ROBERT R. MCCORMICK FOUNDATION

Form 990-T for the Year Ended December 31, 2021

Public Disclosure Copy

Form 990-	г	E	OMB No. 1545-0047		
		or cal	(and proxy tax under section 6033(e)) endar year 2021 or other tax year beginning , and ending		2021
Department of the T Internal Revenue Se	Freasury		► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)).	Open to Public Inspection for 501(c)(3) Organizations Only
A Check t address	oox if s changed.		Name of organization (Check box if name changed and see instructions.)	DEmpl	oyer identification number
B Exempt under	er section P	rint	ROBERT R. MCCORMICK FOUNDATION		36-3689171
X 501(c)(408(e)		or ype	Number, street, and room or suite no. If a P.O. box, see instructions. 205 N. MICHIGAN AVENUE, 4300		o exemption number nstructions)
408A [529(a) [530(a) 529A		City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60601	F	Check box if
			ok value of all assets at end of year 1,700,505,099.		an amended return.
			X 501(c) corporation 501(c) trust 401(a) trust Other trust		
	ing only to		Claim credit from Form 8941 Claim a refund shown on Form 2439		. —
-			ation filing a consolidated return with a 501(c)(2) titleholding corporation		
			ed Schedules A (Form 990-T)		1
If "Yes," e	nter the name	e and	e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? d identifying number of the parent corporation.		Yes X No
				630-26	0-8127
			d Business Taxable Income		
			s taxable income computed from all unrelated trades or businesses (see		7,095,056.
instructi	-1			1	7,095,050.
2 Reserve				2	7,095,056.
				3	1,773,514.
			see instructions for limitation rules) STMT 1 STMT 2	4	5,321,542.
			axable income before net operating losses. Subtract line 4 from line 3		5,521,542.
	•		ng loss. See instructions	6	
	unrelated bu t line 6 from l		s taxable income before specific deduction and section 199A deduction.	7	5,321,542.
			ally \$1,000, but see instructions for exceptions)	8	1,000.
				9	_,
			luction. See instructions nes 8 and 9	10	1,000.
			ble income. Subtract line 10 from line 7. If line 10 is greater than line 7,		_,
enter ze		ιαλά		11	5,320,542.
	ax Compu	itati	on		-,,
			corporations Multiply Part L line 11 by 21% (0.21)	▶ 1	1,117,314.
			Ites. See instructions for tax computation. Income tax on the amount on	·	, ,
	ne 11 from:	Γ	Tax rate schedule or Schedule D (Form 1041)	2	
	ax. See instru	uctior		3	
-	x amounts. S			4	
	ve minimum			5	
			cility income. See instructions	6	
			1 6 to line 1 or 2, whichever applies	7	1,117,314.
LHA For Pa	perwork Red	ducti	on Act Notice, see instructions.		Form 990-T (2021)

123701 07-06-22

	90-T (2021)		F	2 age
Part				
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a 0.			
b	Other credits (see instructions) SEE STATEMENT 3 1b 850.			
С	General business credit. Attach Form 3800 (see instructions)			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
е	Total credits. Add lines 1a through 1d	1e		850.
2	Subtract line 1e from Part II, line 7	2 1	L,116,	464.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 8697 Form 8866			
4	Total tax. Add lines 2 and 3 (see instructions).	3		
4		4	L,116,	464
F	Section 1294. Enter tax amount here		.,,	0.
5	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 Payments: A 2020 overpayment credited to 2021 6a 452,611.	5		<u> </u>
6a				
b				
с.	Tax deposited with Form 8868 6c			
d	Foreign organizations: Tax paid or withheld at source (see instructions)			
e	Backup withholding (see instructions) 6e 9			
f	Credit for small employer health insurance premiums (attach Form 8941)			
g	Other credits, adjustments, and payments:			
_	□ Form 4136 Other Total ► 6g	_	750	611
7	Total payments. Add lines 6a through 6g	7	/52,	611.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached	8	262	050
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9	363,	853.
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		
11 Dort	Enter the amount of line 10 you want: Credited to 2022 estimated tax Refunded	11		
Part			1	
1	At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a			
	foreign trust?			X
	If "Yes," see instructions for other forms the organization may have to file.			
3	Enter the amount of tax-exempt interest received or accrued during the tax year			
4	Enter available pre-2018 NOL carryovers here 🕨 \$ Do not include any post-2017 NOL carr	-		
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part	I, line 4.		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce			
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		_	
	Business Activity Code Available post-2017 NOL ca	arryover	_	
	\$		_	
	\$			
6a	Did the organization change its method of accounting? (see instructions)			X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No,"			
	explain in Part V			
Part	V Supplemental Information			

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

Sign Here	correct, and complete. Declaration of preparer (other the second	nan taxpayer) is based on all info	taxpayer) is based on all information of which preparer has any knowledge. CFO AND TREASURER Date Title			the pr	May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No	
	Print/Type preparer's name	Preparer's signature		Date	Check	if	ctions)? X Yes No PTIN	
Paid Preparer	BRIDGET T. ROCHE	Bridget 7	Roche	11/15/202	2 ^{self- employe}	ed	P00666837	
Use Only	Firm's name FGRANT THORNTON L	LP Ø			Firm's EIN		36-6055558	
,	171 N. CLARK							
	Firm's address 🕨 CHICAGO, IL 6	Phone no. 312-856-0200						
123711 01-31-2	2						Form 990-T (2021)	
		8	8					

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(Rev. January 2022)

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

Department of the Treasury Internal Revenue Service

File a separate application for each return.

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

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	Name of exempt organization or other filer, see instru	Taxpayer identification number (TIN)			1)				
print	ROBERT R. MCCORMICK FOUNDATION 36-36								
File by the due date f filing your	or Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.		50-50	09171			
return. Se		oreign addi	ress, see instructions.						
Enter th	ne Return Code for the return that this application is for (fil	e a separa	e application for each return)	<u></u>	<u></u>	0	7		
Applica	ation	Return	Application			Retu	Jrn		
ls For		Code	Is For			Cod	de		
Form 9	90 or Form 990-EZ	01	Form 1041-A			80	3		
Form 4	720 (individual)	03	Form 4720 (other than individual)			09)		
Form 9	90-PF	04	Form 5227			10)		
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	<u> </u>		
Form 9	90-T (trust other than above)	06	Form 8870			12	2		
Form 9	90-T (corporation) KIM TYLER	07							
 If the If thi box 1 1 the 2 If 2 If 1 	the tax year entered in line 1 is for less than 12 months, c	Group Exe and atta NOVEMBE anization's , an heck reaso	mption Number (GEN) ch a list with the names and TINs of R 15, 2022 , to file return for: d ending on: Initial return	f this is fo all membe	r the whole ers the ext npt organiz 	e group, check tl	his		
	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.), enter the	tentative tax, less	3a	\$	327,5	77		
-	this application is for Forms 990-PF, 990-T, 4720, or 6069		refundable credits and	30	Ψ		• • •		
	stimated tax payments made. Include any prior year overp			3b	\$	452,6	11.		
_	alance due. Subtract line 3b from line 3a. Include your pa				- 7	,			
	sing EFTPS (Electronic Federal Tax Payment System). See	•		3c	\$		Ο.		
Caution instruct	n: If you are going to make an electronic funds withdrawal ions.	(direct det	bit) with this Form 8868, see Form 84		d Form 887				
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ctions.		Form	1-20 Rev. 1-20	022)		

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FORM 990-T	CONTRIBUTIONS	STATEMENT 1
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
SUBJECT TO 25% LIMIT	N/A	45,190,121.
TOTAL TO FORM 990-T, PART I, L	INE 4	45,190,121.

FORM 990-T CONTRIBUTIONS SUMMARY		STATEMENT 2
QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT	45,190,121	
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS FOR TAX YEAR 2016 FOR TAX YEAR 2017 FOR TAX YEAR 2018 FOR TAX YEAR 2019 FOR TAX YEAR 2020 TOTAL CARRYOVER TOTAL CURRENT YEAR 10% CONTRIBUTIONS		
TOTAL CONTRIBUTIONS AVAILABLE TAXABLE INCOME LIMITATION AS ADJUSTED	45,190,121 1,773,514	_
EXCESS CONTRIBUTIONS EXCESS 100% CONTRIBUTIONS TOTAL EXCESS CONTRIBUTIONS	43,416,607 0 43,416,607	_
ALLOWABLE CONTRIBUTIONS DEDUCTION		- 1,773,514
TOTAL CONTRIBUTION DEDUCTION		1,773,514

36-3689171

FORM 990-T	OTHER CREDITS	STATEMENT	3
DESCRIPTION		AMOUNT	
FOREIGN TAX CREDIT			850.
TOTAL TO FORM 990-T, P	PAGE 2, PART III, LINE 1B		850.

SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

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

OMB No. 1545-0047

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ZUZI Open to Public Inspection for

501(c)(3) Organizations Only

Α	Name of the organization	B Employer identification number						
	ROBERT R. MCCORMICK FOUNDATION		36-3689171					
С	Unrelated business activity code (see instructions) > 901101	D	Sequence:	1	of	1		

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

Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a b	Gross receipts or sales c Balance ►	1c			
2	Cost of goods sold (Part III, line 8)	2			
3 4 a	Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Sch D (Form 1041 or Form	3			
b	1120)). See instructions Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4a 4b	3,116,872.		3,116,872.
с	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 4	5	4,126,794.		4,126,794.
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12			
13	Total. Combine lines 3 through 12	13	7,243,666.		7,243,666.

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

1	Compensation of officers, directors, and trustees (Part X)			. 1	
2	Salaries and wages			2	
3	Repairs and maintenance				
4	Bad debts			4	
5	Interest (attach statement). See instructions	STA	TEMENT 5	. 5	111,644.
6	Taxes and licenses			6	9,516.
7	Depreciation (attach Form 4562). See instructions	7			
8	Depreciation (attach Form 4562). See instructions Less depreciation claimed in Part III and elsewhere on return	8a		8b	
9	Depletion			9	
10	Contributions to deferred compensation plans				
11	Employee benefit programs			. 11	
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement) SEE	STA	TEMENT 6	. 14	27,450.
15	Total deductions. Add lines 1 through 14			15	148,610.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	Part	I, line 13,		
	column (C)			16	7,095,056.
17	Deduction for net operating loss. See instructions			. 17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16				7,095,056.
LHA	For Paperwork Reduction Act Notice, see instructions.			Schedule A	(Form 990-T) 2021

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Schedu	ule A (Form 990-T) 2021				Page 2
Part		hod of inventory valua	tion 🕨		9
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter				
9 Part	Do the rules of section 263A (with respect to property				Yes No
			-		
1	Description of property (property street address, city, s	state, ZIP code). Check	a if a dual-use. See instri	uctions.	
	A				
	B				
	B	Α	В	С	D
2	Rent received or accrued		5		
- a	From personal property (if the percentage of				
u	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
с	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here	and on Part I, line 6, co	blumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through D. Er		line 6, column (B)	>	0.
Part '	(5				
1	Description of debt-financed property (street address,	city, state, ZIP code). (Check if a dual-use. See	instructions.	
	B				
	C				
	B []	Α	В	С	D
2	Gross income from or allocable to debt-financed	<u> </u>			
2	property				
3	Deductions directly connected with or allocable				
•	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b,				
-	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5		%	%	%
7	Gross income reportable. Multiply line 2 by line 6				`
8	Total gross income (add line 7, columns A through D)		urt I, line 7, column (A)		0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A the				0.
11	Total dividends-received deductions included in line	9 10			0.
123721 0	11-28-22			Schedule A	(Form 990-T) 2021
		93			

Sched Part	ule A (Form 990-T) 2021 VI Interest, Annu	uities Ro	ovalties, and Re	ents fror	m Control	led Or	ganization	S (s	ee instruct	ions)		Page 3
1 411							Exempt Contro	(,		
	1. Name of controller organization	d	2. Employer identification number			al of specified nents made tion's gross included		art of colur s included rolling orga	6. Deductions dir connected wit		Deductions directly connected with come in column 5	
(1)												
(2)												
(3)												
(4)												
			No	nexempt (Controlled O	rganizati	ons					
7	7. Taxable Income	in	Net unrelated Icome (loss) e instructions)		otal of specif lyments mad		10. Part of that is inconstruction of the controlling gross	luded	in the zation's		con	ductions directly nected with e in column 10
(1)												
(2)												
(3)												
(4)												
	Add columns 5 and 10. Enter here and on Part I, line 8, column (A)					n Part I,	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)					
Totals				·····	() (/=)	<u> </u>			٥.			0.
Part			of a Section 50	1(c)(7), (-	nization _{(s}	ee inst	tructions)			
	1. Desc	cription of	income		2. Amou incor		3. Deduction directly connection (attach stater	ected	4. Set- (attach st		ent)	5. Total deductions and set-asides (add cols 3 and 4)
(1)												
(2)												
(3)												
<u>(4)</u>	Add amounts in column 2. Enter here and on Part I, line 9, column (A)							Add amounts in column 5. Enter here and on Part I, line 9, column (B)				
Totals				>		0.	-					0.
Part			ctivity Income,	, Other 1	Than Adve	ertising	g Income	(see in	structions)			
1	Description of exploite											
2	Gross unrelated busin									2		
3	3 Expenses directly connected with production of unrelated busine											
line 10, column (B)									3			
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 4												
-										4		
5	Gross income from ac									5		
6 7	Expenses attributable									6		
7	Excess exempt expen									-		
	4. Enter here and on F	art II, IINE	12							7		

Schedule A (Form 990-T) 2021

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	ule A (Form 990-T) 2021					Page 4
Part	U					
1	Name(s) of periodical(s). Check box if reportin	ng two or r	more periodicals on	a consolidated basis	S.	
	A					
	В					
	c					
	D					
Enter a	amounts for each periodical listed above in the	correspon	iding column.			
			Α	В	C	D
2						
	Add columns A through D. Enter here and or	n Part I, line	e 11, column (A)		►	0.
а		ſ				
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and or	n Part I, line	e 11, column (B)		►	0.
		ſ				
4	Advertising gain (loss). Subtract line 3 from li	ne				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column i					
	line 4 showing a loss or zero, do not complet					
5						
6						
7	Excess readership costs. If line 6 is less than					
	line 5, subtract line 6 from line 5. If line 5 is le					
8	Excess readership costs allowed as a					
а						٥
Part	Part II, line 13	rectore	and Trustoos	······		υ.
Γαιι	X Compensation of Onicers, Di		and musices	(see instructions)	2 Dereentere	1 Componentian
	1 Nama				-	
	I. Name		2. Ittle			
(1)						
(2)						
(3)						
(4)						
<u>(=)</u>					/0	
Total	Enter here and on Part II, line 1					0.
Part	XI Supplemental Information (se	ee instructi	ions)			
		A through D. Enter here and on Part I, line 11, column (A) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter here and on Part I, line 11, column (B) A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, columns total or zero here and on A through D. Enter the greater of the line 8a, colu				

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ROBERT R. MCCORMICK	FOUNDATION	36-3689171
FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 4
DESCRIPTION		NET INCOME OR (LOSS)
PARTNERSHIP INVESTME	NTS - ORDINARY BUSINESS INCOME (LOSS)	4,126,794.
TOTAL INCLUDED ON SC	HEDULE A, PART I, LINE 5	4,126,794.
FORM 990-T (A)	INTEREST PAID	STATEMENT 5
DESCRIPTION		AMOUNT
INTEREST EXPENSE FRO	М К-1'S	111,644.
TOTAL TO SCHEDULE A,	PART II, LINE 5	111,644.
FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 6
DESCRIPTION		AMOUNT
TAX PREPARATION FEES		27,450.
TOTAL TO SCHEDULE A,	PART II, LINE 14	27,450.

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

ZUZ I

Employer identification number

36-3689171

ROBERT	R.	MCCORMICK	FOUNDATION	

Did the corporation dispose of any investme	nt(s) in a qualified opportun	ity fund during the tax ye	ear?		► Yes X No
If "Yes," attach Form 8949 and see its instru					
Part I Short-Term Capital Ga	ins and Losses - Ass	ets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 894	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (g)	result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	305,416.				305,416.
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kin	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comput				6	()
7 Net short-term capital gain or (loss). Combin Part II Long-Term Capital Gai	e lines 1a through 6 in column	h	• • • •	7	305,416.
	ns and Losses - Asse	ets Held More Thar	n One Year		r
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89- Part II, line 2, column (49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked	2,178,046.				2,178,046.
	, , ,			11	633,410.
12 Long-term capital gain from installment sales	from Form 6252 line 26 or 37	,		12	,
13 Long-term capital gain or (loss) from like-kin				13	
14. Operited and all statisticates	-			14	
15 Net long-term capital gain or (loss). Combine				15	2,811,456.
Part III Summary of Parts I and	e lines 8a through 1/ in column	۱h			
		۱h		15	, , ,
16 Enter excess of net short-term canital gain (lin	d II				
16 Enter excess of net short-term capital gain (lin 17 Net capital gain, Enter excess of net long-term	d II ne 7) over net long-term capita	loss (line 15)		16	305,416.
 16 Enter excess of net short-term capital gain (liii) 17 Net capital gain. Enter excess of net long-term 18 Add lines 16 and 17. Enter here and on Form 	d II ne 7) over net long-term capita n capital gain (line 15) over net	loss (line 15) short-term capital loss (line	;7)		

Note: If losses exceed gains, see Capital Losses in the instructions.

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

Schedule D (Form 1120) 2021

121051 12-17-21



Name(s) shown on return

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074	
2021	

Attachment Sequence No. **12A**

Social security number or taxpayer identification no.

ROBERT R. MCCORMICK I	FOUNDATION					36-36	589171
Before you check Box A, B, or C bel statement will have the same inform broker and may even tell you which	ow, see whether ation as Form 109	you received any 99-B. Either will s	/ Form(s) 1099-B o show whether your	r substitute statem basis (usually you	ent(s) from r cost) was	your broker. A su reported to the IR	bstitute S by your
Part I Short-Term. Transact		al assets you held	1 year or less are ger	nerally short-term (see	e instructions	s). For long-term	
transactions, see page 2. Note: You may aggregate al codes are required. Enter the	I short-term transac	tions reported on I	Form(s) 1099-B show	ing basis was reporte	d to the IRS	and for which no ad	
You must check Box A, B, or C below.	Check only one bo	x. If more than one b	ox applies for your short	-term transactions, comp	lete a separate	e Form 8949, page 1, for	
If you have more short-term transactions than wi							
(B) Short-term transactions re			-		Note abo	jvej	
\mathbf{X} (C) Short-term transactions no							
				(0)	Adjustmen	t, if any, to gain or	(b)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other	loss. If yo	où enter an amount	(h) Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the		(g), enter a code in . See instructions.	Subtract column (e)
	((Mo., day, yr.)		Note below and	(f)	(g)	from column (d) &
				see Column (e) in the instructions	Code(s)	Amount of	combine the result with column (g)
FROM LP'S	VADIOUG	MARTONG	205 416			adjustment	(=)
FROM LP S	VARIOUS	VARIOUS	305,416.				305,416.
2 Totals. Add the amounts in colu	$\frac{1}{2}$	l nd (b) (subtract					
negative amounts). Enter each to							
Schedule D, line 1b (if Box A abo		-					
above is checked), or line 3 (if B			305,416.				305,416.
Note: If you checked Box A above b				r in column (e) the	hasis as re	eported to the IPS	
adjustment in column (g) to correct				. ,		•	

Form 8949 (2021)				Attachm	nent Sequen	_{ce No.} 12A	Page 2
Name(s) shown on return. Name and	I SSN or taxpaye	er identification no	o. not required if s			Social secur	ity number or ntification no.
ROBERT R. MCCORMICK F	OUNDATION					36-3	589171
Before you check Box D, E, or F belo statement will have the same informa	w, see whether y tion as Form 109	you received any 99-B. Either will s	Form(s) 1099-B o how whether you	r substitute statem ⁻ basis (usually you	ent(s) from y r cost) was re	our broker. A su eported to the IF	bstitute S by your
broker and may even tell you which b Part II Long-Term. Transaction see page 1.	oox to check. ons involving capita	al assets you held m	nore than 1 year are	generally long-term (s	ee instructions	s). For short-term t	ransactions,
Note: You may aggregate all codes are required. Enter the							
You must check Box D, E, or F below. C If you have more long-term transactions than will	heck only one bo	x. If more than one bo	ox applies for your long-	term transactions, compl	ete a separate Fo	orm 8949, page 2, for e	
(D) Long-term transactions rep					-		
(E) Long-term transactions rep		,	, ,			-,	
X (F) Long-term transactions not							
1 (a)	(b)	(c)	(d)	(e)		if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other		enter an amount), enter a code in	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the Note below and	column (f).	See instructions.	Subtract column (e) from column (d) &
		(Mo., day, yr.)		see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	combine the result with column (g)
FROM LP'S	VARIOUS	VARIOUS	2,178,046.				2,178,046.
					-		
2 Totals. Add the amounts in colum	nns (d), (e). (a). a	nd (h) (subtract					
negative amounts). Enter each to							
Schedule D, line 8b (if Box D abo		2					
above is checked), or line 10 (if B	lox F above is ch	necked)	2,178,046.				2,178,046.
Note: If you checked Box D above b							
adjustment in column (g) to correct t	ne basis. See C	olumn (g) in the s	eparate instructio	ons for how to figur	e the amoun		
123012 12-14-21						F	orm 8949 (2021)

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⁹⁹ 2021.05000 ROBERT R. MCCORMICK FOUND 01789221

Form	4	7	9	7	
Form	4	1	9	7	

Department of the Treasury Internal Revenue Service Name(s) shown on return

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No.	1545-0184

27 Seauence No Identifying number

		, ,
ROBERT R. MCCORMICK FOUNDATION		36-3689171
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20	1 a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS	10	

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)

					(300 1131140101					
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or oth basis, plus improvements a expense of sal	nd	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)		
SEC	TION 1231 GAIN FROM LP'S	GAIN FROM LP'S VARIOUS VARIOUS 633,410.								
								633,410.		
3	Gain, if any, from Form 4684, line 39			· · · · · · · · · · · · · · · · · · ·			3			
4	Section 1231 gain from installment sa						4			
5	Section 1231 gain or (loss) from like-k						5			
6	Gain, if any, from line 32, from other t						6			
7	Combine lines 2 through 6. Enter the						7	633,410.		
•	Partnerships and S corporations. F	•	-					,		
	line 10, or Form 1120-S, Schedule K,		· / ·							
	Individuals, partners, S corporation				loss enter the am					
	from line 7 on line 11 below and skip									
	1231 losses, or they were recaptured									
	the Schedule D filed with your return	and skip lines 8,	9, 11, and 12 b	elow.						
8	Nonrecaptured net section 1231 loss	es from prior vez	ars. See instructi	ons			8			
9	Subtract line 8 from line 7. If zero or le						Ū			
Ũ	line 9 is more than zero, enter the am	,	,	Ũ						
	capital gain on the Schedule D filed w			•		g	9	633,410.		
		•				·····		1		
Pa	rt II Ordinary Gains and I	LOSSES (see in	structions)							
10	Ordinary gains and losses not includ	led on lines 11 th	nrough 16 (inclue	de property held 1	year or less):					
11	Loss, if any, from line 7	•				·	11	()		
12	• · · · · · · · · · · · · · · · · · · ·						12			
13							13			
14	Net gain or (loss) from Form 4684, lin					····· –	14			
15	Ordinary gain from installment sales f						15			
16	Ordinary gain or (loss) from like-kind e						16			
17							17			
	For all except individual returns, enter			appropriate line of						
	•				, can recarriand of					
2	a and b below. For individual returns, complete lines a and b below. a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the									
a	loss from income-producing property									
	as an employee.) Identify as from "Fo						18a			
h	Redetermine the gain or (loss) on line						.54			
5							18b			
<u> </u>	A For Paperwork Reduction Act No						00	Form 4797 (2021)		
		ouoo, 300 30µai	are mou dodoni							

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118011 12-17-21

14231111 153424 0178922-00038

Page 2

9	(a) Description of section 1245, 1250, 1252, 1254, c	or 1255	oroperty:			(b) Date acqu		(c) Date solo
		1200	oroperty.			(mo., day, yı	.)	(mo., day, yr.
<u>A</u>								
B								
C D								
	These columns valets to the sysmetrics on							
	These columns relate to the properties on lines 19A through 19D.		Property A	Property	R	Property	C	Property
	Gross sales price (Note: See line 1a before completing.)	20	Froperty A	Froperty	-	Froperty	<u> </u>	Froperty
	Cost or other basis plus expense of sale	20						
	Depreciation (or depletion) allowed or allowable	22						
	Adjusted basis. Subtract line 22 from line 21	23						
	Total gain. Subtract line 23 from line 20	24						
	If section 1245 property:						<u> </u>	
	Depreciation allowed or allowable from line 22	25a						
	Enter the smaller of line 24 or 25a	25b						
6	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions	26a						
	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
	Additional depreciation after 1969 and before 1976	26d						
	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage	27b						
	Enter the smaller of line 24 or 27b	27c						
а	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
	Enter the smaller of line 24 or 28a	28b						
9 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
	Enter the smaller of line 24 or 29a. See instructions	29b						
	mary of Part III Gains. Complete property c		A through D through	line 29h hefore	aoina ta	line 30	ł_	
	Total gains for all properties. Add property columns						30	
-		, , , , , , , , , , , , , , , , , , , ,	9					
1	Add property columns A through D, lines 25b, 26g,	27c, 28	b, and 29b. Enter he	re and on line 13			31	
2	Subtract line 31 from line 30. Enter the portion from	casualt	y or theft on Form 46	684, line 33. Ente	er the po	ortion		
	from other than casualty or theft on Form 4797, line	6	<u></u>	<u></u>	<u></u> .	<u></u>	32	
Pai	t IV Recapture Amounts Under Sectio (see instructions)	ns 179) and 280F(b)(2)	When Busin	ess U	se Drops to) 50% c	or Less
						(a) Sectio 179	n	(b) Sectior 280F(b)(2)
3	Section 179 expense deduction or depreciation allo	wable ir	prior years		33			
4	Recomputed depreciation. See instructions				34			

$14231111 \ 153424 \ 0178922-00038$

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

ZUZ I

Employer identification number

36-3689171

ROBERT	R.	MCCORMICK	FOUNDATION

Did the corporation dispose of any investme If "Yes," attach Form 8949 and see its instru					► Yes X No
Part I Short-Term Capital Ga	-		-		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part I, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
round off cents to whole dollars.	(sales price)			(9)	result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	305,416.				305,416.
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kin	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comput	ation)			6	()
7 Net short-term capital gain or (loss). Combin	e lines 1a through 6 in column	<u>h</u>		7	305,416.
Part II Long-Term Capital Gai	ins and Losses - Asse	ets Held More Tha	n One Year		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked	2,178,046.				2,178,046.
11 Enter gain from Form 4797, line 7 or 9				11	633,410.
12 Long-term capital gain from installment sales	s from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine	e lines 8a through 14 in column	ıh		15	2,811,456.
Part III Summary of Parts I and	d II				
16 Enter excess of net short-term capital gain (li	ne 7) over net long-term capital	loss (line 15)		16	305,416.
17 Net capital gain. Enter excess of net long-tern				17	2,811,456.
18 Add lines 16 and 17. Enter here and on Form				18	3,116,872.
Note: If losses exceed gains, see Capital Los					

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

Schedule D (Form 1120) 2021

121051 12-17-21



Name(s) shown on return

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074	
2021	

Attachment Sequence No. **12A**

Social security number or taxpayer identification no.

ROBERT R. MCCORMICK I	FOUNDATION					36-36	689171
Before you check Box A, B, or C bel statement will have the same inform broker and may even tell you which b	box to check.		-				bstitute IS by your
Part I Short-Term. Transact	ions involving capit	al assets you held	1 year or less are ger	nerally short-term (see	e instructions). For long-term	
transactions, see page 2. Note: You may aggregate al codes are required. Enter the	e totals directly on S	Schedule D, line 1a	; you aren't required	to report these trans	actions on Fo	orm 8949 (see instru	ctions).
You must check Box A, B, or C below. If you have more short-term transactions than wi							each applicable box.
(A) Short-term transactions re					-		
(B) Short-term transactions re	ported on Form(s	s) 1099-B showin	g basis wasn't re	ported to the IRS			
X (C) Short-term transactions no	ot reported to you	<u>u on Form 1099-I</u>	3				
1 (a)	(b)	(c)	(d)	(e)		t, if any, to gain or ou enter an amount	(h)
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other basis. See the	in column	(g), enter a code in	Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(00.00 p. 00)	Note below and		See instructions.	from column (d) &
		(Mo., day, yr.)		see <i>Column (e)</i> in the instructions	(f) Code(s)	(g) Amount of	combine the result with column (g)
FROM LP'S	VARIOUS	WARTONG	205 416	the instructions	0000(0)	adjustment	,
FROM LP S	VARIOUS	VARIOUS	305,416.				305,416.
							ļ
							ļ
2 Totals. Add the amounts in colu	mns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to							
Schedule D, line 1b (if Box A abo							
above is checked), or line 3 (if B			305,416.	<u> </u>			305,416.
Note: If you checked Box A above adjustment in column (g) to correct				. ,			

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Forn	n 8949 (2021)				Attachm	nent Sequend	ce No. 12A	Page 2
Nam	ne(s) shown on return. Name and	I SSN or taxpaye	er identification n	o. not required if s			Social secur	ity number or ntification no.
	ROBERT R. MCCORMICK F	OUNDATION					36-36	689171
Befc state	pre you check Box D, E, or F belo ement will have the same informa	w, see whether ation as Form 10	you received any 99-B. Either will s	r Form(s) 1099-B o show whether you	r substitute statem basis (usually you	ent(s) from ye r cost) was re	our broker. A sub eported to the IF	bstitute IS by your
	rer and may even tell you which b Long-Term. Transaction see page 1.		al assets you held r	nore than 1 year are	generally long-term (s	ee instructions	s). For short-term ti	ransactions,
	Note: You may aggregate all codes are required. Enter the	e totals directly on a	Schedule D, line 8a	a; you aren't required	to report these trans	actions on For	m 8949 (see instru	ctions).
	must check Box D, E, or F below. C have more long-term transactions than will							each applicable box.
Ĺ] (D) Long-term transactions rep					-		
	(E) Long-term transactions rep	orted on Form(s) 1099-B showin	g basis wasn't re	ported to the IRS			
X	(F) Long-term transactions not	reported to you	on Form 1099-E	3	I			
1	(a)	(b)	(c)	(d) Proceeds	(e) Cost or other		if any, to gain or enter an amount	(h) Gain or (loss).
	Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	Date sold or disposed of	(sales price)	basis. See the	in column (g), enter a code in See instructions .	Subtract column (e)
		(1101, ady, 91.)	(Mo., day, yr.)		Note below and	(4)	(g)	from column (d) & combine the result
					see Column (e) in the instructions	Code(s)	Amount of adjustment	with column (g)
FRO	M LP'S	VARIOUS	VARIOUS	2,178,046.			adjustment	2,178,046.
<u></u>	otals. Add the amounts in colur	$\frac{1}{2}$	l nd (h) (subtract					<u> </u>
	egative amounts). Enter each to							
	ichedule D, line 8b (if Box D abo		-					
	bove is checked), or line 10 (if E			2,178,046.				2,178,046.
	e: If you checked Box D above b stment in column (g) to correct t							
-			107					9040

123012 12-14-21

Department of the Treasury Internal Revenue Service Name(s) shown on return

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) ► Attach to your tax return. ► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No.	1545-0184

Attachment Sequence No. 27

	, ,
	36-3689171
1 a	
1b	
4.	

 Part I
 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)

					(300 11311 00101			
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or oth basis, plus improvements a expense of sal	nd	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
SEC	TION 1231 GAIN FROM LP'S	VARIOUS	VARIOUS	633,410.				633,410.
				,				,
3	Gain, if any, from Form 4684, line 39	•					3	
4	Section 1231 gain from installment sa						4	
5	Section 1231 gain or (loss) from like-k						5	
6	Gain, if any, from line 32, from other t						6	
7	Combine lines 2 through 6. Enter the						7	633,410.
•	Partnerships and S corporations. F		-					,
	line 10, or Form 1120-S, Schedule K,							
	Individuals, partners, S corporation	•			loss enter the am	ount		
	from line 7 on line 11 below and skip				,			
	1231 losses, or they were recaptured	in an earlier yea	r, enter the gain	from line 7 as a lor	ng-term capital gai	n on		
	the Schedule D filed with your return	and skip lines 8,	9, 11, and 12 be	elow.				
8	Nonrecaptured net section 1231 loss	es from prior vez	ars. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or l						<u> </u>	
Ŭ	line 9 is more than zero, enter the am	-		•				
	capital gain on the Schedule D filed w			•		·	9	633,410.
							-	,
Pa	rt II Ordinary Gains and I	LOSSES (see in	structions)					
10	Ordinary gains and losses not includ	led on lines 11 th	nrough 16 (inclue	de property held 1	year or less):			
11	Loss, if any, from line 7	•	•				11	()
	Gain, if any, from line 7 or amount fro						12	,, [
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, lin						14	
15	Ordinary gain from installment sales f						15	
16	Ordinary gain or (loss) from like-kind e						16	
17							17	
	For all except individual returns, enter							
	a and b below. For individual returns,				, ea. rotain and or			
а	If the loss on line 11 includes a loss fi	-		(b)(ii), enter that pa	t of the loss here	Enter the		
u	loss from income-producing property							
	as an employee.) Identify as from "Fo						18a	
h	Redetermine the gain or (loss) on line						.04	
5		-					18b	
IН	A For Paperwork Reduction Act No				<u></u>			Form 4797 (2021)
		,						

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(a) Description of section 1245, 1250, 1252, 1254	1. or 1255	property:		(b) Date acquir		(c) Date solo
-	., 01 1200	property.		(mo., day, yr.)	(mo., day, yr.
A						
B C						
D						
These columns relate to the properties on						
lines 19A through 19D.		Property A	Property B	Property	c	Property
O Gross sales price (Note: See line 1a before completing	l.) 20					
Cost or other basis plus expense of sale	21					
2 Depreciation (or depletion) allowed or allowable						
Adjusted basis. Subtract line 22 from line 21						
Total gain. Subtract line 23 from line 20	. 24					
5 If section 1245 property:						
a Depreciation allowed or allowable from line 22	. 25a					
b Enter the smaller of line 24 or 25a	. 25b					
6 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.						
a Additional depreciation after 1975. See instructions	. 26a					
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b					
c Subtract line 26a from line 24. If residential renta property or line 24 isn't more than line 26a, skip lines 26d and 26e						
d Additional depreciation after 1969 and before 1976						
e Enter the smaller of line 26c or 26d	26e					
f Section 291 amount (corporations only)	. 26f					
g Add lines 26b, 26e, and 26f						
7 If section 1252 property: Skip this section if you didr dispose of farmland or if this form is being completed f a partnership.	or					
a Soil, water, and land clearing expenses						
b Line 27a multiplied by applicable percentage						
c Enter the smaller of line 24 or 27b	. 27c					
 a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, 						
mining exploration costs, and depletion. See instruction						
 b Enter the smaller of line 24 or 28a J If section 1255 property: 	. 28b					
 a Applicable percentage of payments excluded from income under section 126. See instructions 	29a					
b Enter the smaller of line 24 or 29a. See instructions	29b					
ummary of Part III Gains. Complete propert	y columns	A through D through	n line 29b before goi	ng to line 30.		
D Total gains for all properties. Add property colum	ns A throu	igh D, line 24			30	
Add property columns A through D, lines 25b, 26	•				31	
2 Subtract line 31 from line 30. Enter the portion from		ty or theft on Form 46	684, line 33. Enter th	e portion		
from other than casualty or theft on Form 4797, I Part IV Recapture Amounts Under Sec	ine 6	9 and 280E(b)(2)	When Busines	s Use Drops to	32 50% c	rlass
(see instructions)			When Dusines.		JU /0 C	
				(a) Section 179		(b) Sectior 280F(b)(2)
3 Section 179 expense deduction or depreciation a	allowable in	n prior years		3		
				4		
Recomputed depreciation. See instructions			_	·		

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