UBIT Template sample.xlsx
Statement of Unrelated Business Income and Expense
June 30, 20xx

Completed by:
Reviewed by:
Unit Contact:

Income:	**Banner Acct Code**	Current FY **FYxx Data**	Previous FY ***FY1xxData***	***$ Variance***
[Banner Account Code Title]	[Banner Account #]	$ -	$ -	$ -
	Total Income:	**$ -**	**$ -**	**$ -**

Expense:	**Banner Acct Code**	**FYxx Data**	***FY1xxData***	***$ Variance***
[Banner Account Code Title]	[Banner Account #]	-	-	$ -
	Total Expense:	**$ -**	**$ -**	**$ -**

Salary and Benefits Expense from Payroll Not on the Detail Tab	$ -	$ -	$ -
Insurance Allocation	-	-	-
Utility allocation	-	-	-
Unrelated Business Income (Loss) before On-behalf Fringes, Depreciation & Interest:	**$ -**	**$ -**	**$ -**

On-behalf Benefit Payments for Payroll on the Detail Tab	$ -	$ -	$ -
Debt Service - Interest Expense	-	-	-
Building Depreciation Expense	-	-	-
Equipment Depreciation Expense	-	-	-
Unrelated Business Income (Loss) after On-behalf Fringes, Depreciation & Interest:	**$ -**	**$ -**	**$ -**

Brief summary of the UBI activity (why the activity is unrelated, source of UBI revenue, associated expenses, and questions/notes for Tax):

SAMPLE

STATEMENT OF INCOME AND EXPENSE
JUNE 30, 20xx

					CFOAPAL#1 title CFOAPAL#1 Fund Type:			
			Total					
Income		**Unrelated**	**Related**	**Total**	**Banner Total**	**UBIT % or $**	**UBIT $**	**Related $**
Account Number	**Account Name**							
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
Total Income		**0.00**	**0.00**	**0.00**	**0.00**		**0.00**	**0.00**
Expense								
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
		0.00	0.00	0.00			0.00	0.00
Subtotal		0.00	0.00	0.00	0.00		0.00	0.00
	Insurance Allocation	0.00	0.00	0.00			0.00	0.00
	Utility Allocation	0.00	0.00	0.00			0.00	0.00
Total Operating Expenses		**0.00**	**0.00**	**0.00**	**0.00**		**0.00**	**0.00**
Net Operating Income (Loss)		**0.00**	**0.00**	**0.00**	**0.00**		**0.00**	**0.00**
401001	MT Aux Enterprise R&R	0.00	0.00	0.00			0.00	0.00
403101	MT Aux Enterprise Debt Service	0.00	0.00	0.00			0.00	0.00
415012	NMT from/to Renewal & Replacement	0.00	0.00	0.00			0.00	0.00
	Expenditures for Capital Assets	0.00	0.00	0.00			0.00	0.00
	Net Income (Loss)	**0.00**	**0.00**	**0.00**	**0.00**		**0.00**	**0.00**

Calculation of Payroll and Benefits for UBI Activity
JUNE 30, 20xx

			These columns are for OBFS UAFR use only:					
Employee Name & Title	Employee UIN	% of Time Spent on UBI Activity	Source CFOAP	Total Salary Expense	UBI % from Detail Tab	UBIT Salary	UBIT Benefits	UBIT Total
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
						0.00		0.00
				Total Allocated Salaries:		**0.00**	**0.00**	**0.00**

UBIT Sponsorship Template sample.xlsx
Statement of Unrelated Business Income and Expense
June 30, 20xx

Reviewed by:	
Unit Contact:	

		Current FY	Previous FY	
Income:	**Banner Acct Code**	**FYxx Data**	***FY1xxData***	***$ Variance***
[Banner Account Code Title]	[Banner Account #]	$ -	$ -	$ -
	Total Income:	**$ -**	**$ -**	**$ -**

Expense:	**Banner Acct Code**	**FYxx Data**	***FYxx Data***	***$ Variance***
[Banner Account Code Title]	[Banner Account #]	$ -	$ -	$ -
	Total Expense:	**$ -**	**$ -**	**$ -**

Salary and Benefits Expense from Payroll Not on the Detail Tab	$ -	$ -	$ -
Insurance Allocation	-	-	-
Utility allocation	-	-	-
Unrelated Business Income (Loss) before On-behalf Fringes, Depreciation & Interest:	**$ -**	**$ -**	**$ -**

On-behalf Benefit Payments for Payroll on the Detail Tab	$ -	$ -	$ -
Debt Service - Interest Expense	-	-	-
Depreciation Expense	-	-	-
Unrelated Business Income (Loss) after On-behalf Fringes, Depreciation & Interest:	**$ -**	**$ -**	**$ -**

Brief summary of the UBI activity (why the activity is unrelated, source of UBI revenue, associated expenses, and questions/notes for Tax):

SAMPLE

UNIVERSITY OF ILLINOIS ("UofI")
VALUATION SUMMARY OF CORPORATE SPONSORSHIP/TRADE-OUT AGREEMENTS
FISCAL YEAR 20xx

SPONSOR NAME:

STEP ONE:

NON-MONETARY BENEFITS TO BE RECEIVED BY SPONSOR FROM UofI:	**TEXT/ANNOUNCEMENT ACKNOWLEDGEMENT (AC) OR ADVERTISING (AD)?**	**Fyxx FAIR MARKET VALUE* (VALUED BY UofI)**	**COMMENTS ****	**SUBJECT TO UNRELATED BUSINESS INCOME TAX ("UBIT")? No (N) or Yes (Y) ****
SAMPLE				
Fair market value of total benefits to be received by sponsor (Should not be greater than total amount of sponsorship payment)		$0.00 ~		

STEP TWO:

MONETARY AND NON-MONETARY BENEFITS TO BE RECEIVED BY UofI FROM SPONSOR:	**FY19 FAIR MARKET VALUE (VALUED BY SPONSOR)**
Total amount of sponsorship payment	$0.00 ~
2% of total sponsorship payment	$0.00 ~
FMV of the benefits (other than "use or acknowledgement" benefits***)	$0.00 ~

If the total fair market value of the benefits to be received by sponsor (other than "use or acknowledgement" benefits) is equal to or less than 2% of the total amount of the sponsorship payment, STOP HERE because there is no UBIT. If, however, the total value of the sponsorship benefits (other than "use or acknowledgement" benefits) exceeds 2% of the sponsorship payment, complete the UBIT Calculation below.

TICKMARK LEGEND:

~ Automatic Calculation

* *Fair market value* is the price at which property would change hands between a willing buyer and a willing seller, neither being under any compulsion to buy or sell, and both having reasonable knowledge of the relevant facts (Treas. Reg. Section 20.2031-1(b)). In most cases, the fair market value can be determined based on UofI's charge to other third parties, for example, other advertisers, other ticket purchasers, etc.

** To be reviewed by Tax Office.

*** *Use or acknowledgement* benefits include (1) a sponsor's logo or slogans that do not contain comparative or qualitative descriptions of the sponsor's products, services, facilities or company, (2) a list of the sponsor's locations, telephone numbers or Internet address, (3) value-neutral descriptions, including displays or visual depictions, of the sponsor's product-line or services, (4) a sponsor's brand or trade names and product or service listings, and (5) exclusive sponsorship arrangements.

STEP THREE:

UBIT CALCULATION:

Total amount of sponsorship payment	$0.00 ~
Less amount of "use or acknowledgement" benefits	$0.00 ~
Less amount exempt from UBIT under other Code provisions	$0.00 ~
Amount of total payment from sponsor that exceeds total benefits to be received by sponsor	$0.00 ~
Gross amount subject to UBIT	0 ~

Direct Expenses (include Banner CFOP):
Indirect Expenses (include Banner CFOP)