

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

2022

Department of the Treasury
Internal Revenue Service

For calendar year 2022 or other tax year beginning _____, and ending _____

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

<p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) THE BUSH FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 101 FIFTH STREET EAST, SUITE 2400</p> <p>City or town, state or province, country, and ZIP or foreign postal code ST. PAUL, MN 55101</p> <p>C Book value of all assets at end of year 1,371,910,758.</p>	<p>D Employer identification number 41-6017815</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university</p> <p>H Check if filing only to <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439</p> <p>I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/></p> <p>J Enter the number of attached Schedules A (Form 990-T) 1</p> <p>K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation.</p> <p>L The books are in care of THARANGI CUMARANATUNGE Telephone number 651-227-0891</p>			

Part I Total Unrelated Business Taxable Income		
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	234,473.
2 Reserved	2	
3 Add lines 1 and 2	3	234,473.
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	234,473.
6 Deduction for net operating loss. See instructions	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	234,473.
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	233,473.

Part II Tax Computation		
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	49,029.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> 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	49,029.

LHA For Paperwork Reduction Act Notice, see instructions.

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		49,029.
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 <input type="checkbox"/> 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		49,029.
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5		0.
6a	Payments: A 2021 overpayment credited to 2022	6a		
b	2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	400,000.	
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: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	6g		
7	Total payments. Add lines 6a through 6g	7		400,000.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	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		350,971.
11	Enter the amount of line 10 you want: Credited to 2023 estimated tax 100,000. Refunded	11		250,971.

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2022 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 CAYMAN ISLANDS	Yes	No
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available 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	
	525990	\$ 1,059,272.	
		\$	
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.

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.

Sign Here

Signature of officer: _____ Date: _____ Title: **FINANCE DIRECTOR & TREASURER**

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name: **GEORGIA AKINS** Preparer's signature: **GEORGIA AKINS** Date: **10/31/23** Check if self-employed PTIN: **P00950359**

Firm's name: **AKINS HENKE AND COMPANY** Firm's EIN: **46-3220328**

Firm's address: **600 INWOOD AVENUE NORTH, SUITE 160 OAKDALE, MN 55128** Phone no.: **651-636-3806**

**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).

2022

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

A Name of the organization THE BUSH FOUNDATION	B Employer identification number 41-6017815
C Unrelated business activity code (see instructions) 525990	D Sequence: 1 of 1

E Describe the unrelated trade or business **QUALIFIED PARTNERSHIP INTERESTS/UNRELATED DEB**

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 Schedule 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) STATEMENT 22	5	2,374,049.		2,374,049.
6 Rent income (Part IV)	6			
7 Unrelated debt-financed income (Part V)	7	1,609,996.	2,754,000.	-1,144,004.
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10 Exploited exempt activity income (Part VIII)	10			
11 Advertising income (Part IX)	11			
12 Other income (see instructions; attach statement)	12			
13 Total. Combine lines 3 through 12	13	3,984,045.	2,754,000.	1,230,045.

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			1,956.
2 Salaries and wages	2			3,665.
3 Repairs and maintenance	3			
4 Bad debts	4			
5 Interest (attach statement). See instructions	5			
6 Taxes and licenses	6			28,886.
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			1,549.
12 Excess exempt expenses (Part VIII)	12			
13 Excess readership costs (Part IX)	13			
14 Other deductions (attach statement) SEE STATEMENT 23	14			21,625.
15 Total deductions. Add lines 1 through 14	15			57,681.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16			1,172,364.
17 Deduction for net operating loss. See instructions STMT 24 STMT 27	17			937,891.
18 Unrelated business taxable income. Subtract line 17 from line 16	18			234,473.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

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 **BOND ISSUE**

B _____

C _____

D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property	1,609,996.			
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)	0.			
b Other deductions (attach statement) STMT 30	2,754,000.			
c Total deductions (add lines 3a and 3b, columns A through D)	2,754,000.			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) STMT 100	2,000,000.			
5 Average adjusted basis of or allocable to debt-financed property (attach statement) STMT 29	75,000,000.			
6 Divide line 4 by line 5	100.000%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6	1,609,996.			
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)				1,609,996.
9 Allocable deductions. Multiply line 3c by line 6	2,754,000.			
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)				2,754,000.
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
- B
- C
- D

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

	A	B	C	D
2 Gross advertising income				
Add columns A through D. Enter here and on Part I, line 11, column (A)				0.

	A	B	C	D
a				
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				0.

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

5 Readership costs

6 Circulation income

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

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

A	B	C	D

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

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) GREGORY KEANE	CFO	.80%	1,956.
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			1,956.

Part XI Supplemental Information (see instructions)

FORM 990-T (A)

INCOME (LOSS) FROM PARTNERSHIPS

STATEMENT 22

DESCRIPTION	NET INCOME OR (LOSS)
ADVENT INTERNATIONAL GPE VIII-B LP - ORDINARY BUSINESS INCOME (LOSS)	67,446.
CANAAN NATURAL GAS PARALLEL FUND X LP - ORDINARY BUSINESS INCOME (LOSS)	-790.
CRESSEY & COMPANY FUND VI LP - ORDINARY BUSINESS INCOME (LOSS)	11,067.
ADVENT INTERNATIONAL GPE IX LIMITED PARTNERSHIP - ORDINARY BUSINESS INCOME (-895.
HARBOURVEST PARTNERS VII-VENTURE - ORDINARY BUSINESS INCOME (LOSS)	-8.
ONE ROCK CAPITAL PARTNERS LP - ORDINARY BUSINESS INCOME (LOSS)	1,096,502.
RESOURCE LAND FUND IV - ORDINARY BUSINESS INCOME (LOSS)	186,657.
RESOURCE LAND FUND V LP - ORDINARY BUSINESS INCOME (LOSS)	215,772.
SQUARE MILE PARTNERS III TE LP - ORDINARY BUSINESS INCOME (LOSS)	38,429.
TA XII-A LP - ORDINARY BUSINESS INCOME (LOSS)	151,681.
WALTON STREET REAL ESTATE FUND IV LP - ORDINARY BUSINESS INCOME (LOSS)	2,508.
WALTON STREET REAL ESTATE FUND V LP - ORDINARY BUSINESS INCOME (LOSS)	-14,044.
WALTON STREET REAL ESTATE FUND VI LP - ORDINARY BUSINESS INCOME (LOSS)	454,076.
WALTON STREET REAL ESTATE FUND VII LP - ORDINARY BUSINESS INCOME (LOSS)	380,550.
ADVENT INTERNATIONAL GPE VII-B, LP - ORDINARY BUSINESS INCOME (LOSS)	-4,793.
PRESERVER LP - ORDINARY BUSINESS INCOME (LOSS)	-41,132.
ALLIED INVENTORS FUND LLC - ORDINARY BUSINESS INCOME (LOSS)	-163,044.
ADVENT INTERNATIONAL GPE-X-C LP - ORDINARY BUSINESS INCOME (LOSS)	-5,939.
SEQUOIA CAPITAL INDIA VI LTD - ORDINARY BUSINESS INCOME (LOSS)	6.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	<u>2,374,049.</u>

FORM 990-T (A)

OTHER DEDUCTIONS

STATEMENT 23

DESCRIPTION	AMOUNT
PROFESSIONAL FEES	21,625.
TOTAL TO SCHEDULE A, PART II, LINE 14	<u>21,625.</u>

FORM 990-T (A) POST 2017 NOL SCHEDULE STATEMENT 24

PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
1,059,272.	937,891.	121,381.

FORM 990-T DESCRIPTION OF ORGANIZATION'S UNRELATED STATEMENT 25
SCHEDULE A BUSINESS ACTIVITY

QUALIFIED PARTNERSHIP INTERESTS/UNRELATED DEBT FINANCE INCOME

TO FORM 990-T, SCHEDULE A, LINE E

990-T SCH A POST-2017 NET OPERATING LOSS DEDUCTION STATEMENT 26

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/21	1,059,272.	0.	1,059,272.	1,059,272.
NOL CARRYOVER AVAILABLE THIS YEAR			1,059,272.	1,059,272.

SCH A (990-T) SCHEDULE A NOL DETAIL STATEMENT 27

TAXABLE INCOME FROM ALL ENTITIES	1,172,364.
THIS ENTITIES PORTION OF TAXABLE INCOME	1,172,364.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS	100.00%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS	0.
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS	1,172,364.
80% INCOME LIMITATION	937,891.
POST-2017 AVAILABLE	1,059,272.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION	937,891.

FORM 990-T (A)

PART V - UNRELATED DEBT-FINANCED INCOME
AVERAGE ACQUISITION DEBT

STATEMENT 28

DESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVITY NUMBER	AMOUNT OF OUTSTANDING DEBT
BOND ISSUE	1	
BEGINNING FIRST MONTH		100,000,000.
BEGINNING SECOND MONTH		100,000,000.
BEGINNING THIRD MONTH		100,000,000.
BEGINNING FOURTH MONTH		100,000,000.
BEGINNING FIFTH MONTH		100,000,000.
BEGINNING SIXTH MONTH		100,000,000.
BEGINNING SEVENTH MONTH		100,000,000.
BEGINNING EIGHTH MONTH		100,000,000.
BEGINNING NINTH MONTH		100,000,000.
BEGINNING TENTH MONTH		100,000,000.
BEGINNING ELEVENTH MONTH		100,000,000.
BEGINNING TWELFTH MONTH		100,000,000.
TOTAL OF ALL MONTHS		1,200,000,000.
NUMBER OF MONTHS IN YEAR		12
AVERAGE ACQUISITION DEBT		100,000,000.

TOTALS TO FORM 990-T, SCHEDULE A, PART V, LINE 4

FORM 990-T (A)

PART V - UNRELATED DEBT-FINANCED INCOME
AVERAGE ADJUSTED BASIS

STATEMENT 29

DESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVITY NUMBER	AMOUNT
BOND ISSUE	1	
AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON FIRST DAY OF YEAR		100,000,000.
AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YEAR		50,000,000.
AVERAGE ADJUSTED BASIS OF PROPERTY FOR THE YEAR		75,000,000.

TOTAL TO FORM 990-T, SCHEDULE A, PART V, LINE 5

FORM 990-T (A)

PART V - OTHER DEDUCTIONS

STATEMENT 30

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	PERCENT ALLOCABLE	ALLOCABLE TOTAL
INTEREST EXPENSE		2,754,000.		
- SUBTOTAL -	1	2,754,000.	1.00	2,754,000.
TOTAL OF FORM 990-T, SCHEDULE A, PART V, LINE 3(B)				2,754,000.