

Form **990-T**
 Department of the Treasury
 Internal Revenue Service

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))
 For calendar year 2022 or other tax year beginning 01-01-2022 and ending 12-31-2022
 ▶ Go to www.irs.gov/Form990T for instructions and the latest information.
 ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047
2022
 Open to Public Inspection for 501(c)(3) Organizations Only

- A** Check box if address changed.
- B** Exempt under section
 501(c3) 408(e) 220(e)
 408A 530(a)
 529(a) 529A

Print or Type

Name of organization (Check box if name changed and see instructions.)
 THE LEONETTIO'CONNELL FAMILY FOUNDATION

Number, street, and room or suite no. If a P.O. box, see instructions.
 515 S FIGUEROA ST 650

City or town, state or province, and ZIP or foreign postal code
 LOS ANGELES, CA 90071

C Book value of all assets at end of year ▶ 104,319,065

D Employer identification number
 20-3889415

E Group exemption number
 (see instructions)

F Check box if an amended return.

- G** Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university
- 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 ▶ THE ORGANIZATION Telephone number ▶ (213) 622-0066
 515 S FIGUEROA ST 650
 LOS ANGELES, CA 90071

Part I Total Unrelated Business Taxable Income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0
2	Reserved	2	
3	Add lines 1 and 2	3	0
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	
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	
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: <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	0

Part III Tax and Payments

Table with 11 rows (1a-11) and 2 columns (Description, Amount). Includes foreign tax credit, other credits, total credits, total tax, and payments.

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

Table with 5 rows (1-5) and 3 columns (Description, Yes, No). Includes questions about foreign accounts, foreign trusts, and NOL carryovers.

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: MICHAEL O'CONNELL, 2023-11-15, DIRECTOR. May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No. Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, Firm's name, Firm's EIN, Firm's address, Phone no.

TY 2022 IncomeLossPartnershipSCorpSch**Name:** THE LEONETTIO'CONNELL FAMILY FOUNDATION**EIN:** 20-3889415**Total gross receipts**

Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss
PREDICTIVE INDEX HOLDINGS LLC	0	-206,428	-206,428
RELAY HOLDINGS LLC	0	-22,811	-22,811
MST SERVICES HOLDING LLC	0	-2,867	-2,867
EGGHEADS II LLC	0	-16	-16
HOUSATONIC EQUITY INVESTORS IV LP	2,284	0	2,284
PETERSON PRIVATE EQUITY VII LP	152	-13,590	-13,438
BG LLH LLC	105,728	-66,420	39,308
HOUSATONIC EQUITY INVESTORS II LP	0	0	0
HOUSATONIC EQUITY INVESTORS V LP	6,526	0	6,526
NEXT COAST VENTURES I LP	0	-17	-17
OCM OPPORTUNITIES FUND VIIB AIF LP	643	0	643
TENNENBAUM OPPORTUNITIES FUND V LLC	2,357	0	2,357
ALAMAR PARTNERS LLC	0	-1,044	-1,044
AUXO MANAGEMENT LP	0	-7,907	-7,907
BROCKHURST CAPITAL PARTNERS LLC	0	-344	-344

Total gross receipts

Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss
EAGLE ROCK CAPITAL LLC	0	0	0
GREYBULL STEWARDSHIP LP	6,880	0	6,880
HAMILTON HALL LLC	66,738	0	66,738
HAMMERSMITH CAPITAL LLC	0	-8,232	-8,232
HERITAGE OPERATING PARTNERS LLC	0	-43,866	-43,866
OCM OPPORTUNITIES FUND VIIB AIF (CAYMAN)	0	0	0
PEAK VENTURES FUND II LP	0	0	0
PETERSON PRIVATE EQUITY VIII LP	259,505	0	259,505
PETERSON PRIVATE EQUITY IX LP	0	-46,048	-46,048
PETERSON REAL ASSETS LLC	0	0	0
THE PARTNER COMPANIES	25,936	-10,724	15,212
SENECA TRAILS CAPITAL LLC	0	-2,245	-2,245
SERENT CAPITAL ASSOCIATES II LP	2,584	0	2,584
SUMO TECHNOLOGIES HOLDING COMPANY	0	-2,797	-2,797
SYLMAR GROUP TOPCO LLC	0	-3,083	-3,083

Total gross receipts

Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss
VOLLEY SELLERS LLC	0	-623	-623
RADAZON CAPITAL LLC	61,750	0	61,750
BROADOAK BIOTOOLS VENTURE FUND LLC	0	0	0
CAMBER PEAK LLC	0	-120,857	-120,857
CLOUDSTREET PARTNERS LLC	0	-74,808	-74,808
DIAPENTE CAPITAL LLC	0	-25,274	-25,274
GREENHOUSE EQUITY PARTNERS LLC	0	-1,485	-1,485
MERCATOR SEARCH GROUP LLC	0	-2,059	-2,059
MIDWAY CAPITAL IV LLC	0	-29	-29
ATHENAEUM PARTNERS LLC	6,381	0	6,381
OCM OPPORTUNTIES FUND VIB AIF (DE) LP	7	0	7
WORKLYN PARTNERS LLC	0	-30,630	-30,630

Total share of gross income: 547,471

Total share of deductions: -694,204

Total gain or loss: -146,733

TY 2022 InterestSchedule**Name:** THE LEONETTIO'CONNELL FAMILY FOUNDATION**EIN:** 20-3889415

IRC Section Number	Interest description	Interest amount
	INVESTMENT INTEREST-BG LLH K-1	4,048

Total Interest Amount: 4,048

TY 2022 OtherCreditsSchedule2**Name:** THE LEONETTIO'CONNELL FAMILY FOUNDATION**EIN:** 20-3889415

Form Number	Type of credit	Credit amount
FORM 990-T	FOREIGN TAX CREDIT (FR. PASSTHROUGH K-1S)	8,734

TY 2022 OtherDeductionSchedule

Name: THE LEONETTIO'CONNELL FAMILY FOUNDATION

EIN: 20-3889415

Form 4562 amount:

Form 8873 amount:

Management fees (non-employees):

Legal fee amount:

Accounting amount:

Lobbying amount:

Investment management amount:

Advertising and promotion amount:

Insurance amount:

Occupancy amount:

Travel amount:

Information technology amount:

Office expenses amount:

Other type of deduction	Other type deduction amount
TAX PREPARATION FEES	17,680
INVESTMENT FEES (K-1)	42,942

TY 2022 OtherIncomeSchedule3**Name:** THE LEONETTIO'CONNELL FAMILY FOUNDATION**EIN:** 20-3889415**Earnings And Profits Other Adjustment Statement**

Form Number or IRC Section Number	Other income description	Other income amount
	CANCELLATION OF DEBT - BG LLH, LLC	3,511

Total Other Income Amount: 3,511

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

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

OMB No. 1545-0047

2022

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 Name of the organization
THE LEONETTIO'CONNELL FAMILY FOUNDATION

B Employer identification number
20-3889415

C Unrelated business activity code (see instructions) ▶ 523000

D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ INVESTMENT INCOME

Part I	Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
c	Balance ▶			
1c				
2	Cost of goods sold (Part III, line 8)			
3	Gross profit. Subtract line 2 from line 1c			
4a	Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)	7,046		7,046
4b	Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)			
4c	Capital loss deduction for trusts			
5	Income (loss) from a partnership or an S corporation (attach statement)	-146,733		-146,733
6	Rent income (Part IV)	0	0	
7	Unrelated debt-financed income (Part V)	0	0	
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	0	0	
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	0	0	
10	Exploited exempt activity income (Part VIII)			
11	Advertising income (Part IX)	0	0	
12	Other income (see instructions; attach statement)	3,511		3,511
13	Total. Combine lines 3 through 12	-136,176	0	-136,176

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)			0
2	Salaries and wages			
3	Repairs and maintenance			
4	Bad debts			
5	Interest (attach statement) (see instructions)			4,048
6	Taxes and licenses			1,200
7	Depreciation (attach Form 4562) (see instructions)			
8	Less depreciation claimed in Part III and elsewhere on return			
9	Depletion			
10	Contributions to deferred compensation plans			
11	Employee benefit programs			
12	Excess exempt expenses (Part VIII)			
13	Excess readership costs (Part IX)			0
14	Other deductions (attach statement)			60,622
15	Total deductions. Add lines 1 through 14			65,870
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)			-202,046
17	Deduction for net operating loss (see instructions)			0
18	Unrelated business taxable income. Subtract line 17 from line 16			-202,046

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			
		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	6. Deductions directly connected with income in column 5
(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)				
Totals ▶			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)
			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 columns 3 and 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶		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)
		0		0

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

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

**SCHEDULE D
(Form 1120)**
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0123
2022

Name: THE LEONETTIO'CONNELL FAMILY FOUNDATION
Employer identification number: 20-3889415

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses -- Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part 1, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				5,235
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				7 5,235

Part II Long-Term Capital Gains and Losses -- Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				837
11 Enter gain from Form 4797, line 7 or 9				11 974
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions (see instructions)				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				15 1,811

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16 5,235
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17 1,811
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns	18 7,046

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side THE LEONETTIO'CONNELL FAMILY FOUNDATION	Social security number or taxpayer identification number 20-3889415
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Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long term (see instructions). For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	BG LLH, LLC				()			837
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶					()			837

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.