Form	990-T	E	Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))	ו ו	OMB No. 1545-0047		
		For ca	endar year 2020 or other tax year beginning APR 1, 2020 , and ending MAR 31, 2021		2020		
Depai Intern	rtment of the Treasury al Revenue Service	<b>•</b>	► Go to www.irs.gov/Form990T for instructions and the latest information.  Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)		Open to Public Inspection for 501(c)(3) Organizations Only		
Α	Check box if address changed.		Name of organization ( Check box if name changed and see instructions.)	DEmbl	oyer identification number		
B E	xempt under section	Print	CALIFORNIA HEALTHCARE FOUNDATION		95-4523231		
X	501(c)(4) 408(e) 220(e)		o exemption number nstructions)				
	408A 530(a) 529(a) 529S	F _	Check box if				
		С Во	ok value of all assets at end of year > 970,069,278.		an amended return.		
G	Check organization	type 🕨	X 501(c) corporation 501(c) trust 401(a) trust Other trust A	Applical	ole reinsurance entity		
<u>H</u>	Check if filing only to	<b>&gt;</b>	Claim credit from Form 8941 Claim a refund shown on Form 2439				
<u></u>	Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation		<b>&gt;</b>		
<u>J</u>	Enter the number of	attach	ed Schedules A (Form 990-T)		1		
			e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?  d identifying number of the parent corporation.	<b>▶</b> □	Yes X No		
	The books are in car			10-23	8-1040		
Pa	rt I Total Unr	elate	d Business Taxable Income				
1	Total of unrelated	busine	ss taxable income computed from all unrelated trades or businesses (see				
	instructions)			1	-505,014.		
2	Reserved			2			
3	Add lines 1 and 2			3	-505,014.		
4		,	see instructions for limitation rules)	4	0.		
5	Total unrelated bu	siness	taxable income before net operating losses. Subtract line 4 from line 3	5	-505,014.		
6	Deduction for net	operati	ng loss. See instructions	6			
7	Total of unrelated	busine	ss taxable income before specific deduction and section 199A deduction.				
	Subtract line 6 from	m line 5	5	7	-505,014.		
8	Specific deduction	n (gene	rally \$1,000, but see instructions for exceptions)	8	1,000.		
9	Trusts. Section 19	99A de	duction. See instructions	9			
10	Total deductions.	. Add li	nes 8 and 9	10	1,000.		
11	Unrelated busine	ss taxa	ble income. Subtract line 10 from line 7. If line 10 is greater than line 7,				
_	enter zero			11	0.		
Ра	rt II Tax Com			_			
1			s corporations. Multiply Part I, line 11 by 21% (0.21)	· <u>1</u>	0.		
2			ates. See instructions for tax computation. Income tax on the amount on				
	Part I, line 11 from		Tax rate schedule or Schedule D (Form 1041)				
3	Proxy tax. See ins			3			
4	Other tax amounts			4			
5							
6			cility income. See instructions	6			
7			h 6 to line 1 or 2, whichever applies	7	0.		
LHA	For Paperwork F	Reduct	ion Act Notice, see instructions.		Form <b>990-T</b> (2020)		

023701 02-02-21

	90-T (2	,							P	<sup>2</sup> age <b>2</b>
Part	III T	Tax and Payments								
1a	Foreig	n tax credit (corporations attach Form 11	18; trusts attach Form 113	16)	1a		_			
b							_			
С	Gener	al business credit. Attach Form 3800 (see	e instructions)		1c		_			
d	Credit	for prior year minimum tax (attach Form	8801 or 8827)		1d					
е	Total	credits. Add lines 1a through 1d					. L	1e		
2	Subtra	act line 1e from Part II, line 7					. L	2		0.
3	Other	taxes. Check if from: Form 42	55 Form 8611	Form	า 8697	Form 8866				
		Other (at	tach statement)				L	3		
4	Total	tax. Add lines 2 and 3 (see instructions).	Check if include	des tax pre	viously def	erred under				
	sectio	n 1294. Enter tax amount here			▶		L	4		0.
5	2020	net 965 tax liability paid from Form 965-A	or Form 965-B, Part II, col	umn (k), lir	ne 4 <sub>,,</sub> .		L	5		0.
6a	Paym	ents: A 2019 overpayment credited to 202	20	<u></u>	6a	500,00	0.			
b	2020	estimated tax payments. Check if section	643(g) election applies	▶ L	6b		_			
С							_			
d	Foreig	n organizations: Tax paid or withheld at s	source (see instructions)		6d		_			
е		p withholding (see instructions)					_			
f		for small employer health insurance pren			6f		_			
g		credits, adjustments, and payments:			_					
			Other				_			
7		payments. Add lines 6a through 6g					<u>.</u> ,⊢	7	500,	000.
8		ated tax penalty (see instructions). Check				▶ └	ᆜ┝	8		
9		ue. If line 7 is smaller than the total of line					▶  -	9		
	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid							10	500,	
Part		the amount of line 10 you want: Credited Statements Regarding Certain A				Note that is the second of the	<u> </u>	11		0.
		time during the 2020 calendar year, did			-		+,,		Vaa	No
1	•	ifinancial account (bank, securities, or otl	•		Ū		•		Yes	INO
		N Form 114, Report of Foreign Bank and			-	•				
	here		Tinancial Accounts. II Te	o, critci ti	ic riarric or	the foreign count	у			х
2		the tax year, did the organization receive	a distribution from or wa	s it the ara	entor of or	transferor to a				
_	•	n trust?	,	U	•	,				х
		s," see instructions for other forms the org								
3		the amount of tax-exempt interest receive	•			▶ \$				
4a		e organization change its method of acco								х
b		s "Yes," has the organization described th								
		n in Part V								
Part	<b>V</b> 3	Supplemental Information								
Provide	the ex	planation required by Part IV, line 4b. Als	o, provide any other additi	onal inforn	nation. See	instructions.				
		·								
o		der penalties of perjury, I declare that I have examined treet, and complete. Declaration of preparer (other than					wledge	and belief, it is tru	e,	
Sign						NVESTS/TREAS	May t	the IRS discuss thi	s return w	vith
Here & SEC						the pr	reparer shown belo	w (see		
Signature of officer Date Title						instru	ictions)? X Y	ctions)? X Yes No		
		Print/Type preparer's name	Preparer's signature		Date	Check	] if	PTIN		
Paid			Haji Kora	_	2/8/202	self- employ	ed			
Prepa	rer	MAGA E. KISRIEV	praje with		2101202			P01008919		
Use C		Firm's name HOOD & STRONG LLP				Firm's EIN	<u> </u>	94-1254	756	
	-	275 BATTERY STR	•							
		Firm's address  SAN FRANCISCO,	CA 94111			Phone no.	415	.781.0793		

Form **990-T** (2020)

#### Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

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

filing of th	is form, visit www.irs.gov/e-file-providers/e-file-for-chari	ities-and-n	on-profits.			
Automa	tic 6-Month Extension of Time. Only subm	nit origina	al (no copies needed).			
•	ations required to file an income tax return other than Form 7004 to request an extension of time to file incom			s, REMICs	s, and trusts	
Type or print	Name of exempt organization or other filer, see instru-	ctions.		Taxpayer	identification nur	mber (TIN)
•	CALIFORNIA HEALTHCARE FOUNDATION				95-4523231	
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, so 1438 WEBSTER ST, NO. 400	ee instruct	ions.			
instructions.	City, town or post office, state, and ZIP code. For a football, CA 94612	oreign addı	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			0 7
Application	on	Return	Application			Return
Is For		Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
Form 990	O (individual)	03	Form 4720 (other than individual) Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)  04 Form 6069					11	
						12
Teleph  If the o	oks are in the care of   1438 WEBSTER ST., STE one No.   510-238-1040  rganization does not have an office or place of business s for a Group Return, enter the organization's four digit 0  If it is for part of the group, check this box	s in the Uni Group Exe	Fax No. ▶ted States, check this box	f this is for	r the whole group	
the ►[ ►	quest an automatic 6-month extension of time until organization named above. The extension is for the orga calendar year or x tax year beginningAPR 1, 2020  e tax year entered in line 1 is for less than 12 months, cl _ Change in accounting period	anization's	return for: d ending MAR 31, 2021	the exem	pt organization re ·	eturn for
any	is application is for Forms 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions.			3a	\$	374,708.
	is application is for Forms 990-PF, 990-T, 4720, or 6069			_	•	500 000
	mated tax payments made. Include any prior year overp			3b	\$	500,000.
	ance due. Subtract line 3b from line 3a. Include your pa ig EFTPS (Electronic Federal Tax Payment System). See	•	• • • •	3c	\$	0.
	If you are going to make an electronic funds withdrawal				•	

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

#### **SCHEDULE A** (Form 990-T)

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

OMB No. 1545-0047

ENTITY

Department of the Treasury Internal Revenue Service

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

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

501(c)(3) Organizations Only B Employer identification number Name of the organization CALIFORNIA HEALTHCARE FOUNDATION 95-4523231 901101 **D** Sequence: C Unrelated business activity code (see instructions) ▶ of

E [	Describe the unrelated trade or business   QUALIFYING PARTNER	SHIP	INTERESTS		
Pa	rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)) (see instructions)	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach	5	-450,803.		-450,803.
_	statement) STATEMENT 1	6	450,003.		430,003.
6	Rent income (Part IV)	7			
7	Unrelated debt-financed income (Part V)				
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12			
13	Total. Combine lines 3 through 12	13	-450,803.		-450,803.
		•	•		

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

1	Compensation of officers, directors, and trustees (Part X)	Compensation of officers, directors, and trustees (Part X)					
2	Salaries and wages			2			
3	Repairs and maintenance			3			
4	Bad debts			4			
5	Interest (attach statement) (see instructions)			5			
6	Taxes and licenses		.,	6	22,071.		
7	Depreciation (attach Form 4562) (see instructions)						
8	Less depreciation claimed in Part III and elsewhere on return		8b				
9	Depletion			9			
10	Contributions to deferred compensation plans	10					
11	Employee benefit programs			11			
12	Excess exempt expenses (Part VIII)			12			
13	Excess readership costs (Part IX)			13			
14	Other deductions (attach statement)			14	32,140.		
15	Total deductions. Add lines 1 through 14			15	54,211.		
16	Unrelated business income before net operating loss deduction. Subtract line 15 fro	m Part	I, line 13,				
	column (C)			16	-505,014.		
17	Deduction for net operating loss (see instructions)	17	0.				
18	Unrelated business taxable income. Subtract line 17 from line 16			18	-505,014.		
			_				

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part	III Cost of Goods Sold Enter meth	nod of inventory valua	tion		Page Z
1	Inventory at beginning of year	•		1	
2	Purchases				
3	Cost of labor				_
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	<b>Total.</b> Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p				Yes No
Part	IV Rent Income (From Real Property and	Personal Prope	rty Leased with I	Real Property)	
1	Description of property (property street address, city, s	tate, ZIP code). Chec	k if a dual-use (see inst	tructions)	
	A				
	В				
	c <u> </u>				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
4 	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D. En	ter here and on Part I	, line 6, column (B)	<b>&gt;</b>	0.
Part	V Unrelated Debt-Financed Income (se	ee instructions)			
1	Description of debt-financed property (street address, of	ity, state, ZIP code).	Check if a dual-use (se	e instructions)	
	A				
	В				
	c				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
_	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
_	financed property (attach statement)	9,	,	/ 0/	
6 7	Divide line 4 by line 5  Gross income reportable, Multiply line 2 by line 6	9	6 9	6 %	<u>%</u>
7 8	Gross income reportable. Multiply line 2 by line 6  Total gross income (add line 7, columns A through D).	Enter hard and an Di	art Lline 7 column (A)		0.
0	i otal gross income (add line 1, columns A through D).	Linter Here and Off Pa	arti, iirie 7, colulliil (A)		
9	Allocable deductions. Multiply line 3c by line 6				_
10	Total allocable deductions. Add line 9, columns A thr	ough D. Enter here ar	nd on Part I line 7 col	umn (B)	0.
11	Total dividends-received deductions included in line		2 2, 10 7, 0011		0

Pa	ae	

Dart	ule A (Form 990-T) 2020  VI Interest, Annu	ities R	valties and Re	ante fron	n Control	ed Or	ganizations	S (see inc	tructions	١	Page 3	
rait	VI Interest, Anno	iities, iit	Jyanies, and me		ii Ooniii oi					)		
	1. Name of controlled	4	<b>2.</b> Employer			exempt Controlled Organization						
	organization	J	identification			al of specified nents made	late de Se Se atroda			Deductions directly connected with		
	organization		number	1	structions)	Payn	nemo made	controlling			ncome in column 5	
(1)				( )				tion's gros	S Income	+		
(1) (2)												
(3)										+		
(4)												
<u> ,</u>			No	nexempt C	Controlled Or	aanizati	ons					
	7. Taxable Income	8. 1	Net unrelated	<del> </del>	otal of specif			of column 9	-	11. De	eductions directly	
		in	come (loss)	pay	yments mad	е	1	luded in the	:		onnected with	
		(see	e instructions)				controlling organization's gross income		r's	inco	me in column 10	
(1)												
(2)												
(3)												
(4)												
							1	ns 5 and 10			olumns 6 and 11.	
							Enter here and on Part I,			Enter here and on Part I, line 8, column (B)		
	line 8, column (A)					11116	e o, column (b)					
Totals			<del></del>			<u></u>			0.		0.	
Part			of a Section 50	1(c)(7), (	_			ee instructio				
	<b>1.</b> Desc	ription of	income		2. Amou incon		3. Deduction		Set-asid ch staten		5. Total deductions and set-asides	
					IIICOII	ic	(attach state	١,	CII State	nent)	(add cols 3 and 4)	
/4\												
(1)												
(2)												
(3) (4)												
(+)					Add amou	ınts in					Add amounts in	
					column 2.						column 5. Enter	
					here and or line 9, colu	,					here and on Part I, line 9, column (B)	
Totals				•	11110 0, 0010	0.					0.	
Part		xempt A	ctivity Income,	Other T	han Adve	rtising	g Income	see instruct	ions)			
1	Description of exploite								1			
2	Gross unrelated busin	•		ness. Entei	r here and or	n Part I,	line 10, colum	n (A)	_   2			
3	Expenses directly con	nected wit	h production of unre	elated busi	ness income	. Enter l	here and on Pa					
	line 10, column (B)								3			
4												
	lines 5 through 7											
5	Gross income from ac									$\perp$		
6	Expenses attributable								6			
7	Excess exempt expens											
	4. Enter here and on P	art II, line	12						7			

Schedule A (Form 990-T) 2020

	ule A (Form 990-T) 2020					P	age <b>4</b>
Part	•						
1	Name(s) of periodical(s). Check box if reporting	ng two or 1	more periodicals on	a consolidated basis	S.		
	A						
	В 🔛						
	c 🗆						
	D						
Enter a	mounts for each periodical listed above in the	correspor	iding column.				
			Α	В	С	D	
2	Gross advertising income						
	Add columns A through D. Enter here and on		e 11, column (A)		<b>•</b>		0.
а	3	,	, , , , , , , , , , , , , , , , , , , ,				
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here and on		e 11 column (B)		<u> </u>		0.
_	riad colamic rian cagin b. Emer nere and on	i i di ci, iii	(D)				
4	Advertising gain (loss). Subtract line 3 from lin	ne					
•	2. For any column in line 4 showing a gain,	110					
	complete lines 5 through 8. For any column in	'n					
	line 4 showing a loss or zero, do not complete						
	lines 5 through 7, and enter zero on line 8						
5	Readership costs						
5 6							
7	Circulation income  Excess readership costs. If line 6 is less than						
'	·						
	line 5, subtract line 6 from line 5. If line 5 is le						
	than line 6, enter zero						
8	Excess readership costs allowed as a deduction. For each column showing a gain of						
	line 4, enter the lesser of line 4 or line 7		l' 0 l		1		
а	Add line 8, columns A through D. Enter the g	reater of the	ne line 8a, columns		_		0.
Part	X Compensation of Officers, Dir	rectors	and Trustees	(acc instructions)	<b>P</b>		<del>.</del>
	Z Componedation of Cinedia, 21		una mactoco	(See Instructions)	2 Porcontago	4 Componention	
	<b>1.</b> Name		<b>2.</b> Title		3. Percentage of time devoted	<ol><li>Compensation attributable to</li></ol>	1
	I. Name		<b>2.</b> Title		to business	unrelated busines	
(4)					to business %	unrelated busines	5
(1) (2)					%		
(2)					%		
(3)					90		
(4)					1 %		
Total	Enter here and an Dort II line 1						0.
Part	Enter here and on Part II, line 1  XI Supplemental Information (see		· · · · · · · · · · · · · · · · · · ·				٠.
rait	Supplemental information (Se	ee instruct	ions)				

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION	NET INCOME OR (LOSS)
ABERDEEN U.S. PRIVATE EQUITY III, LP - OTHER INCOME (LOSS)	17,712.
ABERDEEN VENTURE PARTNERS VI, LP - OTHER INCOME (LOSS)	-69.
ACCOLADE PARTNERS II, LP - OTHER INCOME (LOSS)	1,495.
ACCOLADE PARTNERS III, LP - OTHER INCOME (LOSS)	222.
AG SUPERFUND, LP - OTHER INCOME (LOSS)	5.
COLLER INTERNATIONAL PARTNERS V-A, LP - OTHER INCOME	
(LOSS)	-24.
COMMONFUND CAPITAL INTERNATIONAL PARTNERS VI, LP - OTHER	
INCOME (LOSS)	6,408.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII, LP - OTHER	44 424
INCOME (LOSS)	41,131. -2,340.
LEGACY VENTURE IV, LLC - OTHER INCOME (LOSS) LEGACY VENTURE VI, LP - OTHER INCOME (LOSS)	-2,340. -580.
MAKENA CAPITAL SPLITTER X, LP - OTHER INCOME (LOSS)	-527,622.
STEPSTONE PIONEER CAPITAL II, LP - OTHER INCOME (LOSS)	12,745.
SVB STRATEGIC INVESTORS FUNDS III, LP - OTHER INCOME	,
(LOSS)	363.
AG SF (L) LP - OTHER INCOME (LOSS)	-249.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	-450,803.
FORM 990-T (A) OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION	AMOUNT
TAX PREPARATION FEES	32,140.
TOTAL TO SCHEDULE A, PART II, LINE 14	32,140.

# Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part I	U.S. Transferor Information (see instructions)					
Name of t	transferor		Identifyir	g numbe	er (see in	structions)
CALIFO	ORNIA HEALTHCARE FOUNDATION		95-45	23231		
1 Is th	he transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation	on?	🗆	Yes	Х	No
2 If th	ne transferor was a corporation, complete questions 2a through 2d.					
	ne transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c))	bv				
	or fewer domestic corporations?	-		Yes	Х	No
	the transferor remain in existence after the transfer?			Yes		No
	ot, list the controlling shareholder(s) and their identifying number(s).			103		. 110
	Controlling shareholder	ld	entifying n	umber		
fth	ne transferor was a member of an affiliated group filing a consolidated return, was it the parent cor	moration?		Yes	X	No
	ot, list the name and employer identification number (EIN) of the parent corporation.	poration:		100		
	Name of parent corporation	EIN o	f parent co	rporati	on	
N/A						
d Hav	ve basis adjustments under section 367(a)(4) been made?			Yes	X	No
3 If th	ne transferor was a partner in a partnership that was the actual transferor (but is not treated as suc	ch under secti	ion 367),			
con	nplete questions 3a through 3d.					
<b>a</b> List	the name and EIN of the transferor's partnership.					
	Name of partnership	EI	IN of partn	ership		
MAKENA	A CAPITAL SPLITTER X, LP.	26-363981	5			
<b>b</b> Did	the partner pick up its pro rata share of gain on the transfer of partnership assets?			Yes	Х	No
	ne partner disposing of its entire interest in the partnership?			Yes	Х	
	he partner disposing of an interest in a limited partnership that is regularly traded on an establishe			100		. 110
				Vaa	Х	No
Part II	urities market?  Transferee Foreign Corporation Information (see instructions)			Yes		NO
	me of transferee (foreign corporation)	5a	Identifying	g numb	er, if a	ny
INDUS	IND BANK LIMITED					
	dress (including country)	5h	Reference	ID num	her	
	WER 1, 1 INDIABULLS CENTRE ELPHINSTONE ROAD (WEST)	05	11010101100	ID Ham	001	
	400013 INDIA	00	-0000045			
	untry code of country of incorporation or organization	1 00	7-000043	'		
8 For	eign law characterization (see instructions)					
CORPOR	RATION					1
	he transferee foreign corporation a controlled foreign corporation?			Yes	Х	
024531 04-0	on-20 LHA For Paperwork Reduction Act Notice, see separate instructions.		For	m <b>926</b> (F	Rev. 1	1-2018)

	Regarding Trans	sfer of Property (see	instruction	ons)		
Section A - Cash						
Type of property	(a) Date of transfer	(b) Description of		(c) arket value on of transfer	<b>(d)</b> Cost or other basis	<b>(e)</b> Gain recognized on transfer
Cash	09/01/2020	property	uale	186,670.	Dasis	transiei
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and g					X Yes No
Section B - Other Pro			subject			(5)
Type of property	(a) Date of transfer	<b>(b)</b> Description of property		(c) arket value on of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer
Stock and securities						
Inventory						
Other property						
(not listed under						
another category)						
Due a sub ible						
Property with built-in loss						
Totals						
(including a branch the If "Yes," continue to lice Immediately after the transferee foreign corplif "Yes," continue to lice Immediately after the transferred Immediately after	foreign branch (includ controlled by the controlled by the control	that transferred substantially rded entity) to a specified 10 ines 12c and 12d, and go to lestic corporation a U.S. shamine 12d, and go to line 13. in gross income as required ed in section 367(d)(4)?	n disregard y all of the a 0%-owned 1 o line 13. areholder w	ed entity) transferre	pranch	YesNoYesNoYesNoYesNo
Section C - Intangible		ct to section sor(u)				
Type of property	(a) Date of transfer	<b>(b)</b> Description of property		(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
Totals						
TOTALIS					<u> </u>	Form <b>926</b> (Rev. 11-2018)

OIII	1320 (Nev. 112010)		r agc <b>o</b>
14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	☐ No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		☐ No
С	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	☐ No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) ▶\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
	, 1		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
	· · · · · · · · · · · · · · · · · · ·		
			_
Da	rt IV Additional Information Regarding Transfer of Property (see instructions)		
ı a	Additional information regarding Transfer of Property (see instructions)		
40	Establish to a few his between the the transfer of few his a consent to the few and offer the transfer		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After %		
17	Type of nonrecognition transaction (see instructions) ▶ SECTION 351	_	
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а			X No
b	V// //		X No
	Recapture under section 1503(d)		X No
d	Exchange gain under section 987	Yes	X No
19	Did this transfer result from a change in entity classification?	Yes	X No
20 a	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)	Yes	X No
	If "Yes," complete lines 20b and 20c.		
b			
	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	<b>&gt;</b> \$	
	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)  Did the domestic corporation not recognize gain or loss on the distribution of property because the	<b>&gt;</b> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the	▶ \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	▶\$ 	□ No
21	Did the domestic corporation not recognize gain or loss on the distribution of property because the		□ No  X No

024533 04-01-20

# Department of the Treasury Internal Revenue Service

# Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Par	t U.S. Transferor Information (see instructions)					
Name	e of transferor	Ide	entifying	numbe	r (see in	structions)
CAL	JIFORNIA HEALTHCARE FOUNDATION	9	5-452	3231		
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?			Yes	X	No
	If the transferor was a corporation, complete questions 2a through 2d.					_
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by					
	five or fewer domestic corporations?			Yes	Х	No
b	Did the transferor remain in existence after the transfer?		X	Yes		No
	If not, list the controlling shareholder(s) and their identifying number(s).					
	Controlling shareholder	Identify	ying nu	mber		
-						
			$\overline{}$		T 77	1
	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? If not, list the name and employer identification number (EIN) of the parent corporation.	·		Yes	Х	No
	Name of parent corporation E	IN of par	ent cor	porati	on	
N/A						
d	Have basis adjustments under section 367(a)(4) been made?			Yes	X	No
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under	section 3	67).			
	complete questions 3a through 3d.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o.,,			
	List the name and EIN of the transferor's partnership.					
	I					
	Name of partnership	EIN of	partne	rship		
		0045				
	ENA CAPITAL SPLITTER X, LP. 26-363		_		v	1
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		=	Yes	X	│ No │
	Is the partner disposing of its <b>entire</b> interest in the partnership?			Yes	X	No
a	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established			V	Х	1
Par	securities market? t II Transferee Foreign Corporation Information (see instructions)			Yes	Λ	No
	Name of transferee (foreign corporation)	5a Iden		numbe	ar if a	anv
•	realite of transfers (toroigh corporation)	ou luci	itinyinig	TIGITID.	<b>51</b> , 11 C	arry
	FT HOLDCO LIMITED			_		
	Address (including country)	<b>5b</b> Refe	rence l	D num	ber	
	FLOOR, BLOCK 71A, THE PLAZA	00 00	00046			
	IN, 12 IRELAND	00-000	10046			
7 EI	Country code of country of incorporation or organization					
	Foreign law characterization (see instructions)					
9	Is the transferee foreign corporation a controlled foreign corporation?		X	Yes		No
024531	04-01-20 LHA For Paperwork Reduction Act Notice, see separate instructions.		Form	9 <b>26</b> (F	Rev. 1	1-2018)

Form 926 (Rev. 11-2018)

**Totals** 

property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation

Form 926 (Rev. 11-2018)

No

X No

Yes

Yes

21

covered by section 367(e)(1)? See instructions

## Return by a U.S. Transferor of Property

to a Foreign Corporation

▶ Go to www.irs.gov/Form926 for instructions and the latest information.

Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part 1 0.9. Transferor information (see instructions)					
Name of transferor		Identify	ing numbe	er (see instru	uctions)
CALIFORNIA HEALTHCARE FOUNDATION		95-4	523231		
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled fore		Yes	X	No	
2 If the transferor was a corporation, complete questions 2a through 2d.					
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under s	ection 368(c)) by				
five or fewer domestic corporations?			Yes	X	No
<b>b</b> Did the transferor remain in existence after the transfer?			Yes		No
If not, list the controlling shareholder(s) and their identifying number(s).				ш.	•••
Controlling shareholder		Identifying	number		
c If the transferor was a member of an affiliated group filing a consolidated return, was it to	the parent corporation	?	Yes	X	No
If not, list the name and employer identification number (EIN) of the parent corporation.					
Name of parent corporation	E	IN of parent of	corporati	on	
N/A					
d Have basis adjustments under section 367(a)(4) been made?			Yes	X	No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not	treated as such under	section 367)			
	treated as such under	30011011 001),			
complete questions 3a through 3d.					
a List the name and EIN of the transferor's partnership.					
Name of partnership		EIN of part	nership		
MAKENA CAPITAL SPLITTER X, LP.	26-363		7	X	\.
<b>b</b> Did the partner pick up its pro rata share of gain on the transfer of partnership assets?			∐ Yes ⊐ ∨	== -	No
		L	Yes	X	No
d Is the partner disposing of an interest in a limited partnership that is regularly traded on	an established		٦		_
securities market?			Yes	X	No
Part II Transferee Foreign Corporation Information (see instructions)					
4 Name of transferee (foreign corporation)		5a Identifyi	ng numbe	er, if any	У
NFI GROUP, INC.					
6 Address (including country) 711 KERNAGHAN AVENUE		<b>5b</b> Reference	e ID num	ber	
WINNIPEG, R2C 3T4 CANADA		00-000004	.7		
·		00 00009	. ,		
7 Country code of country of incorporation or organization CA					
8 Foreign law characterization (see instructions) CORPORATION					
9 Is the transferee foreign corporation a controlled foreign corporation?			Yes	X	No
024531 04-01-20 LHA For Paperwork Reduction Act Notice, see separate instructions.		Fo	orm <b>926</b> (F	Rev. 11-2	2018

	Regarding Tran	sfer of Property (see	instructions)		
Section A - Cash					
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer
Cash	12/31/2020		180,799.		
10 Was cash the only pro If "Yes," skip the rema					X Yes No
Section B - Other Pro	perty (other tha	n intangible property			
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property	(c) Fair market value on date of transfer	<b>(d)</b> Cost or other basis	<b>(e)</b> Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with					
built-in loss					
Totals					
(including a branch the If "Yes," continue to lict Immediately after the transferee foreign con If "Yes," continue to lict Immediately after the transferred In Immediately after the transferred In Immediately I	foreign branch (included)  co.  domestic corporation at is a foreign disregatine 12c. If "No," skip I transfer, was the domporation?  ine 12d. If "No," skip I loss amount included asfer property describ C and questions 14a t	that transferred substantially urded entity) to a specified 10 ines 12c and 12d, and go to nestic corporation a U.S. shamine 12d, and go to line 13. in gross income as required ed in section 367(d)(4)?	n disregarded entity) transf y all of the assets of a forei 0%-owned foreign corporat line 13. areholder with respect to th	gn branch	Yes       No         Yes       No         Yes       No         Yes       No
Section C - Intangible	e Property Subje	ct to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length properties on date of trans		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totala					
Totals				I	<u> </u>

b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶\$

Did the domestic corporation not recognize gain or loss on the distribution of property because the

covered by section 367(e)(1)? See instructions

property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation

Form 926 (Rev. 11-2018)

No

X No

Yes

Yes

21

# Department of the Treasury Internal Revenue Service

# Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part I	U.S. Transferor Information (see instructions)					
Name of tr	ransferor		Iden	tifying numbe	r (see ins	tructions)
CALIFO	RNIA HEALTHCARE FOUNDATION		95	-4523231		
1 ls th	ne transferee a specified 10%-owned foreign corporation that is not a controlled foreign corpor	ation?		Yes	Х	No
2 If the	e transferor was a corporation, complete questions 2a through 2d.					
a If the	e transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368	8(c)) by				
five	or fewer domestic corporations?			Yes	X	No
<b>b</b> Did	the transferor remain in existence after the transfer?			X Yes		No
	ot, list the controlling shareholder(s) and their identifying number(s).					
	Controlling shareholder		Identifyi	ng number		
	e transferor was a member of an affiliated group filing a consolidated return, was it the parent ot, list the name and employer identification number (EIN) of the parent corporation.	corporation?		Yes	X	No
	Name of parent corporation	EIN	l of pare	nt corporatio	on	
N/A						
<b>d</b> Have	e basis adjustments under section 367(a)(4) been made?			Yes	X	No
3 If the	e transferor was a partner in a partnership that was the actual transferor (but is not treated as	such under se	ection 36	7),		
com	plete questions 3a through 3d.					
a List	the name and EIN of the transferor's partnership.					
	Name of partnership		EIN of p	artnership		
	CAPITAL SPLITTER X, LP.	26-36398				
	the partner pick up its pro rata share of gain on the transfer of partnership assets?			Yes	X	No
	ne partner disposing of its entire interest in the partnership?			Yes	Х	No
	ne partner disposing of an interest in a limited partnership that is regularly traded on an establi	shed				
	urities market?  Transferee Foreign Corporation Information (see instructions)			Yes	Х	No
Part II  4 Nam	ne of transferee (foreign corporation) (see instructions)	5	ia Identi	ifying numbe	r if a	nv.
			a ideiid	nying nambe	i, 11 a	ily
	ES UK LIMITED		The Defend	ID		
	lress (including country) INANCIAL SERVICES (GUERNSEY) LES BANQUES	5	b Refere	ence ID numb	oer	
	<del>-</del>		00 000	0040		
	ER PORT, GUERNSEY GY1 3PP GUERNSEY		00-000	0.40		
7 Cou	intry code of country of incorporation or organization					
8 Fore	eign law characterization (see instructions) ATION					
9 Is th	ne transferee foreign corporation a controlled foreign corporation?			Yes	X	No
024531 04-01	1-20 LHA For Paperwork Reduction Act Notice, see separate instructions.			Form <b>926</b> (F	Rev. 11	-2018

Part III Information	Regarding Trans		instructio	ns)	75 452.	Page Z
Section A - Cash	Trogularing Trains	, (acc	iiioti dotio	110)		
Type of property	(a) Date of transfer	(b) Description of property		(c) rket value on of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	03/02/2020			106,066.		
	ainder of Part III and g					X Yes No
Section B - Other Pro	(a) Date of	(b) Description of	Fair mai	(c) rket value on	(d) Cost or other	(e) Gain recognized on
Stock and securities	transfer	property	date	of transfer	basis	transfer
Inventory						
Other property (not listed under another category)						
Property with built-in loss						
Totals						
(including a branch the If "Yes," continue to lice Immediately after the transferee foreign con If "Yes," continue to lice Immediately after the transferred Immediately after the transferred Immediately Immedia	foreign branch (including the composition of the co	hat transferred substantiall rded entity) to a specified 1 nes 12c and 12d, and go to estic corporation a U.S. should be substantially and go to line 13. in gross income as required at in section 367(d)(4)?	gn disregarde  ly all of the as  0%-owned fo  o line 13.  areholder wit	ed entity) transferred ssets of a foreign b oreign corporation? th respect to the	d to a	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subje	ct to Section 367(d)				_
Type of property	(a) Date of transfer	<b>(b)</b> Description of property		(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described						
in sec. 367(d)(4)						
Totals						
					F	orm <b>926</b> (Rev. 11-2018)

b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶\$

Did the domestic corporation not recognize gain or loss on the distribution of property because the

covered by section 367(e)(1)? See instructions

property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation

Form 926 (Rev. 11-2018)

No

X No

Yes

Yes

21

## Return by a U.S. Transferor of Property

to a Foreign Corporation

▶ Go to www.irs.gov/Form926 for instructions and the latest information.

Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Par	U.S. Transferor information (see instructions)					
Name	e of transferor		Iden	itifying numbe	r (see in:	structions)
CAI	LIFORNIA HEALTHCARE FOUNDATION		95	-4523231		
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporatio		Yes	X	No	
2	If the transferor was a corporation, complete questions 2a through 2d.					
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c))	by				
	five or fewer domestic corporations?			Yes	Х	No
b	Did the transferor remain in existence after the transfer?			X Yes		No
-	If not, list the controlling shareholder(s) and their identifying number(s).					
	Controlling shareholder		Identifvi	ng number		
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent cor	poration?		Yes	X	No
	If not, list the name and employer identification number (EIN) of the parent corporation.					
	Name of parent corporation	EI	N of pare	nt corporatio	on	
N/Z					Х	L
a	Have basis adjustments under section 367(a)(4) been made?			Yes		No
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as suc	h under s	ection 367	7).		
•	complete questions 3a through 3d.	iii ariaor c	,001,011,001	, ,,		
_	·					
	List the name and EIN of the transferor's partnership.					
	Name of partnership		EIN of p	artnership		
	KENA CAPITAL SPLITTER X, LP.	26-3639			v	١
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?			└── Yes	X	
	Is the partner disposing of its <b>entire</b> interest in the partnership?			Yes	Х	No
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	d			77	1
Dox	securities market?  t II Transferee Foreign Corporation Information (see instructions)			Yes	X	No
Par			F- 1-1			
4	Name of transferee (foreign corporation)		sa identi	ifying numbe	er, it a	ıny
REC	C 2017 EMP E PART. X S.A.					
6 777	Address (including country) BRIGADEIRO FARIA		<b>5b</b> Refere	ence ID numb	oer	
			00-0000	0040		
	M BIBI, 04538-133 BRAZIL		00-000	7049		
7 BR	Country code of country of incorporation or organization					
8 COF	Foreign law characterization (see instructions)					
9	Is the transferee foreign corporation a controlled foreign corporation?			X Yes		No
024531	04-01-20 LHA For Paperwork Reduction Act Notice, see separate instructions.			Form <b>926</b> (F	lev. 1	1-2018)

	Regarding Tran	sfer of Property (see	instructions)		
Section A - Cash					_
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property	(c) Fair market value date of transfe		(e) Gain recognized on transfer
Cash	12/31/2020	1 1 1	356,6		
10 Was cash the only pro If "Yes," skip the rema	•				X Yes No
Section B - Other Pro	perty (other tha	n intangible property			
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property	(c) Fair market value date of transfe		<b>(e)</b> Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with					
built-in loss					
Totals					
foreign corporation?  If "Yes," go to line 12th  b Was the transferor a complete (including a branch the lif "Yes," continue to lifus to limit to lifus transferee foreign corplete (including a branch the transferee foreign corplete (including a branch to lifus transferee (including a branch to lifus transferred (including a branch to lifus transferred (including a branch to lifus transferred (including a branch the life "Yes," continue to life a branch transferred (including a branch the life "Yes," continue to life a branch the transferred (including a branch the life "Yes," continue to life a branch transferred (including a branch the life "Yes," continue to life a branch transferred (including a branch transferred (includ	foreign branch (included).  condomestic corporation at is a foreign disregane 12c. If "No," skip I transfer, was the domporation?  ne 12d. If "No," skip I oss amount included asfer property describ C and questions 14a t		n disregarded entity) to disregarded entity) to all of the assets of a 10%-owned foreign corline 13.	ransferred to a  foreign branch poration?  to the	Yes No Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	Property Subje	ct to Section 367(d)	<del></del>		1
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's leng	th price Cost or other	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					
Totals				l	Form <b>926</b> (Rev. 11-2018)

# Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128** 

Pa	rt I U.S. Transferor Information (see instructions)		
Nam	e of transferor	Identifying numbe	r (see instructions)
CA	LIFORNIA HEALTHCARE FOUNDATION	95-4523231	
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?	Yes	X No
2	If the transferor was a corporation, complete questions 2a through 2d.	·······	
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by		
	five or fewer domestic corporations?	Yes	X No
b	Did the transferor remain in existence after the transfer?	Yes	☐ No
	If not, list the controlling shareholder(s) and their identifying number(s).		
	Controlling shareholder Id	lentifying number	
	Controlling Shareholder		
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation?	Yes	X No
	If not, list the name and employer identification number (EIN) of the parent corporation.		
	Name of parent corporation EIN o	of parent corporation	on
N/	A		
d	Have basis adjustments under section 367(a)(4) been made?	Yes	X No
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under sect	ion 367),	
	complete questions 3a through 3d.		
а	List the name and EIN of the transferor's partnership.		
	Name of partnership E	IN of partnership	
MA	KENA CAPITAL SPLITTER X, LP. 26-363981	5	
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		X No
	Is the partner disposing of its entire interest in the partnership?		X No
	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established		
	securities market?	Yes	X No
Pa	rt II Transferee Foreign Corporation Information (see instructions)		
4	Name of transferee (foreign corporation) 5a	Identifying number	er, if any
KU	VARE UK HOLDINGS LIMITED		
6		Reference ID numb	oer
	FLOOR 6 ST	0.000043	
	,	0-0000043	
<b>7</b> UK	Country code of country of incorporation or organization		
8	Foreign law characterization (see instructions)		
	PROPRIED NO CHARACTERIZATION (See Instructions)		
9	Is the transferee foreign corporation a controlled foreign corporation?	Yes	X No

Part III Information Regarding Transfer of Property (see instructions)						
Section A - Cash		(1)	_	()	( )	
Type of property	(a) Date of transfer	<b>(b)</b> Description of property		(c) narket value on e of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer
Cash	12/31/2020			197,605.		
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and o					X Yes No
Section B - Other Pro		n intangible property	subject			
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property		(c) narket value on e of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer
Stock and securities						
Inventory						
Other property						
(not listed under			-			
another category)						
Property with						
built-in loss						
Totals						
<ul> <li>12 a Were any assets of a factoring corporation?</li> <li>If "Yes," go to line 12b</li> <li>Was the transferor a dincluding a branch that if "Yes," continue to line</li> <li>c Immediately after the transferee foreign corporation.</li> <li>If "Yes," continue to line</li> <li>d Enter the transferred line</li> </ul>	foreign branch (included)  domestic corporation at is a foreign disregation at 12c. If "No," skip transfer, was the done poration?  ne 12d. If "No," skip oss amount included asfer property described and questions 14a for the state of the s	-	all of the owned line 13.	assets of a foreig foreign corporati	n branch	Yes       No         Yes       No         Yes       No         Yes       No         Yes       No
Section 6 - Intangible		ect to section sor(a)	T			
Type of property	(a) Date of transfer	<b>(b)</b> Description of property	(c) Useful life	(d) Arm's length pri on date of trans		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
			+			+
Totals						
					F	form <b>926</b> (Rev. 11-2018)

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14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	☐ No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		☐ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	☐ No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) ▶\$		
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	☐ No
	•		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
	· · · · · · · · · · · · · · · · · · ·		
Pa	t IV Additional Information Regarding Transfer of Property (see instructions)		
ı u	Additional mornation regulating transfer of troperty (acc matractions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before489 % (b) After491 %		
17	Type of nonrecognition transaction (see instructions) ▶ SECTION 351		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)		X No
d	Exchange gain under section 987		X No
19	Did this transfer result from a change in entity classification?		X No
		Yes	X No
	If "Yes," complete lines 20b and 20c.		
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	<b>&gt;</b> \$	
C	Did the domestic corporation not recognize gain or loss on the distribution of property because the	• • <u></u>	
C		Yes	No
^4		Yes	NO
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation		V N
	covered by section 367(e)(1)? See instructions	Yes	X No

## Return by a U.S. Transferor of Property

to a Foreign Corporation

• Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Part I U.S. Transferor Information (see instructions)		
Name of transferor		Identifying number (see instructions)
CALIFORNIA HEALTHCARE FOUNDATION		95-4523231
1 Is the transferee a specified 10%-owned foreign corporation that is	not a controlled foreign corporation	
2 If the transferor was a corporation, complete questions 2a through	•	
a If the transfer was a section 361(a) or (b) transfer, was the transfero		NV
	controlled (diract beation boo(o)) b	
b Did the transferor remain in existence after the transfer?		
If not, list the controlling shareholder(s) and their identifying number		
Controlling shareholder		Identifying number
c If the transferor was a member of an affiliated group filing a consolir If not, list the name and employer identification number (EIN) of the		oration? Yes X No
Name of parent corporation		EIN of parent corporation
N/A		
d Have basis adjustments under section 367(a)(4) been made?		Yes X No
, , , , , , , , , , , , , , , , , , , ,		
3 If the transferor was a partner in a partnership that was the actual to	ransferor (but is not treated as such	under section 367),
complete questions 3a through 3d.		
a List the name and EIN of the transferor's partnership.		
Name of partnership		EIN of partnership
Name of partnership		EIN OF PARTIEFSHIP
MAKENA CAPITAL SPLITTER X, LP.		26-3639815
<b>b</b> Did the partner pick up its pro rata share of gain on the transfer of p		
<b>c</b> Is the partner disposing of its <b>entire</b> interest in the partnership?		
d Is the partner disposing of an interest in a limited partnership that is	regularly traded on an established	
securities market?  Part II Transferee Foreign Corporation Information (s		Yes X No
	ee instructions)	
Name of transferee (foreign corporation)		5a Identifying number, if any
ALDRIN MIDCO LIMITED		
6 Address (including country)		<b>5b</b> Reference ID number
THE OLD SCHOOL SCHOOL LANE		
COLCHESTER, CO7 6LZ UNITED KINGDOM		00-000050
7 Country code of country of incorporation or organization UK		
8 Foreign law characterization (see instructions) CORPORATION		
9 Is the transferee foreign corporation a controlled foreign corporation	n?	X Yes No
024531 04-01-20 LHA For Paperwork Reduction Act Notice, see sepa		Form <b>926</b> (Rev. 11-2018)

Part III Information Regarding Transfer of Property (see instructions)						
Section A - Cash						
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property		(c) narket value on e of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer
Cash	12/18/2020			153,262.		
10 Was cash the only property transferred? No  If "Yes," skip the remainder of Part III and go to Part IV.						
Section B - Other Pro	<del>* * *</del>	<del> </del>	subject		· <i>''</i>	
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property		(c) narket value on e of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer
Stock and securities						
Inventory						
Other property (not listed under another category)						
Property with built-in loss						
Totals				+		
foreign corporation?  If "Yes," go to line 12th  b Was the transferor a description of the including a branch transferee foreign corp.  If "Yes," continue to limit a branch transferred left including a branch transferred left including inclu	foreign branch (included).  domestic corporation at is a foreign disregane 12c. If "No," skip I transfer, was the domporation?  ne 12d. If "No," skip I oss amount included asfer property describ c and questions 14a t		all of the 10%-owned 10%-owned 10%-owned 10%-owned 10%-owned 10%-owned	assets of a foreign foreign corporation	rred to a [	Yes       No         Yes       No         Yes       No         Yes       No
Section C - Intangible	Property Subje	ct to Section 367(d)		1		
Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length pric on date of transfe		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
Totals						
					F	Form <b>926</b> (Rev. 11-2018)

Did the domestic corporation not recognize gain or loss on the distribution of property because the

covered by section 367(e)(1)? See instructions

property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation

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No

X No

Yes

Yes

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