Form 990

Return of Organization Exempt From Income Tax

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

2023

Open to Public

Department of the Treasury

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

OMB No. 1545-0047

A	For th	e 2023 calen	dar year, or tax year begin	ning				- Maria	inspection
В		f applicable:	C	, 202	3, and endin	ig			, 20
		dress change	PARTY AND THE STREET STREET, STREET STREET, ST	D MIID INITIADOTES			100		ntification number
			OF TORONTO, INC.	OF THE UNIVERSITY					2038
		me change	158 WEST 84TH STREET 2F						
		tial return	NEW YORK, NY 100	124			(91	7)	608-2750
	\vdash	al return/terminated							
		nended return				a menuleari e	G Gross r		
	Ap	plication pending	F Name and address of principa	officer: Paul Cadario			a group return		bordinates? Yes X No
_			Same As C Above			H(b) Are all	subordinates attach a list	includ See ii	ded? Yes No
<u></u>	W. Contraction	exempt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527			. 000 11	mad doubles,
1	179000000		undless.utoronto	.ca/contact-us		H(c) Group	exemption no	ımber	
K		of organization:	X Corporation Trust	Association Other	Year of format	ion: 194'	7 Ms	tate of	f legal domicile: NY
Pê	rt I	Summar	У						
	1	Briefly describ	be the organization's mission	on or most significant activities: Th	ne Organ	izatio	n's mi	ssi	on is to
e		accept d	onations from so	urces within the Unite	d State	s for	the be	nef.	it of the
Jan		universi	ty of Toronto, O	<u>ntario, Canada</u>					
Jerr /	2	Check this bo		,					
Governance	2			n discontinued its operations or disp ning body (Part VI, line 1a)	osed of mor	e than 25	% of its no		sets.
∘ઇ		Number of inc	dependent voting members	of the governing body (Part VI, line	1b)	• • • • • • • •		3	6
ijes	5	Total number	of individuals employed in	calendar year 2023 (Part V, line 2a	3)			5	6
Activities &	6	Total number	of volunteers (estimate if r	necessary)				6	0
Ac	7a	Total unrelate	ed business revenue from F	Part VIII, column (C), line 12				7a	
	b	Net unrelated	business taxable income f	rom Form 990-T, Part I, line 11				7b	
						P	rior Year		Current Year
ē	8	Contributions	and grants (Part VIII, line	1h)		. 2	, 252, 2	15.	2,915,156.
Revenue	9	Program serv	ice revenue (Part VIII, line	2g)					
ě	10	Other revenue	come (Part VIII, column (A), lines 3, 4, and 7d)		•	1,4	20.	8,320.
	11	Total revenue	e (Part VIII, column (A), IIn	es 5, 6d, 8c, 9c, 10c, and 11e)		A CONTRACTOR OF THE PARTY OF TH		15.	
3	13	Cranta and ai	- aud lines & through 11	(must equal Part VIII, column (A), I	ine 12)		,253,6	-	
	14	Popofite poid	to or for mambara (Part IV	X, column (A), lines 1-3)	********	. 3	,267,8	23.	3,217,436.
	15	Solorina etha	to or for members (Part IX	, column (A), line 4)					
es				benefits (Part IX, column (A), lines					
Expenses				olumn (A), line 11e)					
X			ing expenses (Part IX, colu		1,043.			344	And the state of t
				nes 11a-11d, 11f-24e)			12,1	04.	12,731.
				equal Part IX, column (A), line 25).			,279,9		
	19	Revenue less	expenses. Subtract line 18	3 from line 12			,026,2		
Assets or		- Carlo Cinness Verdu				Beginnin	g of Curren	t Year	
Salar	20						810,1		503,787.
ot A						*	2,3	01.	2,602.
Fund				ne 21 from line 20			807,8	76.	501,185.
Pa	rt II	Signatur	e Block					100	
Unde	r penaltie	es of perjury, I decl	are that I have examined this return,	including accompanying schedules and statement all information of which preparer has any know	ts, and to the bes	t of my knowle	edge and belie	ef, it is	true, correct, and
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 /	Ter (other train direct) is based on	an information of which preparer has any know	neage.				
٥.	estera i	sichalla d	oficer / K		June	17, 2024 Date			
Sig	ın		· ·						
пе	re		Aufman The Ass	ociates of the University of Toronto, Inc.	1	reasur	er		
200	шэнхэнх	1000	reparer's name	Branarada signatura	Ina		1	•	
	15.	See A Address of the Control of the		Preparer's signature	Date		Check	\ if	PTIN
Pa		PETER		PETER GILL			self-employe	ed	P00820468
	epare e Onl	l. ·		PA, LLC			100 No 1000	702040	
US	e OIII	Firm's addre				Firm's EIN 223767344			
10	. 16 . 75	00 4:	OAK RIDGE, N				Phone no.	973	3-423-4949
May	the IF	to discuss thi	s return with the preparer s	shown above? See instructions					X Yes No

_	990 (2023) THE ASSOCIATES	OF THE UNIVERSITY	13-6142038 Page 2
Par	Statement of Program	Service Accomplishments	
1	Priofly describe the experientials	a response or note to any line in this Part III	
L	Briefly describe the organization's mi		
	The Organization's mis	sion is to accept donations from	sources within the United
	States for the benefit	of the University of Toronto, On	tario, Canada.
2	Did the organization undertake any s	ignificant program services during the year which were	
	Form 990 or 990-EZ?	ignificant program services during the year which were	not listed on the prior
	If "Yes," describe these new services	on Schedule O	····· Yes X No
3		g, or make significant changes in how it conducts, any	program garviage?
	If "Yes," describe these changes on \$	Schedule O.	program services? Yes X No
4			program sorvices as massured by every
	Section 501(c)(3) and 501(c)(4) organ	service accomplishments for each of its three largest particular are required to report the amount of grants a	nd allocations to others, the total expenses.
	and revenue, if any, for each program	n service reported.	
	(Codo:) (European &	2 010 100 111 11	
4a	(Code:) (Expenses \$	3,218,480. including grants of \$ 3,21	.7,436.) (Revenue \$ 2,915,156.)
	the Organization collection	cted funds and contributions rece	ived by gift, deed, legacy and
	bequest from individua.	ls, corporations, estates, trusts	and foundations resident in
	the united States. The	e Organization made grants to the	University of Toronto in
	rurtherance of the Univ	versity's charitable, scientific,	_educational, literacy and
	religious_activities		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$
10875	, (moduling grants of ψ	(Vesseige 5
			
2			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$
2			
4d	Other program services (Describe on		
	(Expenses \$		(Revenue \$)
4e	Total program service expenses	3,218,480.	

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete		Yes	No
	School 71	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
	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		Х
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		X
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		
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,"	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	A	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, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		Х
b	Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total 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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	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		Х
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	
	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		X
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	Х	
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	X	100
	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		x
	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. See instructions	17		х
	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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
DAA				-

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	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	22		Х
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? <i>If "Yes," complete Schedule J.</i>	23		х
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 Schedule K. If "No," go to line 25a.	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?			16
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	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 Schedule L, Part I.	25b		Х
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.	26		Х
27	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.	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			F. (2)
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. 0
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	多擅		1
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		W	
	(gambling) winnings to prize winners?	1c	X	
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Form 990 (2023) THE ASSOCIATES OF THE UNIVERSITY

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

			Yes	No
2a	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 2a		1 / H	11,111
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes" has it filed a Form 990.T for this year? If "No" to line 3h provide an evaluation on General Provide a provide a provide an evaluation of School Provide A provide	3a		X
42	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0.	3b		. 74
40	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		Х
b	If "Yes," enter the name of the foreign country	7 14		
E-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
ba	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	11/0	Х
0	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
6a	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or sittle were	6a	-	X
	not tax deductible?	6b		
	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
0	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	0.00		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
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?			
9	Sponsoring organizations maintaining donor advised funds.	8	No.	
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		14
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	35		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			VIII EVAN
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			NEX.
	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.)		- 7	
12a	Section 4947(a)(1) non-exempt charitable trusts.ls 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 12b	Fried (Sec.)		
	Section 501(c)(29) qualified nonprofit health insurance issuers.		= 10	
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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 excess parachute payment(s) during the year?	15		х
16	It "Yes," see the instructions and file Form 4720, Schedule N.			
10	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	31,062	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		
BAA		Form	990 (2023)
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Form 990 (2023) THE ASSOCIATES OF THE UNIVERSITY 13-6142038 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..... Section 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
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. 1a 6 b Enter the number of voting members included on line 1a, above, who are independent..... 1b 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... X 5 X Did the organization have members or stockholders?.....See. Schedule .Q..... X 6 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?...See. Schedule .0..... 7a X 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 X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X X 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.... X 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If "No," go to line 13..... X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.... See. Schedule. O..... X 12c 13 X 14 Did the organization have a written document retention and destruction policy?..... 14 X 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? a The organization's CEO, Executive Director, or top management official..... X 15a X 15b If "Yes" to line 15a or 15b, describe the process on 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?..... X 16a b 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?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed None 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 only) available for public inspection. Indicate how you made these available. Check all that apply. X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records.

Gary Kaufman 58 West 84th Street, Apt 2F NY NY 10024 (917) 608-2750

Form 990 (2023) THE	ASSOCTATES	OF THE	IMTUEDCTTV
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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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)					ne an e)	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and related
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Lorraine Bell	0									
Director	0	X						0.	0.	0.
(2) Tad Brown	0		10	te .				CONTRACTOR OF THE PROPERTY OF		
Secretary	0	X		X				0.	0.	0.
_(3) Paul Cadario	0			-12		cal amble				
President	0	X		X				0.	0.	0.
(4) Gary Kaufman	0									
Treasurer	0	X		X	200			0.	0.	0.
(5) Irene Miller	0									
Director	0	X		Special Control		90		0.	0.	0.
_(6) Ken_Ottenbreit	0									
Director	0	X		i day				0.	0.	0.
(9)										
(10)									X	
(11)										
(12)							-			
(13)										
(14)										
BAA	TEEA0	107L	08/23	3/23		Eco				Form 990 (2023)

(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable	(F) Estimated amount
		Contract of the	Institutional trustee	_		Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	of other compensation from the organization and related organizations
(15)									
(16)									
(17)									and the second s
(18)			+						
(19)									
(20)			-	-					
21)				-					
(22)			-	1					100
23)					100				
24)									
25)									
1b Subtotal c Total from continuation sheets to Part VII, d Total (add lines 1b and 1c)	Section A						0. 0. 0.	0. 0.	0
2 Total number of individuals (including but r from the organization 0	not limited to thos	se list	ed ab	ove)	who r	ece	ived more than \$	100,000 of reportat	0 Die compensation
									Yes No
3 Did the organization list any former officer, on line 1a? If "Yes,"complete Schedule J fo	or such individua	1	• • • • •						з х
4 For any individual listed on line 1a, is the s the organization and related organizations such individual	sum of reportable greater than \$15	0,000	ensa? If "	tion Yes,	and of	ther olete	compensation from Schedule J for	om	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization?	accrue compens	ation	from	anv i	inrela	ted	organization or in	dividual	
Section B. Independent Contractors 1 Complete this table for your five highest co		11 155							9 1
compensation from the organization. Report	rt compensation	for the	e cale	ndar	year	end	ing with or within	the organization's	
(A) Name and busines	ss address						Description o	of services	(C) Compensation
			77		10000				
	XVIII TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO								
2 Total number of independent contractors (i		limite	d to t	nose	listed	abo	ove) who received	more than	and the second s
\$100,000 of compensation from the organiz		TEFAOI							Form 900 (202

Form 990 (2023) THE ASSOCIATES OF THE UNIVERSITY Part VIII Statement of Revenue

	-	Check if Schedul	e O	contains a	respo	nse or note to any	line in this Part VIII			
ATT THE							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र्के स	1a	Federated campaig			1a					312-314
Tal In	b	Membership dues.			1b					
P G	С	Fundraising events.			1c					
a in	d	Related organizatio	ns .		1d			" "		
s, C	е	Government grants (cont			1e					
Contributions, Gifts, Grants, and Other Similar Amounts	f	All other contributions, g similar amounts not inclu	uded	above	1f	2,915,156.				
5 5	g	Noncash contributions in lines 1a-1f	clude	ed in	1g	468,344.				
SE	h	Total. Add lines 1a-	1f		.91	400,344.	2,915,156.			CONTRACTOR .
<u>e</u>						Business Code	2,913,136.			
e e	2a								(1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
3e	b									
e	c									
Program Service Revenue	d							- William Salaman		
										- X
ran	•	All other program s								<u> </u>
5 S		Total. Add lines 2a-								
	g									4.00
	3	Investment income other similar amoun	(inc	luding divi	dends,	interest, and	0 200			
	4	other similar amounts)					8,320.	Marian Marian		8,320.
	5	Royalties				CONTROL OF THE PROPERTY OF THE				
	3	Noyallies	···	(i) Re						
	c-	Cross ranta		(1) FG	al	(ii) Personal				
	0.73	Gross rents	6a							
		Less: rental expenses	6b			N 1	有性的 化激性			
		Contraction of the second seco	6c				100			
	d	Net rental income of	r (lo							
	7a	7a Gross amount from (i) Securities (ii) Other		(ii) Other						
		sales of assets	7a							
	h	other than inventory Less: cost or other basis	Company of the Company					BARE THE		
		and sales expenses	7b							
	C	Gain or (loss)	7c							
	d	Net gain or (loss)					Name of the second seco			
0		Gross income from fundr					Malarata William Table	P 1948 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A STANKE ED DEN	With the second
nue	ou	(not including \$	aising	governo				Continue of the second		
Ne Ne		of contributions reported	on li	ne 1c).			AND WEST ST			
æ		See Part IV, line 18			8a					建一致精节
Other Reven	b	Less: direct expens			8b			STOREST TO STATE		
チ		Net income or (loss			V250000	ente				
9					Jg CV	orno,				
	Уа	Gross income from gamin See Part IV, line 19	ng ac	tivities.	9a					
	h	Less: direct expens			9b					
		Net income or (loss				oc.	AND CONTRACTOR OF THE PROPERTY			
	-				activiti	65				
	10a	Gross sales of inventory, returns and allowances	less		10a					
		Less: cost of goods			10b		the state of the s			WALL TO THE STATE OF
		Net income or (loss						(and the control of t		
	C	THE INCOME OF (1088) 110	nii sales 0	inven	Business Code				
25	11a			-		Dualitesa Code		CARRIED AND STREET		
Miscellaneous Revenue	L					and the same of th				
를	D									
S S	C	AU-44								
AIS.	555	All other revenue			310,000					
	513	Total. Add lines 11a	200000000000000000000000000000000000000	Part of the Control of the Control	The second secon	ACTUAL PROPERTY AND ACTUAL				
	12	Total revenue. See	inst	ructions			2,923,476.	0.	0.	8,320.
BAA						TEEA	A0109L 08/23/23	The state of the s		Form 990 (2023)

	Check if Schedule O contains a re	sponse or note to any	line in this Part IX	iust complete column (A).
Do I	Check if Schedule O contains a re not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	1 Togram Service	Management and	Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.		expenses	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	3,217,436.	3,217,436.		
4	Benefits paid to or for members		0/22//100.		
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	1
7	Other salaries and wages	Y.	V.	<u> </u>	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	Protection and the second			
11	Fees for services (nonemployees):				
	Management	3,131.	1,044.	1,044.	1,043.
	Legal				
	Accounting	9,600.		9,600.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	AND ASSESSMENT OF THE RESIDENCE OF THE R			
	Investment management fees				***
	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy.				
17	Travel				
					en e
10	Payments of travel or entertainment expenses for any federal, state, or local public officials.				7
19	Conferences, conventions, and meetings		-200		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 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 O.).				
а					
b					CONTRACTOR OF THE PARTY OF THE
c					
d				-	
0	All other expenses				The Manager
25	Total functional expenses. Add lines 1 through 24e	3,230,167.	3,218,480.	10 644	1 040
		3,230,101.	3,210,400.	10,644.	1,043.
26	Joint costs. 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)				

-		Check if Schedule O contains a response or note to any line in this Part	X	*************		
				(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		402,221.	1	501,965.
	2	Savings and temporary cash investments	[2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from 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				
	6	Loops and other receivables from the district of the second state			5	
Assets	0	Loans and other receivables from other disqualified persons (as defined un section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
SSe	9	Prepaid expenses and deferred charges			9	
As	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments – publicly traded securities			11	
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets		407,956.	14	1 022
	15	Other assets. See Part IV, line 11	-	401,930.	15	1,822.
	16	Total assets. Add lines 1 through 15 (must equal line 33).		810,177.	16	503,787.
-	17	Accounts payable and accrued expenses		0 001	47	
	18	Grants payable		2,301.	17.	2,602.
	19	Deferred revenue			19	and the second
	20	Tax-exempt bond liabilities			20	
0	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
Liabilities	22	Loans and other 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			22	
-	23	Secured mortgages and notes payable to unrelated third parties			23	entre de la companya
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third part and other liabilities not included on lines 17-24). Complete Part X of Sched			25	
	26	Total liabilities. Add lines 17 through 25		2,301.	26	2,602.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		2,301.		2,002.
an	27	Net assets without donor restrictions		000 070	07	
Bal	28	Net assets with donor restrictions.		806,876.	27	500,185.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.		1,000.	28	1,000.
T.	20			Table 1		
S	29	Capital stock or trust principal, or current funds			29	
8	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
As	31	Retained earnings, endowment, accumulated income, or other funds			31	
et	32	Total net assets or fund balances.		807,876.	32	501,185.
	33	Total liabilities and net assets/fund balances		810,177.	33	503,787.
BA	4	TEEA0111L 08/23/23				Form 990 (2023)

Da	TXI Reconciliation of Net Assets	142038	-	Pag	je 12
ıaı					201
1	Check if Schedule O contains a response or note to any line in this Part XI				
	Total revenue (must equal Part VIII, column (A), line 12)	1		23,4	
2	Total expenses (must equal Part IX, column (A), line 25)	2		30,16	
3	Revenue less expenses. Subtract line 2 from line 1.	3		06,69	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	THE RESERVE OF THE PARTY OF THE	7,87	-
5	Net unrealized gains (losses) on investments.	5		.,,,	
6	Donated services and use of facilities.	6			100
7	Investment expenses	7	- 10000000	- 0	100
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	40			
Pai	t XII Financial Statements and Reporting	10	50	01,18	35.
	Check if Schedule O contains a response or note to any line in this Part XII.				. 📙
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			2411	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	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 review, or compilation of its financial statements and selection of an independent accountant?	audit,	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uni Guidance, 2 C.F.R. Part 200, Subpart F?	form	3a		X
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why on Schedule O and describe any steps taken to undergo such audits	ed audit	3b		
BAA	TEEA0112L 08/23/23		Form	990 (2)	023)
					1000

SCHEDULE A (Form 990)

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

2023

Open to Public Inspection

Name	of the	organization	THE ASSOCI	TATES OF THE U	INTVERSTTY		-	Employer identification	ation number
			OF TORONTO	O, INC.				13-614203	8
Par		Reason	for Public Cha	rity Status. (All or	ganizations must c	omplete	e this p	art) See instruction	ons.
ine o	orga	mzauon is i	not a private found	dation because it is: (I	For lines 1 through 12,	check on	ly one be	ox.)	
1	-	A church,	convention of chu	rches, or association	of churches described in	section	n 170(b)((1)(A)(i).	
2	-	A SCHOOL O	lescribed in section	on 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)			
3	-	A nospital	or a cooperative i	nospital service organ	ization described in sec	tion 170	(b)(1)(A)	(iii).	
4		name city	research organiza , and state:	ation operated in conju	unction with a hospital o	lescribed	in secti	on 170(b)(1)(A)(iii). Ent	er the hospital's
5									
		300001117	O(D)(1)(A)(IV). (CC	implete Falt II.)	ge or university owned				cribed in
6	Ц	A federal,	state, or local gov	ernment or governme	ntal unit described in s	ection 17	70(b)(1)(A)(v).	
7	X	An organizin section	ation that normall	ly receives a substant Complete Part II.)	ial part of its support fro	om a gov	ernment	al unit or from the gene	aral public described
8		A commun	ity trust described	I in section 170(b)(1)(A)(vi). (Complete Part II	.)			
9	П	An agricult	tural research orga	anization described in	section 170(b)(1)(A)(ix) operate	d in con	iunction with a land-gra	ent college
		or university:	ty or a non-land-g	rant college of agricul	ture (see instructions).	Enter the	e name,	city, and state of the co	ollege or
10		investment	t income and unre	exempli illinctions sun	nan 33-1/3% of its supp ject to certain exception e income (less section to Part III.)	ac and	Il no me	ra than 33 1/30/ -f !!-	
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).								
12							the purposes of one		
a		Type I. A so	supporting organizen(s) the power to Part IV, Sections A	ation operated, supen regularly appoint or e	vised, or controlled by it elect a majority of the di	ts suppor rectors o	ted orga r trustee	nization(s), typically by s of the supporting org	giving the supported anization. You must
b		manageme	supporting organizent of the supporti plete Part IV, Sect	nu oruanization vester	ontrolled in connection of the same persons t	with its s hat contr	upported of or ma	l organization(s), by ha nage the supported org	ving control or janization(s). You
c	Ц	Type III fur organization	nctionally integration(s) (see instruction	ted. A supporting orga ions). You must comp	nization operated in cor plete Part IV, Sections A	nection A, D, and	with, and	d functionally integrated	d with, its supported
d	Ц	Type III no functionally instructions	n-functionally into y integrated. The one s). You must com	egrated. A supporting organization generally plete Part IV, Section	organization operated in must satisfy a distribut s A and D, and Part V.	n connection requi	tion with rement a	its supported organiza and an attentiveness re	tion(s) that is not quirement (see
е		Check this integrated,	box if the organiz or Type III non-fu	ation received a writte inctionally integrated s	en determination from the supporting organization.	ne IRS th	at it is a	Type I, Type II, Type I	II functionally
f	En	ter the num	ber of supported	organizations					
g				n about the supported	Control Contro	_			
	i) iva	me or supporte	d organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g docur	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No	*	
(A)									
(B)									
(C)									
(D)									
		TE 000	N TOTAL STREET						
(E)									
Total									

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	tion A. Public Support						
begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,641,972.	1,965,856.	922,691.	802 070	1,126,501.	8,459,090.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			322,031.	002,070.	1,120,301.	0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	3,641,972.	1,965,856.	922,691.	802.070	1,126,501.	8,459,090.
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)					1,120,501.	2,031,252.
6	Public support. Subtract line 5 from line 4						6,427,838.
Sec	tion B. Total Support						0,427,030.
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	3,641,972.	1,965,856.	922,691.	802,070.	1,126,501.	8,459,090.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,167.	1,660.	345.	1,420.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	4,107.	1,000.	343.	1,420.	8,320.	15,912.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
11	Total support. Add lines 7 through 10						8,475,002.
12	Gross receipts from related activ	ities, etc. (see ins	tructions)			12	Q.
13	First 5 years. If the Form 990 is a organization, check this box and	for the organizatio stop here	n's first, second, th	ird, fourth, or fifth	n tax year as a se	ection 501(c)(3)	
Sec	tion C. Computation of Pu	blic Support F	Percentage		W. (1) - W. (1) - W. (1) - W. (1)	Control of States	
14	Public support percentage for 20	23 (line 6, column	(f), divided by line	11, column (f)).			75.84%
15	Public support percentage from 2	2022 Schedule A,	Part II, line 14			15	82.55%
16a	33-1/3% support test—2023. If the and stop here. The organization	ne organization did qualifies as a pub	I not check the box licly supported orga	on line 13, and I	ine 14 is 33-1/3%	or more, check th	nis box
b	33-1/3% support test-2022. If the and stop here. The organization	e organization did qualifies as a pub	not check a box or licly supported org	n line 13 or 16a, a anization	and line 15 is 33-	1/3% or more, che	ck this box
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the facts.	meets the tacts-ar	id-circumstances to	et chack this has	v and ctan have	Evalain in Dart VI	hour
b	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the tacts ar	id circumstances to	act chack this has	v and ctan have	Evaloin in Dort \//	have the
18	Private foundation. If the organiz	zation did not ched	k a box on line 13,	16a, 16b, 17a, o	r 17b, check this	box and see instru	uctions

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.)

Sec	tion A. Public Support								
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	2	(f) Total	- 2
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				(d) Zozz	(e) 202.	,	(i) Total	
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 organization'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 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							14	_
	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								- 77A
	Public support. (Subtract line 7c from line 6.)								
Sec	tion B. Total Support								CHEA
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3	(f) Total	
	Amounts from line 6			La company					ms.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.								
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
	Add lines 10a and 10b								
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).								
	Total support. (Add lines 9, 10c, 11, and 12.)								_
14	First 5 years. If the Form 990 is forganization, check this box and	or the organizatio	n's first, second, t	hird, fourth, or fif	th tax year as a se	ction 501(c)	(3)		Ī
	tion C. Computation of Pul	blic Support I	Percentage	SEAGAIN					
	Public support percentage for 202						15		8
	Public support percentage from 2						16		ò
1000000	tion D. Computation of Inv								
17	Investment income percentage fo						17		8
18	Investment income percentage from					The second secon	18		8
	33-1/3% support tests—2023. If the is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppor	ted organiza	tion		
D	33-1/3% support tests—2022. If the line 18 is not more than 33-1/3%,	e organization di check this box a	a not check a box and stop here. The	on line 14 or line	19a, and line 16	supported of	33-1/39	6, and	
20	Private foundation. If the organization								

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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?
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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.)

		_	ALC: NO	
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
в	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	171	
t	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		and the same	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		d:
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
III. II.			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			-
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ons).	***************************************	
a	The organization satisfied the Activities Test. Complete line 2 below.	10		
t	The organization is the parent of each of its supported organizations. Complete line 3 below.			14
	See III	istruct	10115).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ŀ	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			drija.
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
t	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	s must c	omplete Sections A th	nrough E.
Sec	tion 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		
Sec	tion 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):			
s	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
c	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 0.015 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 0.035.	6		200
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount	14		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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 emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integ (see instructions).	grated Ty	pe III supporting orga	nization

	on D — Distributions				Current Year
	Amounts paid to supported organizations to accomplish exempt purp			1	
2 ,	Amounts paid to perform activity that directly furthers exempt purpos in excess of income from activity	es of supported organi	zations,	2	
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		3	
	Amounts paid to acquire exempt-use assets			4	
5 (Qualified set-aside amounts (prior IRS approval required - provide of	details in Part VI		5	
6 (Other distributions (describe in Part VI). See instructions.	otalio iii Turi Tij		6	
1.000	Total annual distributions. Add lines 1 through 6.			7	N-11
8	Distributions to attentive supported organizations to which the organi in Part VI). See instructions.	zation is responsive (p	rovide details	8	
	Distributable amount for 2023 from Section C, line 6		V - x - W	9	
CONTRACTOR OF THE PARTY OF THE	ine 8 amount divided by line 9 amount			10	
Section	on E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribut Pre-2023		(iii) Distributable Amount for 2023
	Distributable amount for 2023 from Section C, line 6				
2 (Underdistributions, if any, for years prior to 2023 (reasonable cause required — explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023		A SECTION AND A	100.00	
a	From 2018				Total Maria Control
b	From 2019	Remarks and the second			
C	From 2020				
d	From 2021		The second of th		
	From 2022	31. 2966.020			
f ·	Total of lines 3a through 3e		STORAGE MULICIPA		
g	Applied to underdistributions of prior years	Harry Tallet			
375011	Applied to 2023 distributable amount				
i (Carryover from 2018 not applied (see instructions)				
1000	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			2 3 3 7 7	
4	Distributions for 2023 from Section D, line 7:			1977	
a	Applied to underdistributions of prior years	ATTACK TO SEED			A STATE OF STATE
b,	Applied to 2023 distributable amount	Partial Manager Design		714	
c l	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.				*
	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				74.
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
	Breakdown of line 7:		Harris III	10.00	
a	Excess from 2019				
	Excess from 2020		- Latingan - Lating		
-	Excess from 2021				
	Excess from 2022	7-2-1			
	Excess from 2023				

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Schedule A (Form 990) 2023

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

2023

Open to Public Inspection
Employer identification number

THE ASSOCIATES OF THE UNIVERSITY OF TORONTO, INC. 13-6142038 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. Part I (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year)...... Aggregate value at end of year..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?..... No Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified 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 a Total number of conservation easements..... 2a b Total acreage restricted by conservation easements..... 2b c Number of conservation easements on a certified historic structure included on line 2a...... 2c d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register. 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. See Part XIII b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1......

b Assets included in Form 990, Part X.....

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Part III Organizations Mainta	ining Colle	ections of Art,	Historic	al Treasures, or (Other Similar Asset	s(con	inued)	rage Z
3 Using the organization's acquisition items (check all that apply).								
a Public exhibition		d T	Loan or e	exchange program				
b Scholarly research		е	Other					
c Preservation for future genera								
4 Provide a description of the organ Part XIII.						in		
5 During the year, did the organizat to be sold to raise funds rather th	an to be main	itained as part of	of art, his the organ	storical treasures, or dization's collection?	other similar assets	Yes	[2	X No
Part IV Escrow and Custod Complete if the orga Form 990, Part X, li	inization ai	nswered "Yes				an an	ount o	on
1a Is the organization an agent trust	ee custodian	, or other interm	ediary for	contributions or other	assets not included		S. Evaluation	
on Form 990, Part X?b If "Yes," explain the arrangement						Yes		No
						Amoun		
c Beginning balance								
d Additions during the year								
e Distributions during the year	• • • • • • • • • • •				1e			
f Ending balance					1f	_		
2a Did the organization include an ar								No
b If "Yes," explain the arrangement	in Part XIII.	Check here if the	explanation	on has been provided	in Part XIII			
Part V Endowment Funds	and the second							
Complete if the orga	nization a	newored "Vec	" on For	m 000 Dort IV	ina 10			
Complete if the orga	iriizatiori ai	iswered res	OITFO	m 990, Part IV, I	ine 10.			
	(a) Current	year (b)	Prior year	(c) Two years back	(d) Three years back	(e)	Four years	back
1a Beginning of year balance							Man State of	
b Contributions			AND STREET					
c Net investment earnings, gains,								
and losses								
d Grants or scholarships								
e Other expenditures for facilities								
and programs f Administrative expenses								-
g End of year balance	N. C			20 - 1 - 20 - 20 NOV. 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12				
2 Provide the estimated percentage	of the curren	t year end halan	ce (line 1a	column (a)) hold as				
a Board designated or quasi-endow		%	ce (iiile 19	, column (a)) nelu as				
b Permanent endowment	- %	•						
c Term endowment	<u> </u>							
The percentages on lines 2a, 2b,		d equal 100%						
3a Are there endowment funds not in organization by:	the possess	ion of the organiz	zation that	are held and adminis	stered for the		Yes	No
(i) Unrelated organizations?						3a(i)	res	No
(ii) Related organizations?						III CONTRACTOR		
b If "Yes" on line 3a(ii), are the rela								3 - 40 - 110 D - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 10 - 20 - 2
4 Describe in Part XIII the intended						00		Cally Co
Part VI Land, Buildings, an						-solies-	na southear	155-18-5-18
Complete if the organizati			0 Part IV	line 11a See Form 9	190 Part X line 10			
Description of property					SECTION OF THE PROPERTY OF		- 2010 100	
Description of property		(a) Cost or other (investment		(b) Cost or other basis (other)	(c) Accumulated depreciation	(a)	Book va	lue
1a Land							(Description)	
b Buildings		Avenue a source of the source of						
c Leasehold improvements								
d Equipment					Constitution of the second	TO THE		on signify
e Other						00001 111100		
Total. Add lines 1a through 1e. (Column	n (d) must eq	ual Form 990, Pa	art X, line	10c, column (B))			Transcontinuo (0.
BAA			W. SURROLL STATE			lule D (Form 99	0) 2023

	Investments — Other Securities Complete if the organization answered "Yes" or	Form 990 Part IV lie	N/A	
(a) Descripti	ion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market	t value
	derivatives			· Turuo
	eld equity interests			
(3) Other				
(A)				
(B)				
(C) (D)				
(E)				
(F)				
(G)				and the same of th
(H)				
(1)				
	(b) must equal Form 990, Part X, line 12, column (B))			Control of the
Part VIII	Investments — Program Related Complete if the organization answered "Yes" or	Form 990 Part IV Jir	N/A	
((a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year m	arket value
(1)				
(2)				
(3)				barrette Li
(4)				
(5)				
(6)		Charles Commence		
(8)				Called Countries
(9)				
(10)	W. W			
	(b) must equal Form 990, Part X, line 13, column (B))			
	Other Assets Complete if the organization answered "Yes" or	N/.		
	Complete if the organization answered 165 of	i rui iii 990, rait iv, iii		7.
	(a) De	scription		ook value
(1)	(a) De	scription		ook value
(1) (2) (3)	(a) De	scription		ook value
(1) (2) (3) (4)	(a) De:	scription		ook value
(1) (2) (3) (4) (5)	(a) De:	scription		ook value
(1) (2) (3) (4) (5) (6)	(a) Des	scription		ook value
(1) (2) (3) (4) (5) (6) (7)	(a) De:	scription		ook value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	(a) De:	scription		ook value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) De:	scription	(b) Bo	ook value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum	(a) De	scription	(b) Bo	ook value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum	nn (b) must equal Form 990, Part X, line 15, co	olumn (B))	(b) Bo	ook value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X	on (b) must equal Form 990, Part X, line 15, concept to the Complete if the organization answered "Yes" or	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	ook value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal	on (b) must equal Form 990, Part X, line 15, concept to the Complete if the organization answered "Yes" or	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
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(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B))	ne 11e or 11f. See Form 990, Part X, line 25 .	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	on (b) must equal Form 990, Part X, line 15, conditions Other Liabilities Complete if the organization answered "Yes" of (a) Descriptions	olumn (B)) 1 Form 990, Part IV, liniption of liability	(b) Bo	

	THE ASSOCIATES OF THE UNIVERSITY	13-6142038	Page 4
Pai	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	2,923,476.
	Net unrealized gains (losses) on investments		
h			
Č	Recoveries of prior year grants		
ď	Other (Describe in Part XIII.).		
	Add lines 2s through 2d		
3	Add lines 2a through 2d. Subtract line 2e from line 1.		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	2,923,476.
17.50	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIII.)		×12
_	Add lines 4a and 4b.		two.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		2,923,476.
Га	Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Return	
1	Total expenses and losses per audited financial statements	1	3,230,167.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		-,,
а	Donated services and use of facilities		
b	Prior year adjustments		
	Other losses		
	Other (Describe in Part XIII.)		
	Add lines 2a through 2d.	2e	
3	Subtract line 2e from line 1		3,230,167.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		3,230,107.
a	Investment expenses not included on Form 990, Part VIII, line 7b		**
	Other (Describe in Part XIII.). 4b		
C	Add lines 4a and 4b		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,230,167.
Par	t XIII Supplemental Information		

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 1a - F/S Footnote For Art, Treasures, Etc.

Gift In Kind - Book - Appraised

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.

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

OMB No. 1545-0047

Inspection

Name of the organization THE ASSOCIATES OF THE UNIVERSITY OF TORONTO, INC.

Employer identification number 13-6142038

General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
- For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (a) Region (d) Activities conducted in (e) If activity listed in (f) Total offices in the employees, the region (by type) (such (d) is a program expenditures for agents, and as, fundraising, program services, investments, region service, describe and investments independent specific type of service(s) in in the region contractors grants to recipients in the region located in the region) the region (1) North America 3 Grants 0. (2) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)(17)3a Subtotal..... 1 3 **b** Total from continuation sheets to Part I...... c Totals (add lines 3a and 3b). . .

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

Schedule F (Form 990) 2023

Page 2 Schedule F (Form 990) 2023 THE ASSOCIATES OF THE UNIVERSITY

Part | Grants and Other Assistance to Organizations or 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 can be duplicated if additional space is needed.

	***************************************						ns or entities	3 Enter total number of other organizations or entities
0		exempt 501(c)(3)	cognized as a tax	foreign country, re iivalency letter	s charities by the tion 501(c)(3) equ	at are recognized a has provided a sec	ations listed above the grantee or counsel	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
APPRAISAL	407,956. RARE BOOKS	407,956.	СНЕСК	2,809,480. CHECK	GENERAL	CANADA		
(i) Method of valuation (book FMV, appraisal other)	(h) Description of noncash assistance	(g) Amount of noncash assistance	(f) Manner of cash disbursement	(e) Amount of cash grant	(d) Purpose of grant	(c) Region	(b) IRS code section and EIN (if applicable)	1 (a) Name of organization

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13-6142038

THE ASSOCIATES OF THE UNIVERSITY

Schedule F (Form 990) 2023

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) 2023 (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (18) BAA € 8 0 4 9 9 0 6 (10) (11) (12) (13) (14) (15) (91) (1) 8

			10000
ra	t IV Foreign Forms		
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 the Instructions for Form 926)	Yes	X 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 the 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 the 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 the Instructions for Form 8621).	Yes	X 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 the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization THE ASSOCIATES OF THE UNIVERSITY OF TORONTO, INC.

Employer identification number 13-6142038

Types of Property (a) Check if (b) (c) Noncash contribution (d) Method of determining noncash contribution amounts Number of applicable contributions or amounts reported on Form 990, Part VIII, line 1g items contributed Art — Works of art..... Art - Historical treasures..... Art - Fractional interests..... Books and publications..... X 4 1,822. APPRAISAL 5 Clothing and household goods Boats and planes..... 7 Intellectual property..... 9 X 466,522. SALE PRICE 5 Securities - Partnership, LLC, or trust interests. . 11 Securities - Miscellaneous..... Qualified conservation contribution -Qualified conservation contribution - Other..... 15 16 Real estate - Commercial..... Real estate - Other 17 18 19 Drugs and medical supplies..... 20 21 22 23 Scientific specimens..... 24 Archeological artifacts..... 25 Other 26 Other 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?..... 30 a X b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?...... X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.... 32 a X **b** If "Yes," describe in Part II. See Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part I, Line 32 - Hire and Use of Third Parties

STATE STREET - FINANCIAL INSTITUTION USED TO SELL SECURITIES.

INDEPENDENT APPRAISER - USED TO VALUE GIFTS IN KIND AND TRANSFER TO RECIPIENT ORGANIZATION.

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2023

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

THE ASSOCIATES OF THE UNIVERSITY OF TORONTO, INC.

Employer identification number 13-6142038

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

The organization has members but no stockholders. Each member has the same rights. Members of the Organization elect members of the governing body.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

The organization has members but no stockholders. Each member has the same rights. Members of the Organization elect members of the governing body.

Form 990, Part VI, Line 11b - Form 990 Review Process

The Board of Directors receive a copy of the Form 990 and approve it prior to its filing with the Internal Revenue Service.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Board of Directors receive a copy of the policy and sign an acknowledgement of their understanding and if they are aware of any conflicts.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Copies of the organizing documents and conflict of interest policy statement are available upon request. The Organization's financial statements and Form 990 are posted on the University of Toronto website