

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)

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization THE URBAN LAND INSTITUTE Doing business as ULI - THE URBAN LAND INSTITUTE Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2001 L STREET NW 200 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036	D Employer identification number 53-0159845 E Telephone number (202) 624-7000
	F Name and address of principal officer: RON PRESSMAN SAME AS C ABOVE	G Gross receipts \$ 96,355,102. H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? Yes No If "No," attach a list. See instructions H(c) Group exemption number ▶
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	
	J Website: ▶ WWW.ULI.ORG	
	K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	L Year of formation: 1936 M State of legal domicile: IL

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: (SEE SCHEDULE O)		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	283
	6 Total number of volunteers (estimate if necessary)	6	7200
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	1,195,739.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	23,224,495.	11,245,340.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	50,421,844.	67,394,009.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	879,624.	776,906.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
		74,525,963.	79,416,255.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,478,151.	1,482,728.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	31,078,207.	33,501,321.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,215,743.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	30,272,594.	42,367,045.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	62,828,952.	77,351,094.
19 Revenue less expenses. Subtract line 18 from line 12	11,697,011.	2,065,161.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	95,749,583.	92,103,819.
	22 Net assets or fund balances. Subtract line 21 from line 20	28,614,036.	27,327,818.
		67,135,547.	64,776,001.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer RON PRESSMAN, GLOBAL CEO Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name ELIZABETH W. HELLER	Preparer's signature <i>Elizabeth Heller</i>
	Firm's name ▶ RSM US LLP	Date 03/17/23
	Firm's address ▶ 1250 H STREET, SUITE 700 WASHINGTON, DC 20005	Check if self-employed <input type="checkbox"/> PTIN P00397829
		Firm's EIN ▶ 42-0714325
		Phone no. 202-293-2200

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

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

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

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

Type or print	Name of exempt organization or other filer, see instructions. THE URBAN LAND INSTITUTE	Taxpayer identification number (TIN) 53-0159845
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2001 L STREET NW, 200	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

LEO GONZALEZ, CFO

- The books are in the care of ▶ **2001 L STREET NW, 200 - WASHINGTON, DC 20036**

Telephone No. ▶ **(202) 624-7000**

Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **JUL 1, 2021**, and ending **JUN 30, 2022**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SHAPE THE FUTURE OF THE BUILT ENVIRONMENT FOR TRANSFORMATIVE IMPACT IN COMMUNITIES WORLDWIDE. WE ARE A GLOBAL NETWORK OF PROFESSIONALS IN EVERY SECTOR OF REAL ESTATE DEVELOPMENT AND LAND USE, FROM PRIVATE ENTERPRISE TO PUBLIC SERVICE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 29,532,937. including grants of \$ 78,275.) (Revenue \$ 23,795,615.) DISTRICT AND NATIONAL COUNCILS: DISTRICT COUNCILS DELIVER THE ULI MISSION DOMESTICALLY AT THE LOCAL LEVEL. THEY ENGAGE LOCAL MEMBERS THROUGH DEVELOPING VARIOUS ULI PRIORITY PROGRAMS, HOSTING EDUCATIONAL FORUMS, AND CONVENING EVENTS SUCH AS SPECIAL INITIATIVE CONFERENCES KEYED TO THE RELEASE OF PUBLICATIONS LIKE EMERGING TRENDS IN REAL ESTATE. BY CONDUCTING COMMUNITY OUTREACH PROGRAMS AND PROVIDING INDUSTRY EXPERTISE TO COMMUNITY LEADERS, DISTRICT COUNCILS FOCUS ON OPPORTUNITIES TO FOSTER COLLABORATION LOCALLY AND BUILD HEALTHY, SUSTAINABLE COMMUNITIES.

NATIONAL COUNCILS PROVIDE AN OPPORTUNITY TO INFLUENCE LOCAL LAND USE POLICY INTERNATIONALLY BY FACILITATING THE EXCHANGE OF KNOWLEDGE

4b (Code:) (Expenses \$ 7,478,086. including grants of \$) (Revenue \$ 14,081,487.) MEETINGS/CONFERENCES: THE INSTITUTE SPONSORS TWO SIGNIFICANT DOMESTIC MULTI-DAY MEETINGS EACH YEAR THAT BRING TOGETHER INDUSTRY LEADERS FROM A VARIETY OF DISCIPLINES. THE SPRING MEETING IS OPEN TO MEMBERS ONLY, THE FALL MEETING IS OPEN TO NON-MEMBERS AND TYPICALLY DRAWS IN EXCESS OF 5,000 ATTENDEES INCLUDING DEVELOPERS, INVESTORS, ARCHITECTS, PLANNERS, BROKERS, ATTORNEYS AND GOVERNMENT OFFICIALS. IN ADDITION TO ITS SPRING AND FALL MEETINGS, ULI EUROPE AND ULI ASIA HOST LARGE ANNUAL CONFERENCES IN CITIES WITHIN THEIR RESPECTIVE REGIONS.

4c (Code:) (Expenses \$ 7,182,395. including grants of \$ 22,336.) (Revenue \$ 2,070,048.) CONTENT: THE INSTITUTE DELIVERS CONTENT TO ITS MEMBERS AND THE COMMUNITY AT LARGE THROUGH A NUMBER OF FUNDED CENTERS AND INITIATIVES:

THE ULI CENTER FOR SUSTAINABILITY AND ECONOMIC PERFORMANCE IS DEDICATED TO CREATING HEALTHY, RESILIENT, AND HIGH-PERFORMANCE COMMUNITIES AROUND THE WORLD. THROUGH THE WORK OF ITS GREENPRINT AND URBAN RESILIENCE PROGRAMS, THE CENTER PROVIDES LEADERSHIP AND SUPPORT TO LAND USE PROFESSIONALS TO INVEST IN ENERGY PERFORMANCE AND PORTFOLIO RESILIENCE WHILE REDUCING RISKS DUE TO A CHANGING CLIMATE.

THE ULI CENTER FOR CAPITAL MARKETS AND REAL ESTATE WAS FOUNDED IN 2009

4d Other program services (Describe on Schedule O.) (Expenses \$ 16,574,460. including grants of \$ 1,382,117.) (Revenue \$ 27,446,859.)

4e Total program service expenses 60,767,878.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
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 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
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? <i>If "Yes," complete Schedule L, Part II</i>	26	X
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? <i>If "Yes," complete Schedule L, Part III</i>	27	X
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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33 X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

Part 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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 280	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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.		
	17		
b	Enter the number of voting members included on line 1a, above, who are independent		
	16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?	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?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	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	
b	Other officers or key employees of the organization	X	
	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
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 **CA, CT, DC, GA**
- 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.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **LEO GONZALEZ, CFO - (202) 624-7000**
2001 L STREET NW, 200, WASHINGTON, DC 20036

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, 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.

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 per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WILLIAM EDWARD WALTER GLOBAL CEO	36.00 2.00	X		X				906,665.	0.	25,125.
(2) ADAM SMOLYAR CHIEF MARKETING & TECHNOLOGY OFFICER	38.00 0.00			X				484,508.	0.	18,464.
(3) GWYNETH COTE PRESIDENT - AMERICAS	38.00 0.00			X				454,994.	0.	25,513.
(4) LISETTE VAN DOORN CEO - ULI EUROPE	38.00 0.00			X				377,383.	0.	23,249.
(5) MIKE TERSECK CFO THRU 7/1/2021	38.00 0.00			X				352,279.	0.	22,495.
(6) DAVID FAULKNER PRESIDENT - ASIA	38.00 0.00			X				334,290.	0.	4,825.
(7) MARY BETH CORRIGAN EVP GLOBAL LEADERS	38.00 0.00				X			280,256.	0.	7,205.
(8) STEVE RIDD EVP BUSINESS OOPERATIONS	38.00 0.00				X			275,097.	0.	0.
(9) CYNTHIA CHANCE EVP ULI LEARNING	38.00 0.00				X			261,557.	0.	8,548.
(10) WILLIAM GRAYSON EXECUTIVE DIRECTOR - CENTERS	38.00 0.00				X			255,899.	0.	7,031.
(11) FELIX CIAMPA EXECUTIVE DIRECTOR	38.00 0.00					X		253,938.	0.	7,932.
(12) MARTY BORKO EXECUTIVE DIRECTOR	38.00 0.00					X		236,164.	0.	21,639.
(13) MATT KONETSCHNI SVP	38.00 0.00				X			236,118.	0.	21,096.
(14) STEVEN SLEPIAN SVP FINANCE	38.00 0.00					X		225,316.	0.	16,291.
(15) MICHELLE FREY EXECUTIVE DIRECTOR	38.00 0.00					X		218,769.	0.	20,465.
(16) GEORGE DANILOVICS EVP IT	38.00 0.00					X		219,553.	0.	11,944.
(17) LEO GONZALEZ CFO	38.00 0.00			X				209,812.	0.	11,256.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) PETER BALLON GLOBAL CHAIRMAN	2.00 2.00	X		X				0.	0.	0.
(19) JONATHAN BRINDSDEN AMERICA'S CHAIR	2.00 0.00	X		X				0.	0.	0.
(20) ANNE KAVANAUGH SECRETARY	2.00 0.00	X		X				0.	0.	0.
(21) AMY PRICE TREASURER	2.00 0.00	X		X				0.	0.	0.
(22) OWEN THOMAS IMMEDIATE PAST CHAIRMAN	2.00 0.00	X		X				0.	0.	0.
(23) FARON HILL FOUNDATION CHAIR	2.00 2.00	X						0.	0.	0.
(24) TENG CHYE KHOO ULI ASIA CHAIR	2.00 0.00	X						0.	0.	0.
(25) BEN CHA DIRECTOR	2.00 0.00	X						0.	0.	0.
(26) DIANE HOSKINS DIRECTOR	2.00 0.00	X						0.	0.	0.
1b Subtotal								5,582,598.	0.	253,078.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								5,582,598.	0.	253,078.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **71**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
FREEMAN AUDIO VISUAL 3225 W SUNSET ROAD, LAS VEGAS, NV 89118	MEETING SUPPORT	1,666,536.
MANCHESTER GRAND HYATT 1 MARKET PLACE, SAND DIEGO, CA 92101	MEETING VENUE	1,218,604.
FREEMAN DECOR PO BOX 650036, DALLAS, TX 75265	MEETING SUPPORT	930,082.
VELIR STUDIOS INC. 212 ELM STREET, SOMERVILLE, MA 02144	ENTERPRISE WEBSITES & DIGITAL MARKETING	779,144.
SUTHERLAND GOVERNMENT SOLUTIONS 11955 FREEDOM DRIVE, RESTON, VA 20190	OUTSOURCED CUSTOMER SERVICE	740,935.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **68**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d	9,229,555.				
	e	Government grants (contributions)	1e	2,000,000.				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	15,785.				
	g	Noncash contributions included in lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f			11,245,340.			
	Program Service Revenue	2 a	DISTRICT/NATIONAL COUNCILS	Business Code	900099	23,795,615.	23795615.	
b		MEMBERSHIP DUES		900099	20,724,520.	20724520.		
c		MEETINGS & CONFERENCES		900099	14,081,487.	14081487.		
d		PRODUCT COUNCILS		900099	2,175,606.	2,175,606.		
e		CONTENT		900099	2,070,048.	2,070,048.		
f		All other program service revenue		541800	4,546,733.	3,350,994.	1195739.	
g		Total. Add lines 2a-2f			67,394,009.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)			213,508.		213,508.
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					17,502,245.			
	b	Less: cost or other basis and sales expenses	7b	16,938,847.				
	c	Gain or (loss)	7c	563,398.				
	d	Net gain or (loss)			563,398.		563,398.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	_____	Business Code					
	b	_____						
	c	_____						
	d	All other revenue						
	e	Total. Add lines 11a-11d						
12	Total revenue. See instructions			79,416,255.	66198270.	1195739.	776,906.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,209,938.	1,209,938.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	272,790.	272,790.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,419,213.	1,626,679.	3,774,679.	17,855.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	23,358,231.	19,297,590.	3,268,493.	792,148.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	702,435.	510,745.	171,918.	19,772.
9 Other employee benefits	2,394,311.	1,740,919.	585,999.	67,393.
10 Payroll taxes	1,627,131.	1,183,098.	398,234.	45,799.
11 Fees for services (nonemployees):				
a Management				
b Legal	234,136.	11,460.	222,676.	
c Accounting	294,980.	75,121.	219,859.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	208,707.		208,707.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	15,765,755.	13,100,841.	2,609,468.	55,446.
12 Advertising and promotion	271,488.	225,806.	45,646.	36.
13 Office expenses	2,401,766.	2,262,151.	121,253.	18,362.
14 Information technology	1,671,239.		1,671,239.	
15 Royalties				
16 Occupancy	2,342,140.	1,535,842.	723,343.	82,955.
17 Travel	1,701,510.	1,532,094.	155,962.	13,454.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	13,496,576.	13,309,112.	168,094.	19,370.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,783,781.	1,068,082.	642,065.	73,634.
23 Insurance	342,767.	77,876.	264,891.	
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.)				
a MEMBER RECOGNITION	869,392.	851,824.	16,371.	1,197.
b OTHER EXPENSES	518,283.	413,470.	96,491.	8,322.
c DUES SHARING	380,475.	380,475.		
d BAD DEBTS	84,050.	81,965.	2,085.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	77,351,094.	60,767,878.	15,367,473.	1,215,743.
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)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing		1		
	2 Savings and temporary cash investments	12,110,191.	2	7,233,734.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	1,898,201.	4	2,582,050.	
	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		5		
	6 Loans and other receivables from other disqualified persons (as defined under 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	132,644.	8	202,673.	
	9 Prepaid expenses and deferred charges	1,873,264.	9	1,163,833.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,533,414.			
	b Less: accumulated depreciation	10b 13,267,770.	7,077,729.	10c	6,265,644.
	11 Investments - publicly traded securities	11,112,443.	11	8,113,685.	
	12 Investments - other securities. See Part IV, line 11	11,109,176.	12	14,668,035.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	50,435,935.	15	51,874,165.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	95,749,583.	16	92,103,819.		
Liabilities	17 Accounts payable and accrued expenses	8,027,884.	17	8,233,836.	
	18 Grants payable		18		
	19 Deferred revenue	13,806,579.	19	14,570,489.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	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		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,779,573.	25	4,523,493.	
	26 Total liabilities. Add lines 17 through 25	28,614,036.	26	27,327,818.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	23,626,181.	27	21,583,313.	
	28 Net assets with donor restrictions	43,509,366.	28	43,192,688.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building, or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
	32 Total net assets or fund balances	67,135,547.	32	64,776,001.	
	33 Total liabilities and net assets/fund balances	95,749,583.	33	92,103,819.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	79,416,255.
2	Total expenses (must equal Part IX, column (A), line 25)	2	77,351,094.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,065,161.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	67,135,547.
5	Net unrealized gains (losses) on investments	5	-3,562,749.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-861,958.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	64,776,001.

Part XII Financial Statements and Reporting

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 Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on 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 Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	25813142.	25726969.	27106157.	42027887.	31969860.	152644015
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	50293105.	52418766.	45027940.	31301867.	45473750.	224515428
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 Total. Add lines 1 through 5	76106247.	78145735.	72134097.	73329754.	77443610.	377159443
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						377159443

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	76106247.	78145735.	72134097.	73329754.	77443610.	377159443
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	564,774.	602,653.	605,171.	328,341.	213,508.	2314447.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	564,774.	602,653.	605,171.	328,341.	213,508.	2314447.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	76671021.	78748388.	72739268.	73658095.	77657118.	379473890

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	99.39 %
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	99.34 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	.61 %
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	.66 %

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	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? <i>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.</i>		
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? <i>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.</i>		
1		
2		

Section C. Type II Supporting Organizations

	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)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section 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 instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
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? <i>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.</i>	Yes	No	
b 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? <i>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.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a 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? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

THE URBAN LAND INSTITUTE

Employer identification number

53-0159845

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	_____ _____ _____	\$ <u>9,229,555.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
<u>2</u>	_____ _____ _____	\$ <u>2,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization THE URBAN LAND INSTITUTE Employer identification number 53-0159845

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 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?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 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, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 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 conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 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. 1b 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, (ii) Assets included in Form 990, Part X. 2 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	66,538,408.	51,399,826.	50,069,933.	48,956,310.	45,367,954.
b Contributions	35,701,960.	39,848,411.	32,719,107.	34,962,129.	34,622,322.
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs	35,674,587.	24,709,829.	31,389,214.	33,848,506.	31,033,966.
f Administrative expenses					
g End of year balance	66,565,781.	66,538,408.	51,399,826.	50,069,933.	48,956,310.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 35.1000 %
 - b Permanent endowment _____ %
 - c Term endowment 64.9000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | X | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input checked="" type="checkbox"/> | X | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		5,481,770.	2,523,421.	2,958,349.
d Equipment		1,051,461.	829,789.	221,672.
e Other		13,000,183.	9,914,560.	3,085,623.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				6,265,644.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests	7,894,318.	END-OF-YEAR MARKET VALUE
(3) Other		
(A) REAL ESTATE	1,433,146.	END-OF-YEAR MARKET VALUE
(B) 593397-PIMCO TOTAL RTN FD		
(C) INSTL (PTTRX)	5,340,571.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	14,668,035.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) ACCRUED INTEREST RECEIVABLE	17.
(2) BENEFICIAL INTEREST IN ULI FOUNDATION	43,266,954.
(3) DUE FROM ULI FOUNDATION	8,022,372.
(4) DEPOSITS	584,822.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	51,874,165.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	4,523,493.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	4,523,493.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	75,750,799.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-3,562,749.	
b	Donated services and use of facilities	2b	106,000.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	-3,456,749.	
3	Subtract line 2e from line 1	3	79,207,548.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	208,707.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	208,707.	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	79,416,255.	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	78,110,345.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	106,000.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	861,958.	
e	Add lines 2a through 2d	2e	967,958.	
3	Subtract line 2e from line 1	3	77,142,387.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	208,707.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	208,707.	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	77,351,094.	

Part 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 V, LINE 4:

BOARD DESIGNATED NET ASSETS ARE ASSETS HELD BY THE LOCAL DISTRICT/NATIONAL COUNCIL AND PRODUCT COUNCIL PROGRAMS AND ARE USED TO SUPPORT THEIR PROGRAMS.

DONOR RESTRICTED NET ASSETS WHICH ARE PURPOSE RESTRICTED, REPRESENT ASSETS HELD BY ULIF THAT ARE AVAILABLE FOR ULIF PROGRAMS.

PART X, LINE 2:

ULI AND ULIF ARE ORGANIZED AS DISTRICT OF COLUMBIA NONPROFIT CORPORATIONS AND HAVE BEEN RECOGNIZED BY THE IRS AS EXEMPT FROM FEDERAL INCOME TAXES UNDER IRS SECTION 501(A) AS AN ORGANIZATION DESCRIBED IN IRS SECTION

Part XIII Supplemental Information (continued)

501(C)(3), QUALIFY FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER IRC SECTIONS 170(B)(1)(A)(VI) AND (VIII), AND HAVE BEEN DETERMINED NOT TO BE PRIVATE FOUNDATIONS UNDER IRS SECTIONS 509(A)(1) AND (3). ULI AND ULIF ARE ANNUALLY REQUIRED TO FILE A RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) WITH THE IRS. IN ADDITION, ULI AND ULIF ARE SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THEIR EXEMPT PURPOSE, AND IF APPLICABLE, FILES AN EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN (FORM 990-T) WITH THE IRS.

ULI SERVICES LIMITED AND ULI EXHIBITION AND CONSULTING (SHANGHAI) LIMITED ARE SUBJECT TO TAXATION IN HONG KONG AND CHINA, RESPECTIVELY. FOR THE YEARS ENDED JUNE 30, 2022 AND 2021, THE ENTITIES HAD A \$4,730 TAX BENEFIT AND OWED \$434 IN TAXES, RESPECTIVELY.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

UNREALIZED LOSS ON FOREIGN CURRENCY TRANSLATION	861,958.
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**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" 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? Yes No
- 2 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.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	2	18	PROGRAM SERVICES	SEE PART V FOR DESCRIPTION OF ACTIVITIES IN THE REGION	6,182,665.
EUROPE (INCLUDING ICELAND & GREENLAND)	2	22	PROGRAM SERVICES	SEE PART V FOR DESCRIPTION OF ACTIVITIES IN THE REGION	5,279,187.
EAST ASIA AND THE PACIFIC	0	0	INVESTMENT IN SUBSIDIARY ORGANIZATIONS		1,483,673.
3 a Subtotal	4	40			12,945,525.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	4	40			12,945,525.

Part 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 Instructions for Form 926)* Yes No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes 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 Instructions for Form 5713; don't file with Form 990)* Yes 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 F, PART I, LINE 3(E), DESCRIPTIONS OF ACTIVITIES IN ASIA:

THIS REGION IS INVOLVED WITH MANY OF THE SAME PROGRAM AREAS AS EUROPE.

THE FOLLOWING THEREFORE IS A JUST A LISTING OF THE PROGRAM HIGHLIGHTS

AS IT RELATES TO EACH OF THOSE AREAS:

AS OF JUNE 30, 2022 ASIA MEMBERSHIP TOTALED 2,759.

- IT HAS ACTIVE NATIONAL COUNCILS IN EIGHT COUNTRIES.

- IT PUBLISHED JOINTLY WITH PRICEWATERHOUSE COOPERS AN EMERGING TRENDS

IN REAL ESTATE ASIA PACIFIC STUDY, WHICH PROVIDES AN OUTLOOK ON ASIA

PACIFIC REAL ESTATE INVESTMENT AND DEVELOPMENT TRENDS, REAL ESTATE

FINANCE AND CAPITAL MARKETS, TRENDS BY PROPERTY SECTOR AND METROPOLITAN

AREA, AND OTHER REAL ESTATE ISSUES PERTINENT TO THE COUNTRIES IN ASIA.

- AREA OF CONTENT FOCUS IN SUSTAINABILITY AND CAPITAL MARKETS.

SCHEDULE F, PART I, LINE 3(E), DESCRIPTIONS OF ACTIVITIES IN EUROPE:**MEMBERSHIP:**

MEMBERSHIP IN ULI EMEA PROVIDES AN OPEN EXCHANGE OF IDEAS, NETWORKING

OPPORTUNITIES, AND THE ABILITY TO WORK WITH THE LEADERS OF THE LAND USE

INDUSTRY. EUROPEAN MEMBERS INCLUDE DEVELOPERS, BUILDERS, ENGINEERS,

ATTORNEYS, PLANNERS, INVESTORS, FINANCIAL ADVISORS, ACADEMICS,

ARCHITECTS, AND PUBLIC OFFICIALS. MEMBERS HAVE ACCESS TO OBJECTIVE

INFORMATION AND THE EXPERIENCE OF THOSE ACTIVE IN EVERY DISCIPLINE OF

REAL ESTATE DEVELOPMENT, INVESTMENT, AND REGULATION. AS OF JUNE 30,

2022, ULI HAD 4,777 MEMBERS IN EUROPE.

NATIONAL COUNCILS:

THE PURPOSE OF THE NATIONAL COUNCIL PROGRAM IS TO PROVIDE ULI'S

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.

PRESENCE AT THE LOCAL LEVEL THRU THE DEVELOPMENT AND PRESENTATION OF PROGRAMS OF WORK THAT ADDRESS LOCAL REAL ESTATE AND URBAN PLANNING ISSUES. THE ACTIVITIES RECORDED HERE REPRESENT THE ACTIVITIES PERFORMED DIRECTLY BY THE NATIONAL COUNCILS. ULI HAS 17 NATIONAL COUNCILS IN EUROPE.

PRODUCT COUNCILS:

ULI PRODUCT COUNCILS PROVIDE A FORUM FOR INFORMATION EXCHANGE ON THE STATE-OF-THE-ART OF A VARIETY OF DEVELOPMENT SECTORS. FULL MEMBERS ARE ELIGIBLE TO SERVE ON THESE COUNCILS.

MEETINGS/CONFERENCES:

THIS PROGRAM FOCUSES ON DEVELOPMENT TOPICS OF IMMEDIATE INTEREST INCLUDING THE EUROPEAN ANNUAL CONFERENCE WHICH COVERS INTERNATIONAL REAL ESTATE FINANCE AND INVESTMENT, AN ANNUAL LEADERSHIP RETREAT, AND ONE TOPICAL/TRENDS CONFERENCES.

PUBLISHING:

THE PUBLISHING INITIATIVE PRODUCES AN ANNUAL EMERGING TRENDS IN REAL ESTATE EUROPE REPORT. THIS REPORT IS JOINTLY PUBLISHED BY THE URBAN LAND INSTITUTE (ULI) AND PRICEWATERHOUSECOOPERS AND IS BASED ON SURVEYS AND INTERVIEWS WITH APPROXIMATELY 600 INDUSTRY EXPERTS, WHICH COVERS 27 MARKETS IN COUNTRIES THROUGHOUT EUROPE. THE REPORT CONTAINS PREDICTIONS FOR INDIVIDUAL PROPERTY SECTORS AS WELL AS MARKETS, ALONG WITH INSIGHTS REGARDING REAL ESTATE CAPITAL MARKETS AND THE ECONOMY IN GENERAL.

ADVISORY SERVICES:

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.

ULI PROVIDES TECHNICAL EXPERTISE OF ITS MEMBERS TO CITIES, PRIVATE DEVELOPERS, AND OTHER ORGANIZATIONS THAT NEED OBJECTIVE ANALYSIS AND ADVICE ON HOW TO SOLVE DIFFICULT LAND USE, DEVELOPMENT, AND REDEVELOPMENT PROBLEMS.

DEVELOPMENT:

THIS DEPARTMENT HAS THE RESPONSIBILITY OF RAISING THE SPONSORSHIP FUNDS FOR ALL EUROPE'S CONFERENCES/PROGRAMS.

CONTENT FOCUS:

ULI'S EUROPEAN RESEARCH CENTER OVERSEES STRATEGY AND DELIVERY FOR BROAD RANGE OF TOPICS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **THE URBAN LAND INSTITUTE** Employer identification number **53-0159845**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE ULI FOUNDATION 2001 L STREET, NW #200 WASHINGTON, DC 20036-4948	23-7133957	501(C)(3)	1,197,938.	0.			CONTRIBUTION
TEXAS A&M FOUNDATION 202 LANGFORD COLLEGE STATION, TX 77843	74-2245072	501(C)(3)	10,000.	0.			STUDENT SCHOLARSHIPS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **2.**

3 Enter total number of other organizations listed in the line 1 table ▶ **0.**

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

Schedule I (Form 990) 2021

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
COMMUNITY OUTREACH	86	30,161.	0.		
HINES AWARD	31	79,000.	0.		
RANDALL LEWIS HEALTH MENTORSHIP	15	9,600.	0.		
AWARD FOR EXCELLENCE	1	4,276.	0.		
URBAN PLAN	61	28,665.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

MOST OF THE FUNDING PROVIDED TO INDIVIDUALS AND ORGANIZATIONS ARE AWARDS FOR PARTICIPATION IN ULI'S AWARD PROGRAMS (MOST NOTABLY THE JC NICHOLS PRIZE FOR VISIONARIES IN URBAN DEVELOPMENT AND THE GERALD D. HINES STUDENT URBAN DESIGN COMPETITION).

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WAVE MAKERS	1.	1,140.	0.		
VISIONARIES IN URBAN DEVELOPMENT	1.	100,000.	0.		
NICHOLS PRIZE	1.	6,304.	0.		
IMPACT AWARE	3.	5,618.	0.		
WOMEN'S LEADERSHIP	3.	4,196.	0.		
REAL ESTATE ACCELERATOR LAB	5.	2,500.	0.		
YOUNG LEADERS	3.	1,042.	0.		
PLACEMAKING	1.	288.	0.		

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

THE URBAN LAND INSTITUTE

Employer identification number

53-0159845

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM EDWARD WALTER GLOBAL CEO	(i)	574,556.	326,775.	5,334.	8,700.	19,665.	935,030.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ADAM SMOLYAR CHIEF MARKETING & TECHNOLOGY OFFICER	(i)	388,729.	95,149.	630.	8,700.	9,764.	502,972.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) GWYNETH COTE PRESIDENT - AMERICAS	(i)	370,485.	82,703.	1,806.	8,700.	16,813.	480,507.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LISETTE VAN DOORN CEO - ULI EUROPE	(i)	317,532.	59,851.	0.	0.	23,249.	400,632.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MIKE TERSECK CFO THRU 7/1/2021	(i)	255,313.	85,373.	11,593.	16,987.	5,508.	374,774.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DAVID FAULKNER PRESIDENT - ASIA	(i)	274,810.	59,480.	0.	0.	4,825.	339,115.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MARY BETH CORRIGAN EVP GLOBAL LEADERS	(i)	237,618.	39,866.	2,772.	7,128.	77.	287,461.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) STEVE RIDD EVP BUSINESS OPERATIONS	(i)	236,496.	38,601.	0.	0.	0.	275,097.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) CYNTHIA CHANCE EVP ULI LEARNING	(i)	222,002.	37,749.	1,806.	6,750.	2,998.	271,305.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) WILLIAM GRAYSON EXECUTIVE DIRECTOR - CENTERS	(i)	226,312.	29,167.	420.	6,792.	239.	262,930.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) FELIX CIAMPA EXECUTIVE DIRECTOR	(i)	228,511.	24,461.	966.	6,892.	1,300.	262,130.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MARTY BORKO EXECUTIVE DIRECTOR	(i)	208,447.	22,383.	5,334.	6,489.	15,150.	257,803.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MATT KONETSCHNI SVP	(i)	211,300.	24,188.	630.	6,556.	14,540.	257,214.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) STEVEN SLEPIAN SVP FINANCE	(i)	195,251.	21,412.	8,653.	5,949.	10,342.	241,607.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) MICHELLE FREY EXECUTIVE DIRECTOR	(i)	196,017.	21,786.	966.	6,138.	15,769.	240,676.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) GEORGE DANILOVICS EVP IT	(i)	196,994.	22,139.	420.	6,000.	6,184.	231,737.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) LEO GONZALEZ	(i)	209,255.	0.	557.	0.	12,336.	222,148.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

BONUSES ARE DISCRETIONARY AND ARE BASED UPON PERFORMANCE CRITERIA ESTABLISHED BY THE INDIVIDUAL'S SUPERVISOR WHICH IS THEN EVALUATED BY THAT SUPERVISOR AT THE END OF THE FISCAL YEAR. THE SUPERVISOR RECOMMENDS THE INDIVIDUAL'S BONUS WHICH IS SUBJECT TO FINAL APPROVAL BY THE CEO. IN THE CASE OF THE CEO, THE PERFORMANCE CRITERIA IS ESTABLISHED BY THE CHAIRMAN AND EVALUATED BY THE ULI COMPENSATION COMMITTEE. IN THE CASE OF THE CFO, GLOBAL GOVERNANCE OFFICER, ULIF PRESIDENT, PRESIDENT AMERICA'S, CHIEF EXECUTIVE EMEA, CHIEF EXECUTIVE ASIA, AND CMMO (CHIEF MEMBER AND MARKETING OFFICER) THE CRITERIA IS ESTABLISHED BY THE CEO AND EVALUATED BY HIM IN CONJUNCTION WITH THE ULI COMPENSATION COMMITTEE.

THE % OF BASE COMPENSATION AN INDIVIDUAL IS ELIGIBLE (BUT NOT GUARANTEED) TO RECEIVE IS BASED UPON THEIR POSITION (VP AND ABOVE), OR THEIR EMPLOYMENT CONTRACT IF THEY HAVE ONE (I.E., CEO, CFO AND EXECUTIVE OFFICER).

THE COMPENSATION INFORMATION SHOWN IN PART VII OF THE FORM 990, AS WELL AS SCHEDULE J, IS PRESENTED ON A CALENDAR YEAR BASIS IN ACCORDANCE WITH IRS

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990 FILING INSTRUCTIONS.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

THE URBAN LAND INSTITUTE

Employer identification number

53-0159845

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SHAPE THE FUTURE OF THE BUILT ENVIRONMENT FOR TRANSFORMATIVE IMPACT IN
COMMUNITIES WORLDWIDE. WE ARE A GLOBAL NETWORK OF PROFESSIONALS IN
EVERY SECTOR OF REAL ESTATE DEVELOPMENT AND LAND USE, FROM PRIVATE
ENTERPRISE TO PUBLIC SERVICE

FORM 990, PAGE 1, PART I, LINE 6, NUMBER OF VOLUNTEERS:

WE INCLUDE ALL TRUSTEES, MEMBERS ON THE ESTABLISHED COMMITTEES AND
ADVISORY GROUPS, AND ESTIMATE A CERTAIN NUMBER OF VOLUNTEERS FOR EACH
DISTRICT COUNCIL AND FOR EACH ADVISORY SERVICE PANEL THAT IS PROVIDED.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

BETWEEN INDUSTRY EXPERTS AND COMMUNITY LEADERS. OUR NATIONAL COUNCILS
DO THIS THROUGH EDUCATIONAL FORUMS AND EVENTS SUCH AS CONFERENCES,
PROJECT TOURS, AND COMMUNITY OUTREACH PROGRAMS. IN THE ULI SPIRIT OF
OFFERING AN UNBIASED AND NONPARTISAN EXCHANGE ON ISSUES AFFECTING THE
INDUSTRY, NATIONAL COUNCILS PROVIDE THE AVENUES FOR ACTIVE DIALOGUES
AMONG PRIVATE INDUSTRY, ENVIRONMENTAL ORGANIZATIONS, AND PUBLIC
AGENCIES TO HELP PROVIDE SOLUTIONS TO LOCAL AND REGIONAL ISSUES.

THE ACTIVITIES RECORDED HERE ARE THE ACTIVITIES PERFORMED DIRECTLY BY
THE DISTRICT/NATIONAL COUNCILS, WHICH ARE ACCOUNTED FOR ON AN
INDIVIDUAL COUNCIL BASIS SEPARATELY WITHIN ULI, AS WELL AS THE COSTS
INCURRED BY ULI AT THE NATIONAL LEVEL TO SUPPORT THE DISTRICT/NATIONAL
COUNCIL PROGRAM. THE MAJORITY OF THE COSTS AT THE NATIONAL LEVEL ARE

Name of the organization

THE URBAN LAND INSTITUTE

Employer identification number

53-0159845

FOR PROGRAM AND LOGISTICAL SUPPORT AS WELL AS COMMUNITY OUTREACH EFFORTS IN THE AREAS OF REGIONAL COOPERATION, URBAN REVITALIZATION, AND EDUCATING HIGH SCHOOL STUDENTS ON LAND USE AND DEVELOPMENT ISSUES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

WITH A MISSION TO PROMOTE UNDERSTANDING OF THE REAL ESTATE CAPITAL MARKETS AND PROVIDE LEADERSHIP IN FOSTERING A HEALTHY AND PRODUCTIVE REAL ESTATE CAPITAL MARKETS SECTOR. ULI CURRENTLY IS ENGAGED IN REAL ESTATE FINANCE AND CAPITAL MARKET ACTIVITIES AND PROGRAMS ACROSS THE ORGANIZATION, AND THE CENTER IS INTEGRALLY INVOLVED IN DEVELOPING, GUIDING, AND/OR SHOWCASING BOTH ONGOING AND NEW PROGRAMS.

THE ULI TERWILLIGER CENTER FOR WORKFORCE HOUSING CONDUCTS RESEARCH, PERFORMS ANALYSIS, PROVIDES EXPERT ADVICE, AND DEVELOPS BEST PRACTICE RECOMMENDATIONS THAT REFLECT THE RESIDENTIAL LAND USE AND DEVELOPMENT PRIORITIES OF ULI MEMBERS IN ALL RESIDENTIAL PRODUCT TYPES, WITH SPECIAL ATTENTION TO WORKFORCE AND AFFORDABLE HOUSING. THE CENTER INTEGRATES ULI'S WIDE-RANGING HOUSING ACTIVITIES INTO A PROGRAM OF WORK THAT FURTHERS THE DEVELOPMENT OF MIXED-INCOME COMMUNITIES WITH A RANGE OF HOUSING OPTIONS.

THE ULI GREENPRINT CENTER IS A CATALYST FOR CHANGE, TAKING MEANINGFUL, IMMEDIATE AND MEASURABLE ACTIONS TO GENERATE REAL ESTATE SOLUTIONS THAT IMPROVE THE ENVIRONMENT THROUGH ENERGY EFFICIENCY WHILE DEMONSTRATING THE CORRELATION WITH INCREASED PROPERTY VALUES. GREENPRINT FOCUSES ON REDUCING THE CARBON FOOTPRINT OF EXISTING BUILDINGS, WHICH CURRENTLY REPRESENT ONE-THIRD OF GLOBAL CARBON EMISSIONS AND WORKS TO ACHIEVE ITS CARBON REDUCTION GOALS THROUGH EDUCATION AND ACTION. THE CENTER USES

Name of the organization

THE URBAN LAND INSTITUTE

Employer identification number

53-0159845

THE COLLECTIVE POWER OF ITS MEMBERSHIP TO LEAD BY EXAMPLE IN LOWERING CARBON EMISSIONS BY EXPLORING AND IMPLEMENTING ENERGY-REDUCING TECHNOLOGIES, SHARING THEIR PERFORMANCE RESULTS WITH THE PUBLIC THROUGH THE GREENPRINT PERFORMANCE REPORT, TM.

THE ROBERT C. LARSON LEADERSHIP INITIATIVE ENABLES ULI TO ADD LEADERSHIP DEVELOPMENT ACTIVITIES TO ITS PROGRAM OF WORK AND EXTEND THE INSTITUTE'S REACH TO MANY MORE CURRENT AND POTENTIAL LEADERS. THE INITIATIVE ALSO SUPPORTS THE WORK OF THE ULI WOMEN'S LEADERSHIP INITIATIVE WHOSE MISSION IS TO RAISE THE VISIBILITY AND NUMBER OF WOMEN LEADERS IN ULI AND THE REAL ESTATE INDUSTRY.

ULI'S URBAN RESILIENCE PROGRAM PROVIDES ULI MEMBERS, THE PUBLIC, AND COMMUNITIES ACROSS THE UNITED STATES WITH INFORMATION ON HOW TO BE MORE RESILIENT IN THE FACE OF CLIMATE CHANGE AND OTHER ENVIRONMENTAL VULNERABILITIES. THE PROGRAM SEEKS TO PROVIDE TECHNICAL ASSISTANCE, ADVANCE KNOWLEDGE, AND CATALYZE ADOPTION OF TRANSFORMATIVE MARKET PRACTICES AND POLICIES. THROUGH ADVISORY SERVICES, RESEARCH, CONVENINGS, AND SUPPORT OF DISTRICT COUNCIL PROJECTS, THE URBAN RESILIENCE PROGRAM SEEKS TO ENHANCE COMMUNITY RESILIENCE WITH A FOCUS ON THE BUILT ENVIRONMENT, REAL ESTATE MARKETS, AND THE LAND USE POLICY SECTOR.

THE ULI BUILDING HEALTHY PLACES INITIATIVE IS A MULTIFACETED PROGRAM INCLUDING RESEARCH AND PUBLICATIONS, CONVENINGS, AND ADVISORY ACTIVITIES TO LEVERAGE THE POWER OF THE INSTITUTE'S GLOBAL NETWORKS TO SHAPE PROJECTS AND PLACES IN WAYS THAT IMPROVE THE HEALTH OF PEOPLE AND COMMUNITIES.

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PUBLISHING/URBAN LAND MAGAZINE:

THROUGH ITS ORIGINAL RESEARCH AND THE RESEARCH OF ITS MEMBERS, THE INSTITUTE PUBLISHES BOOKS AND CASE STUDIES ON A VARIETY OF INDUSTRY TOPICS RELEVANT TO ITS MEMBERS. PUBLICATIONS ARE OFFERED IN PRINT BOUND FORMAT, PDF AS WELL AS E-PUB. PUBLICATIONS ARE MANAGED THROUGH A THIRD-PARTY FULFILLMENT COMPANY.

THE INSTITUTE'S FLAGSHIP PERIODICAL AND A SIGNIFICANT MEMBERSHIP BENEFIT, URBAN LAND MAGAZINE PROMOTES THE INSTITUTE'S VISION AND MISSION BY REPORTING ON LAND USE POLICY AND REAL ESTATE PRACTICE, INDUSTRY SECTOR UPDATES, CAPITAL MARKETS AND MARKET TRENDS, SUSTAINABILITY, AND PLANNING AND DESIGN. THE MAGAZINE IS OFFERED FREE WITH MEMBERSHIP AND IS AVAILABLE BOTH IN PRINT AND ONLINE.

EXPENSES \$ 1,182,172. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,693,495.

ULI LEARNING:

ULI LEARNING PROGRAM DELIVERS PRACTICAL INSTRUCTION FOR LAND USE AND REAL ESTATE PROFESSIONALS AT ALL LEVELS FROM EXPERIENCED PRACTITIONERS AND RESEARCHERS. REFLECTING THE DIVERSE PROFESSIONALS THAT COMPRISE THE ULI MEMBERSHIP, THE PROGRAM IS DESIGNED TO SERVE PROFESSIONALS ACROSS DISCIPLINES THROUGH ONLINE COURSES, REAL ESTATE INSTRUCTION PROGRAMS, REAL ESTATE ENTREPRENEUR PROGRAMS, AND THE PRO FORMA FUNDAMENTALS CERTIFICATE.

EXPENSES \$ 1,180,920. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,169,093.

ADVISORY SERVICES:

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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ADVISORY SERVICES PANELS PROVIDE LOCAL GOVERNMENTS, PRIVATE DEVELOPERS, COMMUNITY DEVELOPMENT CORPORATIONS, AND MANY OTHER ORGANIZATIONS WITH ADVISORY REPORTS TO ADDRESS THE MOST CHALLENGING REAL ESTATE AND LAND USE ISSUES FACING COMMUNITIES TODAY. IN PROVIDING ADVISORY SERVICES, ULI CONVENES A PANEL OF INDUSTRY LEADERS FROM ITS DIVERSE MEMBERSHIP, INCLUDING DEVELOPERS, PLANNERS, FINANCIERS, MARKET ANALYSTS, DESIGNERS, ECONOMISTS, ARCHITECTS, AND PUBLIC OFFICIALS, TO PROVIDE PRACTICAL AND OBJECTIVE ADVICE THAT IS NOT AVAILABLE FROM ANY OTHER SOURCE.

EXPENSES \$ 1,639,902. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,296,027.

AWARDS:

ULI HAS SET THE STANDARD IN RECOGNIZING OUTSTANDING REAL ESTATE DEVELOPMENT PROJECTS, RELATED PROGRAMS, AND VISIONARIES IN URBAN DEVELOPMENT. ULI'S AWARDS PROGRAMS ARE HIGHLY SELECTIVE AND PROVIDE A PRESTIGIOUS REFERENCE FOR PROFESSIONALS INVOLVED IN THE BUILT ENVIRONMENT. WINNERS AND FINALISTS BENEFIT FROM WORLDWIDE RECOGNITION AMONG INFLUENTIAL LEADERS IN FIELDS RELATED TO REAL ESTATE AND URBAN DEVELOPMENT. AWARDS INCLUDE: THE AWARDS FOR EXCELLENCE PROGRAM, THE ULI J.C. NICHOLS PRIZE FOR VISIONARIES IN URBAN DEVELOPMENT, THE ULI GERALD D. HINES STUDENT URBAN DESIGN COMPETITION AND THE ULI AMANDA BURDEN URBAN OPEN SPACE AWARD.

EXPENSES \$ 717,945. INCLUDING GRANTS OF \$ 181,304. REVENUE \$ 257,938.

MEMBERSHIP:

ULI OFFERS A NUMBER OF OPPORTUNITIES FOR MEMBERSHIP DEPENDING ON AN INDIVIDUAL'S SPECIFIC INTEREST, INCLUDING: ASSOCIATE, FULL, YOUNG LEADER MEMBER UNDER 35, AND CORPORATE WITH FURTHER DISTINCTIONS FOR PRIVATE VERSUS PUBLIC AND DOMESTIC VERSUS INTERNATIONAL MEMBERSHIP.

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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EACH PROGRAM PROVIDES THE MEMBER WITH A SPECIFIC BASKET OF BENEFITS.

MEMBERSHIP DEVELOPMENT EXPENSES RELATE TO MEMBERSHIP RECRUITMENT AND

RETENTION EFFORTS, AS WELL AS ORDER PROCESSING AND FULL MEMBER

ADMISSIONS ACTIVITIES.

EXPENSES \$ 2,668,885. INCLUDING GRANTS OF \$ 0. REVENUE \$ 20,724,520.

PRODUCT COUNCILS:

PRODUCT COUNCILS PROVIDE A DEDICATED FORUM FOR INFORMATION EXCHANGE ON

THE STATE-OF-THE-ART OF A VARIETY OF SPECIFIC INDUSTRY SECTORS.

MEMBERSHIP IS LIMITED TO FULL MEMBERS AND IS BY APPOINTMENT ONLY. THE

INSTITUTE CURRENTLY HAS 65 DOMESTIC AND 7 GLOBAL COUNCILS FOCUSED ON 25

AREAS OF ACTIVITY, INCLUDING AFFORDABLE/WORKFORCE HOUSING, COMMUNITY

DEVELOPMENT, OFFICE DEVELOPMENT, SENIOR HOUSING, TRANSIT-ORIENTED

DEVELOPMENT, URBAN REVITALIZATION AMONG MANY OTHERS.

EXPENSES \$ 2,341,363. INCLUDING GRANTS OF \$ 2,875. REVENUE \$ 2,175,606.

KEY LEADERS:

THE KEY LEADERS PROGRAM IS DESIGNED TO INCREASE THE PARTICIPATION OF

ITS MOST SENIOR-LEVEL MEMBERS IN LEADERSHIP, VOLUNTEERING, AND

MENTORSHIP OPPORTUNITIES ACROSS THE INSTITUTE. THE PROGRAM WILL WORK

WITH APPROXIMATELY 600 MEMBERS, INCLUDING ULI FOUNDATION GOVERNORS,

CURRENT GOVERNING TRUSTEES AND FORMER TRUSTEES.

EXPENSES \$ 315,482. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

ULIF TRANSFERS 100% OF THE FUNDS RAISED THROUGH THE ANNUAL FUND PROGRAM

TO ULI TO SUPPORT ONGOING ULI PROGRAMS. IN RETURN, ULI ADDS TO ITS

ANNUAL BUDGET ALL ULIF OPERATING EXPENSES THROUGH THE FORM OF A

CONTRIBUTION TO ULIF.

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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EXPENSES \$ 1,197,938. INCLUDING GRANTS OF \$ 1,197,938. REVENUE \$ 0.

DEI/WLI:

ULI SUPPORTS DIVERSITY, EQUITY AND INCLUSION THROUGH A NUMBER OF PROGRAMS FOCUSED ON CHANGING THE DEMOGRAPHY OF THE REAL ESTATE INDUSTRY. IT'S WOMEN'S LEADERSHIP INITIATIVE IS PRIMARILY FOCUSED ON PROMOTING THE ROLE OF WOMEN IN THE INDUSTRY.

EXPENSES \$ 902,698. INCLUDING GRANTS OF \$ 0. REVENUE \$ 130,180.

COMMUNICATIONS:

THIS FUNCTION INCLUDES ALL ULI INTERNAL AND EXTERNAL COMMUNICATIONS PROGRAMS, SUCH AS THE ANNUAL REPORT, E-NEWS SERVICE, MEDIA RELATIONS, BRANDING, AND CORPORATE COMMUNICATIONS.

EXPENSES \$ 4,427,155. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

UNITED KINGDOM, HONG KONG, CHINA, AUSTRALIA

FORM 990, PART VI, SECTION A, LINE 6:

ULI MEMBERS INCLUDE DEVELOPERS, ARCHITECTS, PUBLIC OFFICIALS, PLANNERS, REAL ESTATE BROKERS, APPRAISERS, ACCOUNTANTS, ATTORNEYS, ENGINEERS, FINANCIERS, ACADEMICS, AND STUDENTS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE TRUSTEES ELECT THE ULI CHAIRMAN, THE ULIF CHAIRMAN, THE ULI GLOBAL BOARD OF DIRECTORS, THE ULIF BOARD OF DIRECTORS AND ULI LIFE TRUSTEES. THE GLOBAL BOARD OF DIRECTORS APPOINTS/APPROVES THE ULI EUROPE CHAIRMAN, THE ULI ASIA CHAIRMAN, AND THE ULI AMERICA'S CHAIRMAN. THE FULL MEMBERS ELECT

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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THE TRUSTEES (WHO ALSO SERVE AS THE MEMBERS OF ULIF).

FORM 990, PART VI, SECTION A, LINE 7B:

THE GLOBAL BOARD OF DIRECTORS IS ULI'S GOVERNING BODY. THE FOLLOWING ARE ACTION ITEMS THEY MUST BRING TO THE TRUSTEES FOR APPROVAL: THE TRUSTEES HAVE AUTHORITY OVER THE ARTICLES OF INCORPORATION; THE BYLAWS (ULI AND ULIF), ADOPTING A PLAN OR MERGER OR CONSOLIDATION WITH ANOTHER CORPORATION, AUTHORIZING THE VOLUNTARY DISSOLUTION OF THE ORGANIZATION OR REVOKING PROCEEDINGS THEREFORE, AUTHORIZING THE SALE, LEASE, EXCHANGE OR MORTGAGE OF ALL OR SUBSTANTIALLY ALL OF THE PROPERTY AND ASSETS OF THE ORGANIZATION.

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

PROCESS FOR MAKING THE FINAL 990 AVAILABLE TO THE VOTING MEMBERS OF THE GOVERNING BODY PRIOR TO ITS BEING FILED WITH THE IRS.

- INDEPENDENT AUDITORS REVIEW THE 990 WITH THE AUDIT COMMITTEE
- THE FINAL 990 IS POSTED TO A SECURE AREA OF THE ULI WEBSITE.
- NOTICE OF THE LOCATION OF THE FORM 990 IS EMAILED TO EACH BOARD MEMBER WITH THE COMMUNICATION THAT THEY HAVE TWO WEEKS IN WHICH TO REVIEW AND PROVIDE ANY COMMENTS TO ULI MANAGEMENT.

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

ON AN ANNUAL BASIS THE BOARD OF DIRECTORS ARE SENT A COMMUNICATION REQUESTING THAT THEY IDENTIFY ANY RELATIONSHIPS DEFINED AS A CONFLICT. RESPONSES ARE SUBMITTED TO THE OFFICE OF THE EVP GLOBAL LEADERS, IF ANY, ARE RESOLVED.

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

ULI RETAINS AN INDEPENDENT, OUTSIDE COMPENSATION CONSULTANT TO REVIEW THE

Name of the organization THE URBAN LAND INSTITUTE	Employer identification number 53-0159845
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COMPENSATION FOR ITS KEY EXECUTIVES. AS PART OF THIS PROCESS, THE CONSULTANT IDENTIFIES COMPARABLE ORGANIZATIONS AND OBTAINS THE MOST CURRENT COMPENSATION DATA AVAILABLE FOR THEM. THE CONSULTANT SUBSEQUENTLY PREPARES A DETAILED WRITTEN REPORT THAT COMPARES ULI'S CURRENT EXECUTIVE COMPENSATION AGAINST SIMILAR POSITIONS IN LIKE ORGANIZATIONS. THE WRITTEN REPORT ALSO DESCRIBES THE STUDY METHODOLOGY AND STATES THE CONSULTANT'S OPINION REGARDING THE REASONABLENESS OF ULI'S EXECUTIVE COMPENSATION RELATIVE TO THE IDENTIFIED MARKET COMPARABLES.

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

URBAN LAND INSTITUTE DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, NOR ITS FINANCIAL STATEMENTS (WHETHER OR NOT AUDITED) AVAILABLE TO THE GENERAL PUBLIC AS FEDERAL TAX LAW DOES NOT REQUIRE THAT SUCH DOCUMENTS BE MADE PUBLICLY AVAILABLE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACTED SERVICES:

PROGRAM SERVICE EXPENSES	13,100,841.
MANAGEMENT AND GENERAL EXPENSES	2,609,468.
FUNDRAISING EXPENSES	55,446.
TOTAL EXPENSES	15,765,755.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	15,765,755.

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

UNREALIZED GAIN (LOSS) ON FOREIGN CURRENCY TRANSLATION	-861,958.
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**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **THE URBAN LAND INSTITUTE** Employer identification number **53-0159845**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
ULI SERVICES LIMITED - 98-1123263 SUITE 3418, JARDINE HOUSE, 1 CONNAUGHT PLACE HONG KONG, HONG KONG	CONSULTANCY SERVICES	HONG KONG	0.	472,960.	URBAN LAND INSTITUTE
ULI EXHIBITION & CONSULTING (SHANGHAI) LTD - 98-1183457, ROOM 3663, TOWER II IFC, NO. 8 CENTURY AVENUE, PUDONG NEW DISTRICT,	EXHIBITION MANAGEMENT & CONSULTING	CHINA	647,760.	1,010,714.	ULI SERVICES LIMITED

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
ULI FOUNDATION - 23-7133957 2001 L STREET NW, STE 200 WASHINGTON, DC 20036	FUNDRAISING IN SUPPORT OF ULI RESEARCH AND EDUCATION	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7	URBAN LAND INSTITUTE	X	

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

Schedule R (Form 990) 2021

SEE PART VII FOR CONTINUATIONS

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)	X	
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ULI FOUNDATION	C	6,555,958.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:

ULI EXHIBITION & CONSULTING (SHANGHAI) LTD

EIN: 98-1183457

ROOM 3663, TOWER II IFC, NO. 8 CENTURY AVENUE

PUDONG NEW DISTRICT, SHANGHAI, CHINA

Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

For calendar year 2021 or other tax year beginning JUL 1, 2021, and ending JUN 30, 2022

2021

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).**

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

A Check box if address changed.		Name of organization (Check box if name changed and see instructions.)	D Employer identification number
B Exempt under section	Print or Type	THE URBAN LAND INSTITUTE	53-0159845
<input checked="" type="checkbox"/> 501(c)(3)		Number, street, and room or suite no. If a P.O. box, see instructions.	E Group exemption number (see instructions)
408(e) 220(e) 408A 530(a) 529(a) 529A		City or town, state or province, country, and ZIP or foreign postal code	F Check box if an amended return.
		C Book value of all assets at end of year	92,103,819.

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Check if filing only to ▶ Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ▶

J Enter the number of attached Schedules A (Form 990-T) ▶ **1**

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

L The books are in care of ▶ **LEO GONZALEZ, CFO** Telephone number ▶ **(202) 624-7000**

Part I Total Unrelated Business Taxable Income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	346,715.
2 Reserved	2	
3 Add lines 1 and 2	3	346,715.
4 Charitable contributions (see instructions for limitation rules) STMT 1	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	346,715.
6 Deduction for net operating loss. See instructions STATEMENT 2	6	346,715.
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0.

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: Tax rate schedule or Schedule D (Form 1041)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2021)

Part III Tax and Payments			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d		1e	
2 Subtract line 1e from Part II, line 7		2	0.
3 Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 Other (attach statement)		3	
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here		4	0.
5 Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4		5	0.
6a Payments: A 2020 overpayment credited to 2021	6a		
b 2021 estimated tax payments. Check if section 643(g) election applies	6b		
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: Form 2439			
Form 4136			
Other			
Total	6g		
7 Total payments. Add lines 6a through 6g		7	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached		8	
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed		9	
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10	
11 Enter the amount of line 10 you want: Credited to 2022 estimated tax		11	
			Refunded

Part IV Statements Regarding Certain Activities and Other Information (see instructions)			
1 At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		Yes	No
		X	
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X	
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year			
4 Enter available pre-2018 NOL carryovers here			
5 Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.			
Business Activity Code	Available post-2017 NOL carryover		
541800	\$ 3,750.		
	\$		
6a Did the organization change its method of accounting? (see instructions)			X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V			

Part V Supplemental Information

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	Date	GLOBAL CEO		
			Title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	ELIZABETH W. HELLER	<i>Elizabeth Heller</i>	03/17/23	<input type="checkbox"/>	P00397829
	Firm's name	Firm's EIN		Firm's address	
	RSM US LLP	42-0714325		1250 H STREET, SUITE 700	
	Firm's address		Phone no.		
	WASHINGTON, DC 20005		202-293-2200		

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

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

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

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

Type or print	Name of exempt organization or other filer, see instructions. THE URBAN LAND INSTITUTE	Taxpayer identification number (TIN) 53-0159845
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2001 L STREET NW, 200	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

LEO GONZALEZ, CFO

- The books are in the care of ▶ **2001 L STREET NW, 200 - WASHINGTON, DC 20036**

Telephone No. ▶ **(202) 624-7000** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **JUL 1, 2021**, and ending **JUN 30, 2022**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 1

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT
 QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2016

FOR TAX YEAR 2017

FOR TAX YEAR 2018

FOR TAX YEAR 2019 39,500

FOR TAX YEAR 2020 1,218,395

TOTAL CARRYOVER

1,257,895

TOTAL CURRENT YEAR 10% CONTRIBUTIONS

TOTAL CONTRIBUTIONS AVAILABLE

1,257,895

TAXABLE INCOME LIMITATION AS ADJUSTED

0

EXCESS CONTRIBUTIONS

1,257,895

EXCESS 100% CONTRIBUTIONS

0

TOTAL EXCESS CONTRIBUTIONS

1,257,895

ALLOWABLE CONTRIBUTIONS DEDUCTION

0

TOTAL CONTRIBUTION DEDUCTION

0

FORM 990-T PRE 2018 NOL SCHEDULE STATEMENT 2

PRE-2018 NOL CARRY FORWARD FROM PRIOR YEAR 381,012.
 PRE-2018 NOL DEDUCTION INCLUDED IN PART I, LINE 6 346,715.

SCHEDULE A PORTION OF PRE-2018 NOL SCHEDULE A SHARE
 SCHEDULE A ENTITY SCHEDULE A SHARE

1 0.

TOTAL SCHEDULE A SHARE OF PRE-2018 NOL 0.
 NET OPERATING DEDUCTION 346,715.
 BALANCE AFTER PRE-2018 NOL DEDUCTION 0.
 EXPIRING NET OPERATING LOSSES 0.
 CARRY FORWARD OF NET OPERATING LOSS 34,297.

FORM 990-T PRE-2018 NET OPERATING LOSS DEDUCTION STATEMENT 3

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/09	100.	0.	100.	100.
06/30/10	327,599.	0.	327,599.	327,599.
06/30/11	32,177.	0.	32,177.	32,177.
06/30/12	250.	0.	250.	250.
06/30/13	250.	0.	250.	250.
06/30/14	250.	0.	250.	250.
06/30/15	250.	0.	250.	250.
06/30/16	19,636.	0.	19,636.	19,636.
06/30/17	250.	0.	250.	250.
06/30/18	250.	0.	250.	250.
NOL CARRYOVER AVAILABLE THIS YEAR			381,012.	381,012.

FORM 990-T NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST STATEMENT 4

NAME OF COUNTRY

UNITED KINGDOM
 HONG KONG
 CHINA
 AUSTRALIA

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

Department of the Treasury
Internal Revenue Service

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

▶ Go to www.irs.gov/Form990T for instructions and the latest information.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

1
OMB No. 1545-0047

2021

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

A Name of the organization THE URBAN LAND INSTITUTE	B Employer identification number 53-0159845
C Unrelated business activity code (see instructions) ▶ 541800	D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ **ADVERTISING INCOME**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a 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			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement)	5			
6 Rent income (Part IV)	6			
7 Unrelated debt-financed income (Part V)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10 Exploited exempt activity income (Part VIII)	10			
11 Advertising income (Part IX)	11	1,195,739.	517,176.	678,563.
12 Other income (see instructions; attach statement)	12			
13 Total. Combine lines 3 through 12	13	1,195,739.	517,176.	678,563.

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

1 Compensation of officers, directors, and trustees (Part X)		1	
2 Salaries and wages		2	
3 Repairs and maintenance		3	
4 Bad debts		4	
5 Interest (attach statement). See instructions		5	
6 Taxes and licenses		6	250.
7 Depreciation (attach Form 4562). See instructions	7		
8 Less depreciation claimed in Part III and elsewhere on return	8a	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	328,098.
14 Other deductions (attach statement) SEE STATEMENT 5		14	3,500.
15 Total deductions. Add lines 1 through 14		15	331,848.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)		16	346,715.
17 Deduction for net operating loss. See instructions		17	0.
18 Unrelated business taxable income. Subtract line 17 from line 16		18	346,715.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

Part III Cost of Goods Sold Enter method of inventory valuation

1 Inventory at beginning of year	1	
2 Purchases	2	
3 Cost of labor	3	
4 Additional section 263A costs (attach statement)	4	
5 Other costs (attach statement)	5	
6 Total. Add lines 1 through 5	6	
7 Inventory at end of year	7	
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Rent received or accrued				
a 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)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)	0.			
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)	0.			

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	0.			
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0.			
11 Total dividends-received deductions included in line 10	0.			

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations						
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10		
(1)						
(2)						
(3)						
(4)						
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)		
Totals			0.	0.		

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A URBAN LAND MAGAZINE

B

C

D

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income	1195739.			
Add columns A through D. Enter here and on Part I, line 11, column (A)				1195739.

a

3 Direct advertising costs by periodical	517,176.			
a Add columns A through D. Enter here and on Part I, line 11, column (B)				517,176.

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8	678,563.			
5 Readership costs	540,686.			
6 Circulation income	212,588.			
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero	328,098.			
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7	328,098.			
a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13				328,098.

Part X Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			0.

Part XI Supplemental Information (see instructions)

FORM 990-T (A)

OTHER DEDUCTIONS

STATEMENT 5

DESCRIPTION	AMOUNT
PROFESSIONAL FEES	3,500.
TOTAL TO SCHEDULE A, PART II, LINE 14	3,500.

990-T SCH A

POST-2017 NET OPERATING LOSS DEDUCTION

STATEMENT 6

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	1,250.	0.	1,250.	1,250.
06/30/20	1,250.	0.	1,250.	1,250.
06/30/21	1,250.	0.	1,250.	1,250.
NOL CARRYOVER AVAILABLE THIS YEAR			3,750.	3,750.

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return **THE URBAN LAND INSTITUTE** Filer's identifying number **53-0159845**

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)

2001 L STREET NW, 200

City or town, state, and ZIP code

WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB
ULI EXHIBITION & CONSULTING (SHANGHAI #3663, TOWER II IFC, 8 CENTURY AVEN PUDONG NEW DISTRICT CHINA SHANGHAI

b(1) U.S. identifying number, if any
981183457

b(2) Reference ID number (see instructions)

c For FDE, country(ies) under whose laws organized and entity type under local tax law
CHINA LIMITED

d Date(s) of organization
05 30 14

e Effective date as FDE
05/30/14

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number

g Country in which principal business activity is conducted
CHINA

h Principal business activity
EXHIBITION MG & CONSULTING

i Functional currency
CNY

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States

b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different
**URBAN LAND INSTITUTE
 2001 L STREET, NW, NO. 200
 WASHINGTON, DC 20036**

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address

b Annual accounting period covered by the return (see instructions)

c(1) U.S. identifying number, if any

c(2) Reference ID number (see instructions)

d Country under whose laws organized

e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address
**ULI SERVICES LIMITED
 #3418, JARDINE HOUSE, 1 CONNAUGHT P CENTRAL
 HONG KONG**

b Country under whose laws organized
HONG KONG

c U.S. identifying number, if any
98-1123263

d Functional currency
HKD

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 7

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1 4,005,711.	620,732.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3 4,005,711.	620,732.
4 Dividends	4	
5 Interest	5 14,694.	2,277.
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9 159,723.	24,751.
10 Total income (add lines 3 through 9)	10 4,180,128.	647,760.
11 Total deductions (exclude income tax expense)	11 4,063,409.	629,673.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14 116,719.	18,087.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient	
		Yes	No
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.			
1 Remittances from the FDE or FB	1		
2 Section 987 gain (loss) recognized by recipient	2		
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3		
4 Were all remittances from the FDE or FB treated as made to the direct owner?			
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting			

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash and other current assets	1 615,976.	1,010,714.
2	Other assets	2 0.	0.
3	Total assets	3 615,976.	1,010,714.
Liabilities and Owner's Equity			
4	Liabilities	4 1,830,559.	2,206,107.
5	Owner's equity	5 -1,214,583.	-1,195,393.
6	Total liabilities and owner's equity	6 615,976.	1,010,714.

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A) \$		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$. See instructions.		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$. See instructions.		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	116,719.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	116,719.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	116,719.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	18,087.
8 Enter exchange rate used for line 7		6.453206

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

**Information Return of U.S. Persons With Respect to Foreign
 Disregarded Entities (FDEs) and Foreign Branches (FBs)**

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
--	---

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI SERVICES LIMITED #3418, JARDINE HOUSE, 1 CONNAUGHT P CENTRAL HONG KONG	b(1) U.S. identifying number, if any 98-1123263 b(2) Reference ID number (see instructions)
--	--

c For FDE, country(ies) under whose laws organized and entity type under local tax law HONG KONG LIMITED	d Date(s) of organization 06 28 13	e Effective date as FDE 06/28/13
---	---	---

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted HONG KONG	h Principal business activity CONSULTANCY S	i Functional currency HKD
--	--	--	--

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
--	--

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)		
	c(1) U.S. identifying number, if any		
	c(2) Reference ID number (see instructions)		
	<table border="1" style="width:100%"> <tr> <td style="width:50%">d Country under whose laws organized</td> <td style="width:50%">e Functional currency</td> </tr> </table>	d Country under whose laws organized	e Functional currency
d Country under whose laws organized	e Functional currency		

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized		
	<table border="1" style="width:100%"> <tr> <td style="width:50%">c U.S. identifying number, if any</td> <td style="width:50%">d Functional currency</td> </tr> </table>	c U.S. identifying number, if any	d Functional currency
c U.S. identifying number, if any	d Functional currency		

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 8

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box **X**

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1	
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3	
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10	
11 Total deductions (exclude income tax expense)	11	7,826,762.
12 Income tax expense	12	1,002,893.
13 Other adjustments	13	
14 Net income (loss) per books	14	-7,826,762.
		-1,002,893.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB	1	
2 Section 987 gain (loss) recognized by recipient	2	
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3	
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

	(a) Beginning of annual accounting period	(b) End of annual accounting period
Assets		
1 Cash and other current assets	1 469,700.	472,960.
2 Other assets	2 0.	0.
3 Total assets	3 469,700.	472,960.
Liabilities and Owner's Equity		
4 Liabilities	4 4,828,035.	5,833,236.
5 Owner's equity	5 -4,358,335.	-5,360,276.
6 Total liabilities and owner's equity	6 469,700.	472,960.

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$. See instructions.		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$. See instructions.		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	-7,826,762.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	-7,826,762.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	-7,826,762.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	-1,002,893.
8 Enter exchange rate used for line 7		7.804184

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

OMB No. 1545-1910

Attachment Sequence No. **140**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
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Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - GERMANY OBERLINDAU 3 FRANKFURT AM MAIN GERMANY 60323	b(1) U.S. identifying number, if any
	b(2) Reference ID number (see instructions) ULIGRMNY

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
--	---------------------------	-------------------------

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted GERMANY	h Principal business activity CONSULTANCY SERVICES	i Functional currency EUR
---	---	--	-------------------------------------

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
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3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)
	c(1) U.S. identifying number, if any
	c(2) Reference ID number (see instructions)
	d Country under whose laws organized
	e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized
	c U.S. identifying number, if any
	d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 9

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

		Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	662,707.	746,319.
2	Cost of goods sold		
3	Gross profit (subtract line 2 from line 1)	662,707.	746,319.
4	Dividends		
5	Interest		
6	Gross rents, royalties, and license fees		
7	Gross income from performance of services		
8	Foreign currency gain (loss)		
9	Other income		
10	Total income (add lines 3 through 9)	662,707.	746,319.
11	Total deductions (exclude income tax expense)	746,396.	840,566.
12	Income tax expense		
13	Other adjustments		
14	Net income (loss) per books	-83,689.	-94,248.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1	Remittances from the FDE or FB	
2	Section 987 gain (loss) recognized by recipient	
3	Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	
		Yes No
4	Were all remittances from the FDE or FB treated as made to the direct owner?	
5	Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting	

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

	(a) Beginning of annual accounting period	(b) End of annual accounting period
Assets		
1	Cash and other current assets	
2	Other assets	
3	Total assets	
Liabilities and Owner's Equity		
4	Liabilities	
5	Owner's equity	
6	Total liabilities and owner's equity	

Schedule G Other Information

	Yes	No
1		X
2		X
3		
4		X
5		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	-83,689.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	-83,689.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	-83,689.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	-94,248.
8 Enter exchange rate used for line 7		.887968

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

OMB No. 1545-1910

Attachment Sequence No. **140**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
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Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - FRANCE SPACES OPERA GARNIER, 7 RUE MEYERBE PARIS FRANCE 75009	b(1) U.S. identifying number, if any
	b(2) Reference ID number (see instructions) ULIFRNC

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
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f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted FRANCE	h Principal business activity CONSULTANCY SERVICES	i Functional currency EUR
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2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
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3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)
	c(1) U.S. identifying number, if any
	c(2) Reference ID number (see instructions)
	d Country under whose laws organized e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized
	c U.S. identifying number, if any d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 10

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

		Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	234,437.	264,015.
2	Cost of goods sold		
3	Gross profit (subtract line 2 from line 1)	234,437.	264,015.
4	Dividends		
5	Interest		
6	Gross rents, royalties, and license fees		
7	Gross income from performance of services		
8	Foreign currency gain (loss)		
9	Other income		
10	Total income (add lines 3 through 9)	234,437.	264,015.
11	Total deductions (exclude income tax expense)	306,124.	344,747.
12	Income tax expense		
13	Other adjustments		
14	Net income (loss) per books	-71,687.	-80,732.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1	Remittances from the FDE or FB	
2	Section 987 gain (loss) recognized by recipient	
3	Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	
		Yes No
4	Were all remittances from the FDE or FB treated as made to the direct owner?	
5	Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting	

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

	(a) Beginning of annual accounting period	(b) End of annual accounting period
Assets		
1	Cash and other current assets	
2	Other assets	
3	Total assets	
Liabilities and Owner's Equity		
4	Liabilities	
5	Owner's equity	
6	Total liabilities and owner's equity	

Schedule G Other Information

	Yes	No
1	During the tax year, did the FDE or FB own an interest in any trust?	X
2	During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?	X
3	Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?	
4	During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?	X
5	During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?	X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$. See instructions.		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$. See instructions.		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	-71,687.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	-71,687.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	-71,687.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	-80,732.
8 Enter exchange rate used for line 7		.887968

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
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Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI-THE URBAN LAND INSTITUTE 77 FULHAM PALACE ROAD LONDON UNITED KINGDOM W6 8AF	b(1) U.S. identifying number, if any
	b(2) Reference ID number (see instructions) ULILNDN

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
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f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted UNITED KINGDOM	h Principal business activity CONSULTANCY SERVICES	i Functional currency GBP
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2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
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3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)
	c(1) U.S. identifying number, if any
	c(2) Reference ID number (see instructions)
	d Country under whose laws organized e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized
	c U.S. identifying number, if any d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 11

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1 281,243.	374,009.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3 281,243.	374,009.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10 281,243.	374,009.
11 Total deductions (exclude income tax expense)	11 252,846.	336,246.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14 28,397.	37,764.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB	1	
2 Section 987 gain (loss) recognized by recipient	2	
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3	
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets	1	
2 Other assets	2	
3 Total assets	3	
Liabilities and Owner's Equity		
4 Liabilities	4	
5 Owner's equity	5	
6 Total liabilities and owner's equity	6	

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	28,397.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	28,397.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	28,397.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	37,764.
8 Enter exchange rate used for line 7		.751968

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
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Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - AUSTRALIA 201 KENT ST, GROUND FLOOR SYDNEY NSW AUSTRALIA	b(1) U.S. identifying number, if any b(2) Reference ID number (see instructions) ULIAUSTR
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c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
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f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted AUSTRALIA	h Principal business activity CONSULTANCY SERVICES	i Functional currency AUD
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2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
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3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions) c(1) U.S. identifying number, if any c(2) Reference ID number (see instructions) d Country under whose laws organized e Functional currency
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4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized c U.S. identifying number, if any d Functional currency
---------------------------	--

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 12

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1 135,552.	98,339.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3 135,552.	98,339.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10 135,552.	98,339.
11 Total deductions (exclude income tax expense)	11 255,860.	185,618.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14 -120,308.	-87,280.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB	1	
2 Section 987 gain (loss) recognized by recipient	2	
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3	
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets	1	
2 Other assets	2	
3 Total assets	3	
Liabilities and Owner's Equity		
4 Liabilities	4	
5 Owner's equity	5	
6 Total liabilities and owner's equity	6	

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	-120,308.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	-120,308.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	-120,308.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	-87,280.
8 Enter exchange rate used for line 7		1.378421

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return **THE URBAN LAND INSTITUTE** Filer's identifying number **53-0159845**

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB
ULI - PHILIPPINES
PENTHOUSE, ASEANA 3, DIOSDADO MACAG
ASEANA CITY
PARANAQUE CITY PHILIPPINES

b(1) U.S. identifying number, if any

b(2) Reference ID number (see instructions)
ULIPHLPNS

c For FDE, country(ies) under whose laws organized and entity type under local tax law

d Date(s) of organization

e Effective date as FDE

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number

g Country in which principal business activity is conducted
PHILIPPINES

h Principal business activity
CONSULTANCY SERVICES

i Functional currency
PHP

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States

b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different
URBAN LAND INSTITUTE
2001 L STREET, NW, NO. 200
WASHINGTON, DC 20036

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address

b Annual accounting period covered by the return (see instructions)

c(1) U.S. identifying number, if any

c(2) Reference ID number (see instructions)

d Country under whose laws organized

e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address

b Country under whose laws organized

c U.S. identifying number, if any

d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 13

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1 3,401,230.	66,467.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3 3,401,230.	66,467.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10 3,401,230.	66,467.
11 Total deductions (exclude income tax expense)	11 2,573,597.	50,293.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14 827,633.	16,174.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB	1	
2 Section 987 gain (loss) recognized by recipient	2	
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3	
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets	1	
2 Other assets	2	
3 Total assets	3	
Liabilities and Owner's Equity		
4 Liabilities	4	
5 Owner's equity	5	
6 Total liabilities and owner's equity	6	

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

		Yes	No
6	Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>			
7a	During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b	Enter the total amount of the base erosion payments \$		
c	Enter the total amount of the base erosion tax benefit \$		
8a	During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b	Enter the total amount of the base erosion payments \$		
c	Enter the total amount of the base erosion tax benefit \$		
9	<i>Answer only if the tax owner of the FDE or FB is a CFC:</i> Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch? <i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a	If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b	If "Yes," enter the amount of the dual consolidated loss \$		
11a	If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b	Enter the amount of the dual consolidated loss for the combined separate unit \$		
c	Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a	Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b	Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c	If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d	If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e	Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
13a	During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b	If "Yes," enter the total amount of recapture \$		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1	Current year net income (loss) per foreign books of account	1	827,633.
2	Total net additions	2	
3	Total net subtractions	3	
4	Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	827,633.
5	DASTM gain (loss) (if applicable)	5	
6	Combine lines 4 and 5	6	827,633.
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	16,174.
8	Enter exchange rate used for line 7		51.171983

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
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Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - SINGAPORE TANGLIN POST OFFICE, PO BOX 421 SINGAPORE SINGAPORE 912415	b(1) U.S. identifying number, if any
	b(2) Reference ID number (see instructions) ULISNGPR

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
--	---------------------------	-------------------------

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted SINGAPORE	h Principal business activity CONSULTANCY SERVICES	i Functional currency SGD
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2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
---	---

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)
	c(1) U.S. identifying number, if any
	c(2) Reference ID number (see instructions)
	d Country under whose laws organized
	e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized
	c U.S. identifying number, if any
	d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 14

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1 269,109.	197,935.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3 269,109.	197,935.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10 269,109.	197,935.
11 Total deductions (exclude income tax expense)	11 267,188.	196,522.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14 1,921.	1,413.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB	1	
2 Section 987 gain (loss) recognized by recipient	2	
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3	
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets	1	
2 Other assets	2	
3 Total assets	3	
Liabilities and Owner's Equity		
4 Liabilities	4	
5 Owner's equity	5	
6 Total liabilities and owner's equity	6	

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$. See instructions.		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$. See instructions.		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	1,921.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	1,921.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	1,921.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	1,413.
8 Enter exchange rate used for line 7		1.359581

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

OMB No. 1545-1910

Attachment
 Sequence No. **140**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
--	--

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - BRITISH COLUMBIA 2900 550 BURRARD STREET VANCOUVER BC CANADA V6C 0A5	b(1) U.S. identifying number, if any
	b(2) Reference ID number (see instructions) ULIBC

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
---	----------------------------------	--------------------------------

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted CANADA	h Principal business activity CONSULTANCY SERVICES	i Functional currency CAD
--	---	---	--

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
--	--

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)
	c(1) U.S. identifying number, if any
	c(2) Reference ID number (see instructions)
	d Country under whose laws organized e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized
	c U.S. identifying number, if any d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 15

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1 134,749.	106,478.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3 134,749.	106,478.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10 134,749.	106,478.
11 Total deductions (exclude income tax expense)	11 123,638.	97,698.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14 11,111.	8,780.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB	1	
2 Section 987 gain (loss) recognized by recipient	2	
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3	
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets	1	
2 Other assets	2	
3 Total assets	3	
Liabilities and Owner's Equity		
4 Liabilities	4	
5 Owner's equity	5	
6 Total liabilities and owner's equity	6	

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$. See instructions.		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$. See instructions.		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	11,111.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	11,111.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	11,111.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	8,780.
8 Enter exchange rate used for line 7		1.265516

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

OMB No. 1545-1910

Attachment Sequence No. **140**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
--	---

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - ALBERTA SUITE 600, 900 6TH AVE SW CALGARY AB CANADA T2P 3K2	b(1) U.S. identifying number, if any
	b(2) Reference ID number (see instructions) ULIALB

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
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f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted CANADA	h Principal business activity CONSULTANCY SERVICES	i Functional currency CAD
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2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
--	--

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)
	c(1) U.S. identifying number, if any
	c(2) Reference ID number (see instructions)
	d Country under whose laws organized e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized
	c U.S. identifying number, if any d Functional currency

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 16

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	89,425.	70,663.
2 Cost of goods sold		
3 Gross profit (subtract line 2 from line 1)	89,425.	70,663.
4 Dividends		
5 Interest		
6 Gross rents, royalties, and license fees		
7 Gross income from performance of services		
8 Foreign currency gain (loss)		
9 Other income		
10 Total income (add lines 3 through 9)	89,425.	70,663.
11 Total deductions (exclude income tax expense)	87,605.	69,225.
12 Income tax expense		
13 Other adjustments		
14 Net income (loss) per books	1,820.	1,438.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1 Remittances from the FDE or FB		
2 Section 987 gain (loss) recognized by recipient		
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)		
		Yes No
4 Were all remittances from the FDE or FB treated as made to the direct owner?		
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets		
2 Other assets		
3 Total assets		
Liabilities and Owner's Equity		
4 Liabilities		
5 Owner's equity		
6 Total liabilities and owner's equity		

Schedule G Other Information

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

Schedule G Other Information (continued)

		Yes	No
6	Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>			
7a	During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b	Enter the total amount of the base erosion payments \$		
c	Enter the total amount of the base erosion tax benefit \$		
8a	During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b	Enter the total amount of the base erosion payments \$		
c	Enter the total amount of the base erosion tax benefit \$		
9	<i>Answer only if the tax owner of the FDE or FB is a CFC:</i> Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>			
10a	If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b	If "Yes," enter the amount of the dual consolidated loss \$		
11a	If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b	Enter the amount of the dual consolidated loss for the combined separate unit \$		
c	Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a	Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b	Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c	If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d	If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e	Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
13a	During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b	If "Yes," enter the total amount of recapture \$		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1	Current year net income (loss) per foreign books of account	1	1,820.
2	Total net additions	2	
3	Total net subtractions	3	
4	Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	1,820.
5	DASTM gain (loss) (if applicable)	5	
6	Combine lines 4 and 5	6	1,820.
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	1,438.
8	Enter exchange rate used for line 7		1.265516

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return THE URBAN LAND INSTITUTE	Filer's identifying number 53-0159845
--	---

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI - TORONTO 30 ST PATRICK STREET, 5TH FLOOR TORONTO OT CANADA M5T 3A3	b(1) U.S. identifying number, if any b(2) Reference ID number (see instructions) ULIONT
---	--

c For FDE, country(ies) under whose laws organized and entity type under local tax law	d Date(s) of organization	e Effective date as FDE
---	----------------------------------	--------------------------------

f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted CANADA	h Principal business activity CONSULTANCY SERVICES	i Functional currency CAD
--	---	---	--

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different URBAN LAND INSTITUTE 2001 L STREET, NW, NO. 200 WASHINGTON, DC 20036
--	--

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions) c(1) U.S. identifying number, if any c(2) Reference ID number (see instructions) d Country under whose laws organized e Functional currency
---------------------------	---

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address	b Country under whose laws organized c U.S. identifying number, if any d Functional currency
---------------------------	--

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 17

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

		Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	740,980.	585,516.
2	Cost of goods sold		
3	Gross profit (subtract line 2 from line 1)	740,980.	585,516.
4	Dividends		
5	Interest		
6	Gross rents, royalties, and license fees		
7	Gross income from performance of services		
8	Foreign currency gain (loss)		
9	Other income		
10	Total income (add lines 3 through 9)	740,980.	585,516.
11	Total deductions (exclude income tax expense)	949,355.	750,172.
12	Income tax expense		
13	Other adjustments		
14	Net income (loss) per books	-208,375.	-164,656.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1	Remittances from the FDE or FB	
2	Section 987 gain (loss) recognized by recipient	
3	Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	
		Yes No
4	Were all remittances from the FDE or FB treated as made to the direct owner?	
5	Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting	

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash and other current assets		
2	Other assets		
3	Total assets		
Liabilities and Owner's Equity			
4	Liabilities		
5	Owner's equity		
6	Total liabilities and owner's equity		

Schedule G Other Information

	Yes	No
1	During the tax year, did the FDE or FB own an interest in any trust?	X
2	During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?	X
3	Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?	
4	During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?	X
5	During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?	X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$ _____		
c Enter the total amount of the base erosion tax benefit \$ _____		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$ _____		
c Enter the total amount of the base erosion tax benefit \$ _____		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$ (_____)		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$ (_____)		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A) \$ _____		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$ _____ . See instructions.		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$ _____ . See instructions.		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	-208,375.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	-208,375.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	-208,375.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	-164,656.
8 Enter exchange rate used for line 7		1.265516

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Name of person filing this return **THE URBAN LAND INSTITUTE** Filer's identifying number **53-0159845**

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)
2001 L STREET NW, 200

City or town, state, and ZIP code
WASHINGTON, DC 20036

Filer's tax year beginning **JUL 1**, 20**21**, and ending **JUN 30**, 20**22**

Important: Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here FDE of a U.S. person FDE of a controlled foreign corporation (CFC) FDE of a controlled foreign partnership
 FB of a U.S. person FB of a CFC FB of a controlled foreign partnership

Check here Initial Form 8858 Final Form 8858

1a Name and address of FDE or FB ULI EXHIBITION & CONSULTING (BEIJIN #3663, TOWER II IFC, 8 CENTURY AVEN PUDONG NEW DISTRICT SHANGHAI CHINA		b(1) U.S. identifying number, if any	
		b(2) Reference ID number (see instructions) ULIBEIJING	
c For FDE, country(ies) under whose laws organized and entity type under local tax law		d Date(s) of organization	e Effective date as FDE
f If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number	g Country in which principal business activity is conducted CHINA	h Principal business activity EXHIBITION MG & CONSULTING	i Functional currency CNY

2 Provide the following information for the FDE's or FB's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different
--	---

3 For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

a Name and address	b Annual accounting period covered by the return (see instructions)	
	c(1) U.S. identifying number, if any	
	c(2) Reference ID number (see instructions)	
	d Country under whose laws organized	e Functional currency

4 For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

a Name and address ULI SERVICES LIMITED #3418, JARDINE HOUSE, 1 CONNAUGHT P CENTRAL HONG KONG	b Country under whose laws organized HONG KONG	
	c U.S. identifying number, if any 98-1123263	d Functional currency HKD

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

SEE STATEMENT 18

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

		Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	910,880.	141,152.
2	Cost of goods sold		
3	Gross profit (subtract line 2 from line 1)	910,880.	141,152.
4	Dividends		
5	Interest		
6	Gross rents, royalties, and license fees		
7	Gross income from performance of services		
8	Foreign currency gain (loss)		
9	Other income		
10	Total income (add lines 3 through 9)	910,880.	141,152.
11	Total deductions (exclude income tax expense)	1,172,545.	181,700.
12	Income tax expense		
13	Other adjustments		
14	Net income (loss) per books	-261,665.	-40,548.

Schedule C-1 Section 987 Gain or Loss Information

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient
Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.		
1	Remittances from the FDE or FB	
2	Section 987 gain (loss) recognized by recipient	
3	Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	
		Yes No
4	Were all remittances from the FDE or FB treated as made to the direct owner?	
5	Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting	

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

	(a) Beginning of annual accounting period	(b) End of annual accounting period
Assets		
1	Cash and other current assets	
2	Other assets	
3	Total assets	
Liabilities and Owner's Equity		
4	Liabilities	
5	Owner's equity	
6	Total liabilities and owner's equity	

Schedule G Other Information

	Yes	No
1	During the tax year, did the FDE or FB own an interest in any trust?	X
2	During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?	X
3	Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?	
4	During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?	X
5	During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?	X

Schedule G Other Information (continued)

	Yes	No
6 Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b Enter the total amount of the base erosion payments \$		
c Enter the total amount of the base erosion tax benefit \$		
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
b If "Yes," enter the amount of the dual consolidated loss \$		
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
b Enter the amount of the dual consolidated loss for the combined separate unit \$		
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
12a Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
b If "Yes," enter the total amount of recapture \$		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1 Current year net income (loss) per foreign books of account	1	-261,665.
2 Total net additions	2	
3 Total net subtractions	3	
4 Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	-261,665.
5 DASTM gain (loss) (if applicable)	5	
6 Combine lines 4 and 5	6	-261,665.
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	-40,548.
8 Enter exchange rate used for line 7		6.453206

Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2		X
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions	4	

Schedule J Income Taxes Paid or Accrued (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
Totals								

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 THE URBAN LAND INSTITUTE	Identifying number 53-0159845
--	---

Name of FDE or FB ULI EXHIBITION & CONSULTING (U.S. identifying number, if any 98-1183457	Reference ID number (see instructions)
---	--	--

Name of tax owner URBAN LAND INSTITUTE	U.S. identifying number, if any 53-0159845
--	--

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

6.453206

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **CHINA, RENMINBI**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

	<input type="checkbox"/> Controlled Foreign Partnership				
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
2 Sales of property rights					
3 Compensation received for certain services					
4 Commissions received					
5 Rents, royalties, and license fees received					
6 Dividends/Distributions received					
7 Interest received					
8 Loan guarantee fees received					
9 Other					
10 Add lines 1 through 9					
11 Purchases of inventory					
12 Purchases of tangible property other than inventory					
13 Purchases of property rights					
14 Compensation paid for certain services					
15 Commissions paid					
16 Rents, royalties, and license fees paid					
17 Interest paid					
18 Loan guarantee fees paid					
19 Add lines 11 through 18					
20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 THE URBAN LAND INSTITUTE	Identifying number 53-0159845
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Name of FDE or FB ULI SERVICES LIMITED	U.S. identifying number, if any 98-1123263	Reference ID number (see instructions)
--	--	--

Name of tax owner URBAN LAND INSTITUTE	U.S. identifying number, if any 53-0159845
--	--

Important: Complete a **separate** Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

7.804184

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **HONG KONG, DOLLAR**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership					
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation					
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner					
(a) Transactions of FDE or FB	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
2 Sales of property rights					
3 Compensation received for certain services					
4 Commissions received					
5 Rents, royalties, and license fees received					
6 Dividends/Distributions received					
7 Interest received					
8 Loan guarantee fees received					
9 Other					
10 Add lines 1 through 9					
11 Purchases of inventory					
12 Purchases of tangible property other than inventory					
13 Purchases of property rights					
14 Compensation paid for certain services					
15 Commissions paid					
16 Rents, royalties, and license fees paid					
17 Interest paid					
18 Loan guarantee fees paid					
19 Add lines 11 through 18					
20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - GERMANY** U.S. identifying number, if any Reference ID number (see instructions)
ULIGRMNY

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

.887968

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **EUROPEAN UNION, EURO**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
2 Sales of property rights					
3 Compensation received for certain services					
4 Commissions received					
5 Rents, royalties, and license fees received					
6 Dividends/Distributions received					
7 Interest received					
8 Loan guarantee fees received					
9 Other					
10 Add lines 1 through 9					
11 Purchases of inventory					
12 Purchases of tangible property other than inventory					
13 Purchases of property rights					
14 Compensation paid for certain services					
15 Commissions paid					
16 Rents, royalties, and license fees paid					
17 Interest paid					
18 Loan guarantee fees paid					
19 Add lines 11 through 18					
20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - FRANCE** U.S. identifying number, if any Reference ID number (see instructions)
ULIFRNC

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

.887968

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **EUROPEAN UNION, EURO**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
2 Sales of property rights					
3 Compensation received for certain services					
4 Commissions received					
5 Rents, royalties, and license fees received					
6 Dividends/Distributions received					
7 Interest received					
8 Loan guarantee fees received					
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13 Purchases of property rights					
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15 Commissions paid					
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18 Loan guarantee fees paid					
19 Add lines 11 through 18					
20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - UNITED KINGDOM** U.S. identifying number, if any Reference ID number (see instructions)
ULILNDN

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

.751968

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **UNITED KINGDOM, POUND**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
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3 Compensation received for certain services					
4 Commissions received					
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21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - AUSTRALIA** U.S. identifying number, if any Reference ID number (see instructions)
ULIAUSTR

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

1.378421

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **AUSTRALIA, DOLLAR**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
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20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ Attach to Form 8858.

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - PHILIPPINES** U.S. identifying number, if any Reference ID number (see instructions)
ULIPHLPNS

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

51.171983

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **PHILIPPINES, PESO**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
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21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - SINGAPORE** U.S. identifying number, if any Reference ID number (see instructions)
ULISNGPR

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

1.359581

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **SINGAPORE, DOLLAR**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
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7 Interest received					
8 Loan guarantee fees received					
9 Other					
10 Add lines 1 through 9					
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12 Purchases of tangible property other than inventory					
13 Purchases of property rights					
14 Compensation paid for certain services					
15 Commissions paid					
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17 Interest paid					
18 Loan guarantee fees paid					
19 Add lines 11 through 18					
20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - BRITISH COLUMBIA** U.S. identifying number, if any Reference ID number (see instructions)
ULIBC

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

1.265516

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **CANADA, DOLLAR**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
2 Sales of property rights					
3 Compensation received for certain services					
4 Commissions received					
5 Rents, royalties, and license fees received					
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7 Interest received					
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9 Other					
10 Add lines 1 through 9					
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13 Purchases of property rights					
14 Compensation paid for certain services					
15 Commissions paid					
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18 Loan guarantee fees paid					
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21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ Attach to Form 8858.

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Name of person filing Form 8858 THE URBAN LAND INSTITUTE	Identifying number 53-0159845
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Name of FDE or FB ULI - ALBERTA	U.S. identifying number, if any	Reference ID number (see instructions) ULIALB
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Name of tax owner URBAN LAND INSTITUTE	U.S. identifying number, if any 53-0159845
--	--

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

1.265516

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **CANADA, DOLLAR**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership					
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation					
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner					
(a) Transactions of FDE or FB	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
1 Sales of inventory					
2 Sales of property rights					
3 Compensation received for certain services					
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16 Rents, royalties, and license fees paid					
17 Interest paid					
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20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to www.irs.gov/Form8858 for instructions and the latest information.**

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI - TORONTO** U.S. identifying number, if any Reference ID number (see instructions)
ULIONT

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

1.265516

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **CANADA, DOLLAR**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
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18 Loan guarantee fees paid					
19 Add lines 11 through 18					
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21 Amounts loaned (see instructions)					

Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities

OMB No. 1545-1910

▶ Attach to Form 8858.

▶ Go to www.irs.gov/Form8858 for instructions and the latest information.

Name of person filing Form 8858 **THE URBAN LAND INSTITUTE** Identifying number **53-0159845**

Name of FDE or FB **ULI EXHIBITION & CONSULTING (** U.S. identifying number, if any Reference ID number (see instructions)
ULIBEIJING

Name of tax owner **URBAN LAND INSTITUTE** U.S. identifying number, if any
53-0159845

Important: Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

6.453206

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **CHINA, RENMINBI**

Column headings. This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> Controlled Foreign Partnership	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> Controlled Foreign Corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> U.S. Tax Owner	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
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16 Rents, royalties, and license fees paid					
17 Interest paid					
18 Loan guarantee fees paid					
19 Add lines 11 through 18					
20 Amounts borrowed (see instructions)					
21 Amounts loaned (see instructions)					

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 7

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

ULI SERVICES LIMITED FOREIGN SINGLE OWNER ELECTING TO BE DISREGARDED AS SEPARATE ENTITY	100.0000%	DIRECT OWNER OF FDE	HK
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ULI DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF FDE	US
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ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 8

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
--------------------------------------	----------------------	----------------	-------------------

TAX CLASSIFICATION

ULI DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF FDE	US
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ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 9

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
TAX CLASSIFICATION			
URBAN LAND INSTITUTE DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF BRANCH	US

ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 10

ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 11

ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858 ORGANIZATIONAL CHART STATEMENT 12

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

URBAN LAND INSTITUTE DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF BRANCH	US
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ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858 ORGANIZATIONAL CHART STATEMENT 13

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

URBAN LAND INSTITUTE DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF BRANCH	US
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ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858 ORGANIZATIONAL CHART STATEMENT 14

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

URBAN LAND INSTITUTE DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF BRANCH	US
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ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 15

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
TAX CLASSIFICATION			
URBAN LAND INSTITUTE DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF BRANCH	US

ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 16

ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 17

ATTACHMENT FOR FORM 8858, LINE 5

FORM 8858

ORGANIZATIONAL CHART

STATEMENT 18

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

ULI SERVICES LIMITED FOREIGN SINGLE OWNER ELECTING TO BE DISREGARDED AS SEPARATE ENTITY	100.0000%	DIRECT OWNER OF BRANCH	HK
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ULI DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A CORPORATION	100.0000%	DIRECT OWNER OF BRANCH	US
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ATTACHMENT FOR FORM 8858, LINE 5

TAXABLE YEAR
2021

California Exempt Organization Annual Information Return

128941 12-29-21
FORM

199

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **07/01/2021**, and ending (mm/dd/yyyy) **06/30/2022**

Corporation/Organization name
THE URBAN LAND INSTITUTE

California corporation number
1838261

Additional information. See instructions.

FEIN
53-0159845

Street address (suite or room)
2001 L STREET NW, NO. 200

PMB no.

City
WASHINGTON

State
DC

ZIP code
20036

Foreign country name

Foreign province/state/county

Foreign postal code

- A** First return Yes No
- B** Amended return Yes No
- C** IRC Section 4947(a)(1) trust Yes No
- D** Final information return?
 - Dissolved Surrendered (Withdrawn) Merged/Reorganized
 - Enter date: (mm/dd/yyyy)
- E** Check accounting method: (1) Cash (2) Accrual (3) Other
- F** Federal return filed? (1) 990T (2) 990PF (3) Sch H (990) (4) Other 990 series
- G** Is this a group filing? See instructions Yes No
- H** Is this organization in a group exemption Yes No
If "Yes," what is the parent's name?

- I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions Yes No
- J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. Yes No
- K** Is the organization exempt under R&TC Section 23701g? Yes No
If "Yes," enter the gross receipts from nonmember sources \$
- L** Is the organization a limited liability company? Yes No
- M** Did the organization file Form 100 or Form 109 to report taxable income? Yes No
- N** Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No
- O** Is federal Form 1023/1024 pending? Yes No
Date filed with IRS

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	64,385,242	00	
	2	Gross dues and assessments from members and affiliates	2	20,724,520	00	
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	3	11,245,340	00	
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B	4	96,355,102	00	
	5	Cost of goods sold	5		00	
	6	Cost or other basis, and sales expenses of assets sold	6	16,938,847	00	
	7	Total costs. Add line 5 and line 6	7	16,938,847	00	
	8	Total gross income. Subtract line 7 from line 4	8	79,416,255	00	
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	77,351,094	00	
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	2,065,161	00	
Filing Fee	11	Total payments	11		00	
	12	Use tax. See General Information K	12		00	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00	
	15	Penalties and interest. See General Information J	15		00	
	16	Balance due. Add line 12 and line 15. Then subtract line 11 from the result	16		00	
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
	Signature of officer	Title GLOBAL CEO	Date	• Telephone		
Paid Preparer's Use Only	Preparer's signature	Date 03/17/23	Check if self-employed	• PTIN P00397829		
	Firm's name (or yours, if self-employed) and address	RSM US LLP 1250 H STREET, SUITE 700 WASHINGTON, DC 20005			• Firm's FEIN 42-0714325	
					• Telephone 202-293-2200	
May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes No						

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

SEE PART II SUBSTITUTE ATTACHMENT

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	00	
	2	Interest	•	2	00	
	3	Dividends	•	3	00	
	4	Gross rents	•	4	00	
	5	Gross royalties	•	5	00	
	6	Gross amount received from sale of assets (See instructions)	•	6	00	
	7	Other income	•	7	00	
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9	00	
	10	Disbursements to or for members	•	10	00	
	11	Compensation of officers, directors, and trustees	•	11	0 00	
	12	Other salaries and wages	•	12	00	
	Expenses and Disbursements	13	Interest	•	13	00
		14	Taxes	•	14	00
		15	Rents	•	15	00
		16	Depreciation and depletion (See instructions)	•	16	00
		17	Other expenses and disbursements	•	17	00
		18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	00

Schedule L Balance Sheet	Beginning of taxable year			End of taxable year
	(a)	(b)	(c)	(d)
Assets				
1 Cash				•
2 Net accounts receivable				•
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments				•
10 a Depreciable assets				
b Less accumulated depreciation	()		()	
11 Land				•
12 Other assets				•
13 Total assets				
Liabilities and net worth				
14 Accounts payable				•
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities				
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund				•
22 Total liabilities and net worth				

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1 Net income per books	•	7 Income recorded on books this year not included in this return. Attach schedule	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year. Attach schedule	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year. Attach schedule	•	10 Net income per return. Subtract line 9 from line 6	
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		
6 Total. Add line 1 through line 5			

CA 199

CASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 1

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>	<u>DATE OF GIFT</u>	<u>AMOUNT</u>
INDIRECT PUBLIC SUPPORT PASSED THROUGH ULI FOUNDATION	2001 L STREET NW, SUITE 200 WASHINGTON, DC 20036	06/30/22	9,229,555.
SMALL BUSINESS ADMINISTRATION	409 3RD STREET, SW WASHINGTON, DC 20416	06/30/22	2,000,000.
TOTAL INCLUDED ON LINE 3			<u>11,229,555.</u>

**Corporation Depreciation
and Amortization**

Attach to Form 100 or Form 100W.

FORM 199

FEIN 53-0159845

Corporation name

California corporation number

THE URBAN LAND INSTITUTE

1838261

Part I Election To Expense Certain Property Under IRC Section 179

1	Maximum deduction under IRC Section 179 for California	1	\$25,000
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2022. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14							
SEE STATEMENT	2	19,533,414.	11,483,989.				
15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h)					15	1,783,781

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g)	16	1,783,781
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	1,783,781
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	0

Part IV Amortization

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC Section (see instructions)	(f) Period or percentage	(g) Amortization for this year
19						
20	Total. Add the amounts in column (g)					20
21	Total amortization claimed for federal purposes from federal Form 4562, line 44					21
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12					22

CA 3885

DEPRECIATION

STATEMENT 2

ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
1 CAPITALIZED SOFTWARE	VARIOUS	13,000,183.	8633125.	SL	3.00	1281435.	
2 LEASEHOLD IMPROVEMENTS	VARIOUS	5,481,770.	2141436.	SL	10.00	381,985.	
3 COMPUTER EQUIPMENT	VARIOUS	821,741.	479,708.	SL	3.00	120,361.	
4 FURNITURE AND EQUIPMENT	VARIOUS	229,720.	229,720.	SL	10.00	0.	
TOTAL TO FORM 3885		19,533,414.	11483989.			1783781.	

STATE OF CALIFORNIA
RRF-1
(Rev. 02/2021)

DEPARTMENT OF JUSTICE
PAGE 1 of 5
(For Registry Use Only)

**ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA**
Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400

WEBSITE ADDRESS:
www.oag.ca.gov/charities

<p><u>THE URBAN LAND INSTITUTE</u> Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used</p> <p><u>2001 L STREET NW, NO. 200</u> Address (Number and Street)</p> <p><u>WASHINGTON, DC 20036</u> City or Town, State, and ZIP Code</p> <p><u>(202) 624-7000</u> <u>STEVEN.SLEPIAN@ULI.ORG</u> Telephone Number E-mail Address</p>	<p>Check if:</p> <p>Change of address <input type="checkbox"/></p> <p>Amended report <input type="checkbox"/></p> <hr/> <p>State Charity Registration Number <u>CT096209</u></p> <p>Corporation or Organization No. <u>1838261</u></p> <p>Federal Employer ID No. <u>53-0159845</u></p>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

PART A - ACTIVITIES

For your most recent full accounting period (beginning 07/01/2021 ending 06/30/2022) list:

Total Revenue (including noncash contributions) \$ 79,416,255 Noncash Contributions \$ 0 Total Assets \$ 92,103,819
 Program Expenses \$ 60,767,878 Total Expenses \$ 77,351,094

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		<input checked="" type="checkbox"/>
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		<input checked="" type="checkbox"/>
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		<input checked="" type="checkbox"/>
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		<input checked="" type="checkbox"/>
5. During this reporting period, did the organization receive any governmental funding? SEE STATEMENT 5	<input checked="" type="checkbox"/>	
6. During this reporting period, did the organization hold a raffle for charitable purposes?		<input checked="" type="checkbox"/>
7. Does the organization conduct a vehicle donation program?		<input checked="" type="checkbox"/>
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	<input checked="" type="checkbox"/>	
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		<input checked="" type="checkbox"/>

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

<u>RON PRESSMAN</u> Signature of Authorized Agent	<u>GLOBAL CEO</u> Printed Name		
	Title	Date	

CA RRF-1

INFORMATION REGARDING GOVERNMENTAL FUNDING
PART B, LINE 5

STATEMENT 5

THE ORGANIZATION HAS REPORTED FORGIVEN PPP LOAN AMOUNTS AS RECEIVED FROM THE SMALL BUSINESS ADMINISTRATION IN PART VIII, LINE 1E, GOVERNMENTAL GRANTS. THIS IS BEING REPORTED AS PER THE INSTRUCTIONS TO THE 2021 FORM 990.