

TAX YEAR: 2022

PREPARED FOR: UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION

PREPARED BY: NOE CARREON

Following is a copy of your 2022 Federal and State Income Tax Returns for your records.

Thank you for your business.

March 29, 2023, 11:55 am

INTEGRITY TAXES AND ACCOUNTING

Noe Carreon

12827 East Wyoming Place

Aurora, CO 80012

integritytaxes@hotmail.com

(720)707-9381

Invoice #: I00108700024

Date: 03/29/2023

To:

Universidad Popular Autonoma Del Estado De Puebla Foundation
 204 D Wes Watkins Center
 Stillwater, OK 74078

Dear Universidad Popular Autonoma Del Estado De Puebla Foundation,

Below is the summary fee for your 2023 tax preparation service. Your prompt remittance is always appreciated.

SUMMARIZED INVOICE

| Description | Amount |
|--------------------------------|-----------|
| FEDERAL | \$ 250.00 |
| STATE | \$ 0.00 |
| PAYMENT RECEIVED ON 03-28-2023 | \$ 250.00 |
| TOTAL DUE | \$ 0.00 |

Thank you for your business!

Sincerely,

Noe Carreon

(720)707-9381

INTEGRITY TAXES AND ACCOUNTING

Noe Carreon

12827 East Wyoming Place

Aurora, CO 80012

integritytaxes@hotmail.com

(720)707-9381

To:

Date: 03/29/2023

Universidad Popular Autonoma Del Estado De Puebla Foundation
 204 D Wes Watkins Center
 Stillwater, OK 74078

Dear Universidad Popular Autonoma Del Estado De Puebla Foundation

Below is the summary of fees and your previous payments for your 2023 tax preparation service. Your prompt remittance is always appreciated.

SUMMARIZED INVOICE

| Date | Invoice Number | Description | Charges | Amount paid | Balance due |
|--------------------------|----------------|----------------|-----------|-------------|-------------|
| 03-28-2023 | I00108700024 | Master Payment | \$ 250.00 | \$ 250.00 | \$ 0.00 |
| Total Balance due | | | | | \$ 0.00 |

Thank you for your business!

Sincerely,

Noe Carreon

(720)707-9381

POST SESSION LETTER

INTEGRITY TAXES AND ACCOUNTING**NOE CARREON****12827 East Wyoming Place****Aurora, CO 80012**integritytaxes@hotmail.com**PHONE (720)707-9381**

03/29/2023

UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION

204 D Wes Watkins Center

Stillwater, OK 74078

INTEGRITYTAXES@HOTMAIL.COM

PHONE: (405) 744-5342

Dear UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION,

We appreciate the opportunity to prepare your tax returns this year and look forward to serving you again next year. Personal tax situations can change from year to year. We ask that you notify us if you have financial or personal changes that could affect your taxes for the coming year. Some of those changes may include:

- * Retirement and pension plan adjustments
- * Changes in address and telephone numbers
- * The payment of estimated taxes
- * Beginning or disposing of a business
- * Selling or trading mutual funds or stocks
- * Changes in marital or dependent status
- * Investments in partnerships or corporations
- * Gifting of money or property to others
- * Changes in estate planning

Please contact us if such changes occur so that we may help you plan for the best tax advantage for your situation.

Thank you for allowing us to serve you. Feel free to call us if you have any questions or tax matters to discuss.

Sincerely,

NOE CARREON**(720)707-9381**

PRIVACY NOTICE LETTER

INTEGRITY TAXES AND ACCOUNTING**NOE CARREON****12827 East Wyoming Place****Aurora, CO 80012**integritytaxes@hotmail.com**PHONE (720)707-9381**

03/29/2023

UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION

204 D Wes Watkins Center

Stillwater, OK 74078

INTEGRITYTAXES@HOTMAIL.COM

PHONE: (405) 744-5342

Dear UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION,

Privacy Notice:

As a tax preparer, I have always protected your right to privacy and I will continue to do so. The law now requires me to inform you of my policy regarding privacy.

I receive and collect nonpublic personal information from various forms and statements that you provide. I do not disclose such information unless you instruct me to do so, except as required by law.

I maintain physical, electronic, and procedural safeguards that comply with Federal regulations to guard your nonpublic personal information. I retain records relating to professional services that I have provided so that I am better able to assist you with your professional needs and also to comply with professional guidelines.

Please do not hesitate to call me if you have any questions. Your privacy, my professional ethics and the ability to provide you with quality financial services are very important to me.

Sincerely,

NOE CARREON**(720)707-9381**

RETURN STATUS LETTER

INTEGRITY TAXES AND ACCOUNTING**NOE CARREON****12827 East Wyoming Place****Aurora, CO 80012**integritytaxes@hotmail.com**PHONE (720)707-9381**

03/29/2023

UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION

204 D Wes Watkins Center

Stillwater, OK 74078

INTEGRITYTAXES@HOTMAIL.COM

PHONE: (405) 744-5342

Dear UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION,

Enclosed you will find copies of your Federal and/or state income tax returns, which were prepared from the information you provided. You are not required to mail these returns, as they have been e-filed. Please retain the paper copies in your files for a minimum of 3 years, per IRS guidelines.

Below is the status of your e-filed return(s).

| FED/ST | RETURN STATUS | REFUND | BALANCE DUE |
|--------|------------------|--------|-------------|
| FED | ACCEPTED | \$0 | \$0 |
| OK | PAPERFILED | \$0.00 | \$0 |

We kindly ask that you review these copies and if you have any questions about your 2022 return(s), feel free to give us a call. We are available throughout the year should you require further assistance.

Thank you for your business!

Sincerely,

NOE CARREON**(720)707-9381**

Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

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/Form990PF for instructions and the latest information.

2022

Open to Public Inspection

For calendar year **2022** or tax year beginning , **2022**, and ending , **20**

| | | |
|--|---|---|
| Name of foundation UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION | | A Employer identification number 52 - 1417995 |
| Number and street (or P.O. box number if mail is not delivered to street address) 204 D WES WATKINS CENTER | Room/suite | B Telephone number (see instructions) 405-744-5342 |
| City or town, state or province, country, and ZIP or foreign postal code STILLWATER, OK 74078 | | C If exemption application is pending, check here <input type="checkbox"/> |
| G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change | | D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation | | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 0 | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.) | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc., received (attach schedule) | 0 | | | |
| | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | 0 | 0 | 0 | |
| | 4 Dividends and interest from securities | 0 | 0 | 0 | |
| | 5a Gross rents | 0 | 0 | 0 | |
| | b Net rental income or (loss) | 0 | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | 0 | | | |
| | b Gross sales price for all assets on line 6a | 0 | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 0 | | |
| | 8 Net short-term capital gain | | | 0 | |
| | 9 Income modifications | | | 0 | |
| | 10a Gross sales less returns and allowances | 0 | | | |
| b Less: Cost of goods sold | 0 | | | | |
| c Gross profit or (loss) (attach schedule) | 0 | | 0 | | |
| 11 Other income (attach schedule) | 0 | 0 | 0 | | |
| 12 Total. Add lines 1 through 11 | 0 | 0 | 0 | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc. | 0 | 0 | 0 | 0 |
| | 14 Other employee salaries and wages | 0 | 0 | 0 | 0 |
| | 15 Pension plans, employee benefits | 0 | 0 | 0 | 0 |
| | 16a Legal fees (attach schedule) | 0 | 0 | 0 | 0 |
| | b Accounting fees (attach schedule) | 0 | 0 | 0 | 0 |
| | c Other professional fees (attach schedule) | 0 | 0 | 0 | 0 |
| | 17 Interest | 0 | 0 | 0 | 0 |
| | 18 Taxes (attach schedule) (see instructions) | 0 | 0 | 0 | 0 |
| | 19 Depreciation (attach schedule) and depletion | 0 | 0 | 0 | 0 |
| | 20 Occupancy | 0 | 0 | 0 | 0 |
| | 21 Travel, conferences, and meetings | 0 | 0 | 0 | 0 |
| | 22 Printing and publications | 0 | 0 | 0 | 0 |
| | 23 Other expenses (attach schedule) | 0 | 0 | 0 | 0 |
| | 24 Total operating and administrative expenses. Add lines 13 through 23 | 0 | 0 | 0 | 0 |
| | 25 Contributions, gifts, grants paid | 0 | | | 0 |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 0 | 0 | 0 | 0 | |
| 27 Subtract line 26 from line 12: | | | | | |
| a Excess of revenue over expenses and disbursements | 0 | | | | |
| b Net investment income (if negative, enter -0-) | | 0 | | | |
| c Adjusted net income (if negative, enter -0-) | | | 0 | | |

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2022)

| Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | | Beginning of year | End of year | |
|--|--|-------------------|----------------|-----------------------|
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash—non-interest-bearing | 1946 | 1898 | 0 |
| | 2 Savings and temporary cash investments | 0 | 0 | 0 |
| | 3 Accounts receivable | 0 | | |
| | Less: allowance for doubtful accounts | 0 | 0 | 0 |
| | 4 Pledges receivable | 0 | | |
| | Less: allowance for doubtful accounts | 0 | 0 | 0 |
| | 5 Grants receivable | 0 | 0 | 0 |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | 0 | 0 | 0 |
| | 7 Other notes and loans receivable (attach schedule) | 0 | | |
| | Less: allowance for doubtful accounts | 0 | 0 | 0 |
| | 8 Inventories for sale or use | 0 | 0 | 0 |
| | 9 Prepaid expenses and deferred charges | 0 | 0 | 0 |
| | 10a Investments—U.S. and state government obligations (attach schedule) | 0 | 0 | 0 |
| | b Investments—corporate stock (attach schedule) | 0 | 0 | 0 |
| | c Investments—corporate bonds (attach schedule) | 0 | 0 | 0 |
| | 11 Investments—land, buildings, and equipment: basis | 0 | | |
| Less: accumulated depreciation (attach schedule) | 0 | 0 | 0 | |
| 12 Investments—mortgage loans | 0 | 0 | 0 | |
| 13 Investments—other (attach schedule) | 0 | 0 | 0 | |
| 14 Land, buildings, and equipment: basis | 0 | | | |
| Less: accumulated depreciation (attach schedule) | 0 | 0 | 0 | |
| 15 Other assets (describe _____) | 0 | 0 | 0 | |
| 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) | 1946 | 1898 | 0 | |
| Liabilities | 17 Accounts payable and accrued expenses | 0 | 0 | |
| | 18 Grants payable | 0 | 0 | |
| | 19 Deferred revenue | 0 | 0 | |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | 0 | 0 | |
| | 21 Mortgages and other notes payable (attach schedule) | 0 | 0 | |
| | 22 Other liabilities (describe _____) | 0 | 0 | |
| | 23 Total liabilities (add lines 17 through 22) | 0 | 0 | |
| Net Assets or Fund Balances | Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input checked="" type="checkbox"/> | | | |
| | 24 Net assets without donor restrictions | 1946 | 1898 | |
| | 25 Net assets with donor restrictions | 0 | 0 | |
| | Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input type="checkbox"/> | | | |
| | 26 Capital stock, trust principal, or current funds | | | |
| | 27 Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| | 28 Retained earnings, accumulated income, endowment, or other funds | | | |
| 29 Total net assets or fund balances (see instructions) | 1946 | 1898 | | |
| 30 Total liabilities and net assets/fund balances (see instructions) | 1946 | 1898 | | |

| Part III Analysis of Changes in Net Assets or Fund Balances | | | |
|---|--|----------|------|
| 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) | | 1 | 1946 |
| 2 Enter amount from Part I, line 27a | | 2 | 0 |
| 3 Other increases not included in line 2 (itemize) | | 3 | 0 |
| 4 Add lines 1, 2, and 3 | | 4 | 1946 |
| 5 Decreases not included in line 2 (itemize) _____ STATEMENT #1 | | 5 | 48 |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 | | 6 | 1898 |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|--|--|---|--|---|
| 1a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) ((e) plus (f) minus (g)) | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. | | | | (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| 2 Capital gain net income or (net capital loss) | { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | | 2 | 0 |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 | { If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 } | | 3 | 0 |

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)

| | | |
|---|-----------|---|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions) | 1 | 0 |
| b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 2 | 0 |
| 3 Add lines 1 and 2 | 3 | 0 |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 4 | 0 |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 0 |
| 6 Credits/Payments: | | |
| a 2022 estimated tax payments and 2021 overpayment credited to 2022 | 6a | 0 |
| b Exempt foreign organizations—tax withheld at source | 6b | 0 |
| c Tax paid with application for extension of time to file (Form 8868) | 6c | 0 |
| d Backup withholding erroneously withheld | 6d | 0 |
| 7 Total credits and payments. Add lines 6a through 6d | 7 | 0 |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached | 8 | 0 |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | 0 |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | 0 |
| 11 Enter the amount of line 10 to be: Credited to 2023 estimated tax 0 Refunded | 11 | 0 |

Part VI-A Statements Regarding Activities

| | Yes | No |
|---|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. | | X |
| c Did the foundation file Form 1120-POL for this year? | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>0</u> (2) On foundation managers. \$ <u>0</u> | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0</u> | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. | | X |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | X |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> . | | X |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | | X |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV | | X |
| 8a Enter the states to which the foundation reports or with which it is registered. See instructions. | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation | | X |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | X |
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address | X | |
| 14 The books are in care of <u>ALEJANDRO AIZPURU KUREZYN</u> Telephone no. <u>4057445342</u> Located at <u>204 D WES WATKI STILLWATER OK</u> ZIP+4 <u>74078</u> | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15 | | |
| 16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | | X |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country | | |

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

| | Yes | No |
|---|--------------|----|
| 1a During the year, did the foundation (either directly or indirectly): | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 1a(1) | X |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | 1a(2) | X |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 1a(3) | X |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1a(4) | X |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | 1a(5) | X |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | 1a(6) | X |
| b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | X |
| c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/> | | |
| d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? | 1d | X |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | |
| a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? | 2a | X |
| If "Yes," list the years 20 ____ , 20 ____ , 20 ____ , 20 ____ | | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) | 2b | X |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 ____ , 20 ____ , 20 ____ , 20 ____ | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | 3a | X |
| b If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.) | 3b | X |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022? | 4b | X |

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

| | Yes | No |
|---|-----|----|
| 5a During the year, did the foundation pay or incur any amount to: | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | | X |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? | | X |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | | X |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions | | X |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | | X |
| b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions | | X |
| c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/> | | |
| d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | X |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | X |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. | | X |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | | X |
| b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? | | X |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? | | X |

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--|---|---|---|---------------------------------------|
| MARTHA CRUZ ALBO 204 D WES WATKINS CE STILLWATER,OK 74078 | PRESIDENT,0 | 0 | 0 | 0 |
| FRANCISCO EMMELHAINZ N 204 D WES WATKINS CE STILLWATER,OK 74078 | SECRETARY,0 | 0 | 0 | 0 |
| GABRIELA FERNANDEZ GUT 204 D WES WATKINS CE STILLWATER,OK 74078 | TREASURER,0 | 0 | 0 | 0 |
| ALEJANDRO AIZPURU KURE 204 D WES WATKINS CE STILLWATER,OK 74078 | EXECUTIVE DIRE CTOR,0 | 0 | 0 | 0 |

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$50,000 0

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

| | | | |
|----------|---|-----------|------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 0 |
| b | Average of monthly cash balances | 1b | 1922 |
| c | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 1922 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | 0 |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 1922 |
| 4 | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) | 4 | 29 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 | 5 | 1893 |
| 6 | Minimum investment return. Enter 5% (0.05) of line 5 | 6 | 95 |

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

| | | | |
|-----------|--|-----------|----|
| 1 | Minimum investment return from Part IX, line 6 | 1 | 95 |
| 2a | Tax on investment income for 2022 from Part V, line 5 | 2a | 0 |
| b | Income tax for 2022. (This does not include the tax from Part V.) | 2b | 0 |
| c | Add lines 2a and 2b | 2c | 0 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 95 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0 |
| 5 | Add lines 3 and 4 | 5 | 95 |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0 |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 | 7 | 95 |

Part XI Qualifying Distributions (see instructions)

| | | | |
|----------|---|-----------|---|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 0 |
| b | Program-related investments—total from Part VIII-B | 1b | 0 |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | 0 |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | 0 |
| b | Cash distribution test (attach the required schedule) | 3b | 0 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4 | 4 | 0 |

Part XII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2021 | (c) 2021 | (d) 2022 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2022 from Part X, line 7 | | | | 95 |
| 2 Undistributed income, if any, as of the end of 2022: | | | | |
| a Enter amount for 2021 only | | | 0 | |
| b Total for prior years: 20____, 20____, 20____ | | 0 | | |
| 3 Excess distributions carryover, if any, to 2022: | | | | |
| a From 2017 | 0 | | | |
| b From 2018 | 0 | | | |
| c From 2019 | 0 | | | |
| d From 2020 | 0 | | | |
| e From 2021 | 0 | | | |
| f Total of lines 3a through e | 0 | | | |
| 4 Qualifying distributions for 2022 from Part XI, line 4: \$ _____ 0 | | | | |
| a Applied to 2021, but not more than line 2a | | | 0 | |
| b Applied to undistributed income of prior years (Election required—see instructions) | | 0 | | |
| c Treated as distributions out of corpus (Election required—see instructions) | 0 | | | |
| d Applied to 2022 distributable amount | | | | 0 |
| e Remaining amount distributed out of corpus | 0 | | | |
| 5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0 | | | 0 |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 0 | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | | 0 | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0 | | |
| d Subtract line 6c from line 6b. Taxable amount—see instructions | | 0 | | |
| e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount—see instructions | | | 0 | |
| f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023 | | | | 95 |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions) | 0 | | | |
| 8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions) | 0 | | | |
| 9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a | 0 | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2018 | 0 | | | |
| b Excess from 2019 | 0 | | | |
| c Excess from 2020 | 0 | | | |
| d Excess from 2021 | 0 | | | |
| e Excess from 2022 | 0 | | | |

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

- 1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling
- b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

| | Tax year | | | | (e) Total |
|--|----------|----------|----------|----------|-----------|
| | (a) 2022 | (b) 2021 | (c) 2020 | (d) 2019 | |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed | | | | | |
| b 85% (0.85) of line 2a | | | | | |
| c Qualifying distributions from Part XI, line 4, for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test—enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed | | | | | |
| c "Support" alternative test—enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

- 1 Information Regarding Foundation Managers:**
 - a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
 - b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

 - a** The name, address, and telephone number or email address of the person to whom applications should be addressed:
 - b** The form in which applications should be submitted and information and materials they should include:
 - c** Any submission deadlines:
 - d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|----------------------------------|--------|
| Name and address (home or business) | | | | |
| a <i>Paid during the year</i> | | | | |
| Total | | | 3a | 0 |
| b <i>Approved for future payment</i> | | | | |
| Total | | | 3b | 0 |

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3) or in section 527? [] Yes [X] No

b If "Yes," complete the following schedule.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

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 or trustee: NOE CARREON, Date: 03/27/2023, Title: CERTIFIED TAX PREPARER

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: NOE CARREON, Preparer's signature, Date: 03/11/2023, Check [X] if self-employed, PTIN: P0-2012431, Firm's name: INTEGRITY TAXES AND ACCOUNTING, Firm's address: 12827 EAST WYOMING PLACE AURORA CO 80012, Firm's EIN: 84-2627248, Phone no.: 720-7079381

Form **8868**

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

OMB No. 1545-0047

(Rev. January 2022)

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 <small>File by the due date for filing your return. See instructions.</small> | Name of exempt organization or other filer, see instructions. | | Taxpayer identification number (TIN) | |
| | UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATION | | 52 1417995 | |
| | Number, street, and room or suite no. If a P.O. box, see instructions. | | | |
| | 204 D WES WATKINS CENTER | | | |
| City, town or post office, state, and ZIP code. For a foreign address, see instructions. | | | | |
| STILLWATER OK 74078 | | | | |

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

| 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 | | |

• The books are in the care of ▶ alejandro aizpuru

Telephone No. ▶ 720 8003428 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) 0 . 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 06, 15, 20 23, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year 20 22 or
 ▶ tax year beginning _____, 20 _____, and ending _____, 20 _____.

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.

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

Form **8868** (Rev. 1-2022)

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20_____

2022

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE PUEBLA FOUNDATI EIN or SSN 52 - 1417995

Name and title of officer or person subject to tax
NOE CARREON, CERTIFIED TAX PREPARER

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | |
|---|--|-------------|
| 1a Form 990 check here . . . <input type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . | 1b _____ |
| 2a Form 990-EZ check here . . . <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b _____ |
| 3a Form 1120-POL check here . . . <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b _____ |
| 4a Form 990-PF check here . . . <input checked="" type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part V, line 5) . . . | 4b <u>0</u> |
| 5a Form 8868 check here . . . <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b _____ |
| 6a Form 990-T check here . . . <input type="checkbox"/> | b Total tax (Form 990-T, Part III, line 4) | 6b _____ |
| 7a Form 4720 check here . . . <input type="checkbox"/> | b Total tax (Form 4720, Part III, line 1) | 7b _____ |
| 8a Form 5227 check here . . . <input type="checkbox"/> | b FMV of assets at end of tax year (Form 5227, Item D) | 8b _____ |
| 9a Form 5330 check here . . . <input type="checkbox"/> | b Tax due (Form 5330, Part II, line 19) | 9b _____ |
| 10a Form 8038-CP check here . . . <input type="checkbox"/> | b Amount of credit payment requested (Form 8038-CP, Part III, line 22) | 10b _____ |

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize INTEGRITY TAXES AND ACCOUNTING to enter my PIN

| | | | | |
|---|---|---|---|---|
| 1 | 7 | 9 | 9 | 5 |
|---|---|---|---|---|

 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date 03/11/2023

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| 8 | 4 | 2 | 8 | 4 | 9 | 4 | 9 | 3 | 7 | 5 |
|---|---|---|---|---|---|---|---|---|---|---|

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature NOE CARREON Date 03/11/2023

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **9325**
(January 2017)

Department of the Treasury - Internal Revenue Service

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS *e-file*.

Taxpayer name UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO D

Taxpayer address (optional)

1. Your federal income tax return for 2022 was filed electronically with the Austin Submission Processing Center. The electronic filing services were provided by _____.
2. Your return was accepted on 03-29-2023 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is 8428492023088g000037
3. Your return was accepted on _____ Allow 4 to 6 weeks for the processing of your return.
4. Your electronic funds withdrawal payment request was accepted for processing.
5. Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
6. Your Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on Mar 15 2023 7:02AM. The Submission ID assigned to your extension is 8428492023074i000001.

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at www.irs.gov, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

Oklahoma Return of Organization Exempt from Income Tax

Form 512-E
2022



Section 501(c) of the Internal Revenue Code

PART 1

For the year January 1 - December 31, 2022, or other taxable year beginning: 01/01 2022 ending: 12/31 2022

Name of Organization: UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE
 Federal Employer Identification Number: 521417995
 Date Qualified for Tax Exempt Status: 02/19/2022

Address (Number and street): 204 D WES WATKINS CENTER

City: STILLWATER State or Province: OK Country: ZIP or Foreign Postal Code: 74078

Place an 'X' if: (1) Initial Return (2) Final Return (3) Amended Return (See Schedule 512E-X on page 2)

PART 2: STATEMENT OF UNRELATED BUSINESS TAXABLE INCOME
 (Please read instructions on pages 3-4)

| | Total Federal | Allocable Oklahoma |
|--|---------------|--------------------|
| A Total unrelated trade or business income - applicable Federal Form(s) 990 | 0 | 0 |
| B Total unrelated trade or business deductions - applicable Fed. Form(s) 990 | 0 | 0 |
| C Unrelated business taxable income - enter here and on line 1 below | 0 | 0 |

INCOME SUBJECT TO TAX

| | | |
|--|---|------|
| 1 Unrelated business taxable income - from statement above (allocable to Oklahoma) | 1 | 0 00 |
| 2 Other net income - provide schedule | 2 | 0 00 |
| 3 Oklahoma Capital Gain deduction (provide Form 561-C) | 3 | 00 |
| 4 Oklahoma taxable income (total of lines 1, 2 and 3) | 4 | 0 00 |

TAX COMPUTATION

| | | |
|--|--------|------|
| 5 Tax at 4% of line 4. If trust, see rate schedule on page 3 and place an "1" in the box. If recapturing the Oklahoma Affordable Housing Tax Credit, add the recaptured credit here and enter a "2" in the box. If making an Okla. installment payment pursuant to IRC Sec. 965(h) and 68 OS Sec. 2368(K), add the installment payment here and enter a "3" in the box | 5 | 0 00 |
| 6 Less: Other Credits Form (total from Form 511-CR) | 6 | 0 00 |
| 7 Balance of tax due (line 5 minus line 6, but not less than zero) | 7 | 0 00 |
| 8 2022 Oklahoma estimated tax and extension payments and prior year carryforward | 8 | 0 00 |
| 9 Oklahoma withholding (provide Form 1099, Form 500A, Form 500B or other withholding statement) | 9 | 0 00 |
| 10 Amount paid with original return and amount paid after it was filed (amended return only) | 10 | 00 |
| 11 Any refunds or overpayment applied (amended return only) | 11 () | 00 |
| 12 Total of lines 8 through 11 | 12 | 0 00 |
| 13 Overpayment (if line 12 is larger than line 7 enter amount overpaid) | 13 | 0 00 |
| 14 Amount of line 13 to be credited to 2023 estimated tax (original return only) | 14 | 0 00 |



Oklahoma Return of Organization Exempt from Income Tax

| | |
|---|---|
| Name of Organization:: UNIVERSIDAD POPULAR AUTONOMA DEL ESTADO DE | Federal Employer Identification Number: 521417995 |
|---|---|

Amount from line 14 on page 1 0 00

Line 15 provides you the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Place the line number of the organization from page 4 of this form in the box below and enter the amount you are donating. If giving to more than one organization, put a "99" in the box and attach a schedule showing how you would like your donation split.

| | | | |
|----|--|----|------|
| 15 | Donations from your refund <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$ _____ | 15 | 0 00 |
| 16 | Add lines 14 and 15 and enter amount..... | 16 | 0 00 |
| 17 | Amount to be refunded to you (line 13 minus line 16) Refund | 17 | 0 00 |

Direct Deposit Note: →
 All refunds must be by direct deposit. See Direct Deposit Information on page 5 for details.

Is this refund going to or through an account that is located outside of the United States? Yes No

Deposit my refund in my: Checking Account Savings Account

Routing Number: _____

Account Number: _____

| | | | |
|----|---|----|------|
| 18 | Tax Due (if line 7 is larger than line 12 enter tax due)..... Tax Due | 18 | 0 00 |
| 19 | Donation: Public School Classroom Support Fund (For information regarding this fund, see page 4, #5)..... | 19 | 0 00 |
| 20 | For delinquent payment, add penalty of 5% plus interest at 1.25% per month..... | 20 | 0 00 |
| 21 | Underpayment of estimated tax interest Annualized <input type="checkbox"/> | 21 | 0 00 |
| 22 | Total tax, penalty and interest due - Add lines 18-21; pay in full with return Balance Due | 22 | 0 00 |

Under penalty of perjury, I declare the information contained in this document, attachments and schedules are true and correct to the best of my knowledge and belief.

| | | |
|--|---|--|
| Signature of Office or Trustee Date 03/27/2023 | Check this box if the Oklahoma Tax Commission may discuss this return with your tax preparer. | Signature of Preparer Date NOE CARREON 03/11/2023 |
| Printed Name NOE CARREON | <input checked="" type="checkbox"/> | Printed Name of Preparer NOE CARREON |
| Title certified tax pre | Phone Number (720)707-9381 | Preparer's PTIN P02012431 |

SCHEDULE 512-E-X: AMENDED RETURN SCHEDULE (See instructions on page 3)

- A** Did you file an amended Federal income tax return? Yes No
 Provide a copy of the amended Federal return and a copy of "Statement of Adjustment", IRS refund check or deposit slip.
- B** If this return is being filed due to a Federal audit, provide a complete copy of the RAR.
- C** Explanation or reason for amended return (Provide all necessary schedules):