1/2024
SSG Global Private Equity Fund		8,240,523		6,977,900	10	),648,000	5/16/2026
1 2							to 5/7/2031
Natural Resources Partners		6,366,493		7,870,561	3	3,683,750	2/18/2020
		, ,		, ,		, ,	to 3/23/2030
Private Equity Partners		1,493,113		1,589,359		246,211	3/31/2020
Titrate Equity Turiners		1,130,110		1,000,000		0,	to 1/31/2023
Venture Partners	1	0,815,587		9,812,842	-	7,419,800	3/31/2020
volitare i armers	,	10,013,307		J,012,012		,112,000	to 12/18/2031
Strategic Solutions							10 12/10/2031
Realty Opportunities		915,336		1,268,087		962,500	9/30/2021
Realty Opportunities		715,550		1,200,007		702,500	7/30/2021
Commonfund Real Estate							
							< 10.0 to 5.7 7
Opportunities Fund		1,055,939		696,902	2	1,940,903	6/22/2033
CF Private Credit Fund 2018		2,737,243		1,546,704	3	3,046,212	5/23/2027

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## NOTE 8 - INVESTMENTS IN ENTITIES THAT CALCULATE NET ASSET VALUE PER SHARE - Continued

The following investments are also valued at the Foundation's proportionate share of the net asset value of the entity. However, these funds are liquid and can be redeemed with the required notification period.

					Redemption
	Fair Value		Unfunded	<b>Redemption</b>	<u>Notice</u>
Category	<u>2020</u>	<u>2019</u>	Commitments	Frequency	Period
SSgA S&P Global LargeMid Cap Natural					
Resources Fund	\$ 3,333,465	\$ 1,878,073	\$ -	Daily	2 days
SSgA Tuckerman US REIT					
Index NL QP	6,511,217	5,432,612	-	Daily	2 days
High Quality Bond Fund Strategic Solutions Global	22,692,852	20,008,549	-	Weekly	5 days
Equity Fund	75,014,662	73,222,818	-	Monthly	5 days
Strategic Solutions Core					
Real Estate Fund	3,821,545	3,681,631	-	Quarterly	120 days
Global Absolute Alpha					
Company	18,241,774	18,409,485	-	Quarterly	65 days
CF Credit Series	7,785,157	8,260,592	-	Monthly	90 days

<u>Capital Partners 2000</u> - a diversified capital program investing in private equity and venture capital both in developed and emerging markets.

<u>Global Distressed Investors</u> - a diverse set of liquid trading strategies and illiquid, longer-term lock-up strategies, which invest primarily in performing restructured debt, stressed debt, distressed debt, "special situation" and mezzanine debt investments, across the U.S. and globally.

Emerging Markets 2013 - long-term capital appreciation and superior risk-adjusted net returns through diversified private capital investments including growth equity, buyouts and venture capital, focused in China, Latin America, India, Southeast Asia, South Korea, Africa and other select emerging market countries.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

#### JUNE 30, 2020 and 2019

## NOTE 8 - INVESTMENTS IN ENTITIES THAT CALCULATE NET ASSET VALUE PER SHARE - Continued

<u>International Private Equity Partners</u> - long-term capital appreciation and superior risk-adjusted net returns through diversified private equity investments. Strategic focus areas include European focus, private equity emphasis and a preference for indigenous managers.

<u>SSG Realty Opportunities</u> - invest in value-added, distressed, and opportunistic private real estate funds that target a 13% - 15% compounded annual return.

<u>SSG Global Private Equity Fund</u> - invests primarily in a diversified portfolio of common stocks and equity-linked securities of companies in the global public equity markets.

<u>Natural Resources Partners</u> - long-term capital appreciation and superior risk-adjusted net returns through equity investments and property acquisition strategies. Strategic focus areas include emphasis on natural gas and oil, power and other natural resources opportunities.

<u>Private Equity Partners</u> - long-term capital appreciation and superior risk-adjusted net returns through diversified private equity investments.

<u>Venture Partners</u> - long-term capital appreciation and superior risk-adjusted net returns through equity investments. Primary strategic focus area is information technology with an early stage bias. Secondary strategic focus areas include healthcare and late stage technology.

<u>Strategic Solutions Realty Opportunities</u> - invest in value-added, distressed, and opportunistic private real estate funds that target a 15% - 18% compounded annual return.

<u>Commonfund Real Estate Opportunities Fund</u> - identify, acquire, hold, manage, and dispose of investments in real estate private equity funds for income and capital appreciation.

<u>CF Private Credit Fund 2018</u> - outperform the ICE BAML US High Yield Index with less volatility by pursuing a core strategy of senior direct lending to US middle market companies.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### **NOTE 9 - PLEDGES RECEIVABLE**

Pledges receivable balances at June 30 consist of the following:

	<u>2020</u>	<u>2019</u>
Pledges receivable		
Due within 1 year	\$ 4,513,766	\$ 3,420,684
Due within 1 to 5 years	10,132,817	11,152,007
Due in 5 or more years	3,017,646	4,000,000
Less		
Discount for time-value of money	(382,770)	(1,250,395)
Allowances for uncollectible pledges	(390,942)	(319,646)
	<u>\$16,890,517</u>	<u>\$17,002,650</u>

Management believes the allowance for uncollectible pledges is adequate based on information currently known. However, events impacting donors could occur in the future which would materially increase the allowance for uncollectible pledges. The discount rate used was .74% and 2.41% for June 30, 2020 and 2019, respectively.

During the year ended June 30, 2019, approximately 38% of contribution revenue was from one donor. The related pledges receivable from the donor represented approximately 59% and 64% of the total pledges receivable balance as of June 30, 2020 and 2019, respectively. There were no such concentrations of contribution revenue as of June 30, 2020.

# ILLINOIS STATE UNIVERSITY FOUNDATION AND SUBSIDIARIES NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## NOTE 10 - PROPERTY AND EQUIPMENT

The following is a summary of property and equipment at June 30:

		<u>2020</u>	<u>2019</u>
Buildings	\$	7,775,670	\$ 7,775,670
Building improvements		968,359	881,708
Site improvements		2,445,585	2,445,585
Leasehold improvements		-	39,260
Furniture and equipment		31,945	31,945
		11,221,559	11,174,168
Less accumulated depreciation		(5,652,338)	(5,257,184)
		5,569,221	5,916,984
Land		980,000	<u>980,000</u>
Total	<u>\$</u>	6,549,221	<u>\$ 6,896,984</u>

Depreciation expense charged to operations for the years ended June 30, 2020 and 2019, was \$441,729 and \$440,269, respectively. This includes depreciation expense of \$7,316 related to collections for the years ended June 30, 2020 and 2019.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

#### JUNE 30, 2020 and 2019

#### **NOTE 11 - LONG-TERM DEBT**

Long-term debt consists of the following at June 30:	<u>2020</u>	<u>2019</u>
Commerce Bank, mortgage note payable;		
due in monthly installments of \$ 16,160, including interest at 3.34%; maturing in December 2025. The building on		
North Main Street in Normal, Illinois, with a cost of		
\$ 3,300,000, is pledged as collateral.	\$ 2,335,764	\$ 2,448,292

Aggregate maturities of the long-term debt at June 30, 2020, are as follows:

2021	\$ 116,62	0
2022	120,63	2
2023	124,78	1
2024	128,89	6
2025	133,50	6
Thereafter	1,711,32	9

\$ 2,335,764

#### **NOTE 12 - OPERATING LEASE COMMITMENTS**

In 1990, the Foundation established a Chicago office to provide the University with direct access to Chicago area alumni, corporation and Foundation networks. Lease payments for the Chicago office totaled \$51,995 and \$106,840 in 2020 and 2019, respectively. The original lease expired in December 2014 and was renewed for an additional five years with the first five months of rent abated per the renewal agreement. The lease expired in December 2019 and was not renewed.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

## JUNE 30, 2020 and 2019

#### **NOTE 13 - NET ASSETS**

Net assets with donor restrictions as of June 30 were restricted for the following:

		<u>2020</u>		<u>2019</u>
Subject to expenditure for specific purpose:				
Scholarships and fellowships	\$	44,519,158	\$	46,359,194
Instructional department uses		26,365,525		24,866,091
University capital projects		6,806,072		6,179,434
Other	_	5,467,334		5,844,367
	<u>\$</u>	83,158,089	<u>\$</u>	83,249,086

Net assets with donor restrictions as of June 30 that are restricted for investment in perpetuity, the income from which is expendable for the following:

	<u>2020</u>	<u>2019</u>
Subject to expenditure for specific purpose:		
Scholarships and fellowships	\$ 63,296,164	\$ 59,489,808
College and academic development	33,942,951	28,972,558
University capital projects	6,089,348	5,917,405
Other	5,414,481	5,422,153
	\$ 108,742,944	\$ 99,801,924

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by occurrence of other events specified by donors.

Net assets without donor restrictions for the years ended June 30 are as follows:

	2	2020	<u>2019</u>
Designated by the Board Undesignated		\$,614,372 \$ 5,587,739	3,707,017 16,250,091
	<u>\$ 20</u>	<u>,202,111</u> \$	19,957,108

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

#### **JUNE 30, 2020 and 2019**

#### **NOTE 14 - ENDOWMENT FUNDS**

The Foundation's endowment consists of approximately 924 individual funds established for a variety of purposes. The endowment includes donor-restricted and board designated endowment funds. As required by generally accepted accounting principles, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

The Board of Directors of the Foundation has interpreted the Illinois Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Foundation classifies as net assets with donor restrictions (a) the original value of gifts donated to the perpetual endowment, (b) the original value of subsequent gifts to the perpetual endowment and (c) accumulations to the perpetual endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund.

The remaining portion of donor-restricted endowment funds is classified as net assets with donor restrictions until those amounts are appropriated for expenditure by the Foundation in a manner consistent with the standard of prudence prescribed by UPMIFA.

In accordance with UPMIFA, the Foundation considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- 1. Duration and preservation of the fund
- 2. Purposes of the Foundation and the fund
- 3. General economic conditions
- 4. Possible effect of inflation and deflation
- 5. Expected total return from investment income and appreciation or depreciation of investments
- 6. Other resources of the institution
- 7. Investment policies of the Foundation

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## **NOTE 14 - ENDOWMENT FUNDS - Continued**

Endowment net assets as of June 30 were as follows:

<u>2020</u>	Without Donor Restrictions	With Donor Restrictions	<u>Total</u>
Donor-restricted perpetual endowment funds Donor-restricted	\$ -	\$ 130,125,058	\$ 130,125,058
quasi-endowment funds	-	17,633,146	17,633,146
Board designated quasi-endowment funds	3,614,372	<u> </u>	3,614,372
	\$ 3,614,372	\$ 147,758,204	<u>\$ 151,372,576</u>
2019			
Donor-restricted perpetual			
endowment funds Donor-restricted	\$ -	\$ 122,563,206	\$ 122,563,206
quasi-endowment funds	-	18,079,812	18,079,812
Board designated	2 707 017		2 707 017
quasi-endowment funds	3,707,017	<del>_</del>	3,707,017
	\$ 3,707,017	\$ 140,643,018	\$ 144,350,035

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### **NOTE 14 - ENDOWMENT FUNDS - Continued**

Changes in endowment, not total, net assets for the fiscal years ended June 30, 2020 and 2019, are as follows:

	Without Donor Restrictions		With Donor Restrictions			<u>Total</u>
Endowment investments						
at June 30, 2018	\$	3,452,892	\$	125,372,180	\$	128,825,072
Investment income		32,501		1,337,539		1,370,040
Net appreciation		181,058		8,696,490		8,877,548
Contributions		58,855		10,605,386		10,664,241
Appropriations of endowment						
assets for expenditure		(18,289)		(4,637,252)		(4,655,541)
Expenditures from quasi-						
endowment funds		-		(1,521,876)		(1,521,876)
Other additions		<u>-</u>		790,551		790,551
Endowment investments						
at June 30, 2019		3,707,017		140,643,018	]	144,350,035
Investment income		19,482		579,750		599,232
Net appreciation (depreciation)		(76,767)		245,323		168,556
Contributions		(13,935)		12,338,790		12,324,855
Appropriations of endowment						
assets for expenditure		(21,425)		(4,879,886)		(4,901,311)
Expenditures from quasi-						
endowment funds		-		(1,538,011)		(1,538,011)
Other additions				369,220		369,220
Endowment investments						
at June 30, 2020	\$	3,614,372	\$	147,758,204	\$ 1	<u>151,372,576</u>

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level the Foundation is required to retain as a fund of perpetual duration pursuant to donor stipulation or UPMIFA. In accordance with GAAP, deficiencies of this nature are reported in net assets with donor restrictions and aggregated \$48,603 and \$6,094 as of June 30, 2020 and 2019, respectively. At June 30, 2020 and 2019, the fair value of underwater endowments \$6,455,730 and \$39,927, respectively, and the total amount of original corpus was \$6,504,333 and \$46,021, respectively. These deficiencies resulted from unfavorable market fluctuations that occurred shortly after investment of new permanently restricted contributions and continued appropriation for certain purposes that was deemed prudent by the Foundation Board of Directors.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### **NOTE 14 - ENDOWMENT FUNDS - Continued**

The Foundation has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs and other items supported by its endowment while seeking to maintain the purchasing power of the endowment. Endowment assets include those assets of donor-restricted endowment funds the Foundation must hold in perpetuity or for donor-specified periods, as well as those of board-designated endowment funds. Under the Foundation's policies, endowment assets are invested in a manner that is intended to produce results that to seek an average total annual return of spending net of inflation and administrative cost. The Foundation expects its endowment funds to provide an average rate of return of approximately 4.5% annually over time. Actual returns in any given year may vary from this amount.

To satisfy its long-term rate of return objectives, the Foundation relies on a total return strategy in which investment returns are achieved through both current yield (investment income such as dividends and interest) and capital appreciation (both realized and unrealized). The Foundation targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term return objectives within prudent risk constraints.

The Foundation's board of directors has adopted a hybrid approach spending policy to determine the spending distribution. This approach takes into consideration the duration and preservation of the endowments, purpose of the endowment funds, general economic conditions, the possible effect of inflation or deflation, expected total return from income and the investment policy.

The spending distribution calculation is the sum of a) the prior year's spending distribution, plus 4.5% of the value of any new gifts; the sum of which is adjusted by the most recently calculated annual Higher Education Price Index, then weighted at 70% added to b) the year-end market value times 4.5% then weighted at 30%.

#### **NOTE 15 - FUNDRAISING FEES**

A fundraising fee of 1.25% and 1.50%, of the December 31, 2019 and 2018 market values, respectively, was assessed from each endowed funds' annual distribution to help support Foundation's fundraising and general operations. On July 1, 2019 and 2018, a total of \$ 4,901,311 and \$ 4,655,541, respectively, was distributed to endowed funds' expendable balances and fundraising fees totaling \$ 1,888,793 and \$ 1,835,726, respectively, were distributed to the Foundation budget.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

#### NOTE 16 - RELATED PARTY TRANSACTIONS

Effective July 1, 2019, the Foundation renewed the Support Agreement, for an additional one year, with the University Board of Trustees (acting for and on behalf of the University) whereby the University agrees to provide to the Foundation fair and reasonable compensation in exchange for development and fund raising services up to a maximum value. The agreement expired on June 30, 2020. The maximum values under the agreement were \$2,760,000 and \$2,675,000 for the years ended June 30, 2020 and 2019, respectively. Under terms of the agreements, in fiscal year 2020 and 2019, the University provided in-kind support in the form of personnel, office space, office equipment, computer support, and communication services, estimated at \$2,539,487 and \$2,513,254, respectively. Cash payments and in-kind support pursuant to the Support Agreement are included as part of the service contract with the University and revenue and expenses have been allocated among the support services in the accompanying Consolidated Statements of Activities and Change in Net Assets.

As of June 30, 2020 and 2019, the Foundation had payables to the University of \$ 200,895 and \$ 262,579, respectively.

The Foundation's Launching Futures, LLC, received from the University lease payments of \$230,004 for the Alumni Center during the years ended June 30, 2020 and 2019. The lease was renewed in 2016 for an additional five years.

#### NOTE 17 - COMMITMENT TO INVEST IN LIMITED PARTNERSHIPS

The Foundation has invested in various limited partnerships. According to the terms of the investment agreements, the Foundation committed to invest \$ 79,896,457 and \$ 72,896,457 as of June 30, 2020 and 2019, respectively. As of June 30, 2020 and 2019, the Foundation had invested \$ 47,277,835 and \$ 38,791,818, respectively. The balance of the Foundation's investment commitments at June 30, 2020 and 2019, was \$ 32,618,622 and \$ 34,104,639, respectively.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

JUNE 30, 2020 and 2019

## NOTE 18 - LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The following table reflects the Foundation's financial assets as of June 30. Financial assets are considered unavailable when illiquid or not convertible to cash within one year.

	<u>2020</u>	<u>2019</u>
Financial assets		
Cash and cash equivalents	\$ 9,505,317	\$ 6,714,900
Accounts receivable and prepaid expenses	22,509	25,465
Pledges receivable, net	16,890,517	17,002,650
Investments	176,587,943	170,211,195
Assets held under split-interest agreements	1,429,012	1,406,107
Beneficial interests in trusts	2,422,781	2,458,195
Beneficial interest in split-interest agreements	357,751	360,451
Financial assets at year-end	207,215,830	198,178,963
Less amounts unavailable for general		
expenditure within one year, due to:		
Pledges receivable, collectible beyond one year	(12,476,648)	(13,640,838)
Assets held under split-interest agreements, not		
convertible to cash within one year	(1,429,012)	(1,406,107)
Beneficial interest in trusts, not convertible to		
cash within one year	(2,396,813)	(2,442,792)
Beneficial interest in split-interest agreements,		
not convertible to cash within one year	(357,751)	(360,451)
Purpose restrictions	(27,482,605)	(24,557,804)
Endowment fund investments	(151,372,576)	(144,350,035)
Add back: estimated spending distribution	1,924,099	1,888,793
Financial assets available to meet cash needs		
for general expenditure within one year	<u>\$ 13,624,524</u>	<u>\$ 13,309,729</u>

The Foundation has a policy to manage its liquidity and reserves following three guiding principles: operating within a prudent range of financial stability, maintaining adequate liquidity to fund near-term operations, and maintaining sufficient reserves to provide reasonable assurance that long-term obligations will be discharged.