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Form 990 Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2008</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2008 calendar year, or tax year beginning 06-01-2008 and ending 05-31-2009		C Name of organization BRADLEY UNIVERSITY		D Employer identification number 37-0661494	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type. See Specific Instructions. Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 1501 W BRADLEY AVENUE City or town, state or country, and ZIP + 4 PEORIA, IL 61625		E Telephone number (309) 677-3117	
				G Gross receipts \$ 179,384,324	
		F Name and address of Principal Officer GARY ANNA 1501 W BRADLEY AVENUE PEORIA, IL 61625		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions) H(c) Group Exemption Number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ▶ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
J Web site: ▶ BRADLEY.EDU					
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other ▶		L Year of Formation 1897		M State of legal domicile IL	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities		
	See Additional Data Table			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	27
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
	5	Total number of employees (Part V, line 2a)	5	3,483
	6	Total number of volunteers (estimate if necessary)	6	766
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	441,964
b	Net unrelated business taxable income from Form 990-T, line 34	7b	120,177	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	32,799,000	18,278,854
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	110,508,000	149,655,263
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,636,000	-34,127,328
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	87,000	-30,578
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	157,030,000	133,776,211
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		42,656,638
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	73,923,000	79,118,314
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	(Total fundraising expenses, Part IX, column (D), line 25 <u>3,657,138</u>)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	51,793,000	46,920,674
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	125,716,000	168,695,626
	19	Revenue less expenses Subtract line 18 from line 12	31,314,000	-34,919,415
	Net Assets or Fund Balances		Beginning of Year	End of Year
20		Total assets (Part X, line 16)	567,510,638	508,372,230
21		Total liabilities (Part X, line 26)	181,375,638	186,017,006
22		Net assets or fund balances Subtract line 21 from line 20	386,135,000	322,355,224

Part II Signature Block

Please 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 officer) is based on all information of which preparer has any knowledge				
	*****		2010-03-17		
	Signature of officer		Date		
	GARY ANNA VICE PRESIDENT BUS AFFAIRS Type or print name and title				
Paid Preparer's Use Only	Preparer's signature	SAMUEL CIGELNIK	Date	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4	CLIFTON GUNDERSON LLP POL BOX 1835 PEORIA, IL 616561835			EIN <input type="checkbox"/>
					Phone no <input type="checkbox"/> (309) 671-4500

May the IRS discuss this return with the preparer shown above? (See instructions) ☒ Yes ☐ No

Part IIStatement of Program Service Accomplishments (See the instructions.)

1

Briefly describe the organization's mission

See Additional Data Table

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes

☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting or make significant changes in how it conducts any program services?

☐ Yes

☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code	) (Expenses \$	121,947,340	including grants of \$	40,178,076) (Revenue \$	122,506,266)
INSTRUCTION AND RESEARCH - PROVIDING HIGHER EDUCATION TO STUDENTS						

4b	(Code	) (Expenses \$	7,691,310	including grants of \$	) (Revenue \$	12,152,361)
AUXILLARY SERVICES - PROVIDES SUPPORT SERVICES FOR STUDENTS WHICH INCLUDE HOUSING, BOOKSTORE, STUDENT ID CARDS, AND CONFERENCE FACILITIES						

























4c	(Code	) (Expenses \$	5,653,252	including grants of \$	) (Revenue \$	6,927,195)
FOOD SERVICE - PROVIDES BOARD (CAFETERIA SERVICES) FOR STUDENTS LIVING ON CAMPUS AND OFF CAMPUS ALSO INCLUDES FOOD PURCHASES BY EMPLOYEES						

	(Code) (Expenses \$	16,364,773	including grants of \$	2,478,562) (Revenue \$	8,038,863)
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4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$) (Revenue \$)
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4e	Total program service expenses \$	151,656,675	Must equal Part IX, Line 25, column (B).			
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Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	Yes
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	Yes
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> 	11	Yes
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12	Yes
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> 	13	Yes
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I</i> 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> 	16	Yes
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i> 	17	No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 	18	Yes
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 	19	Yes
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 	21	No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> 	22	Yes
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> 	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i> 	24a	Yes
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> 	25a	No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> 	25b	No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> 	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> 	27	No

Part IV

Checklist of Required Schedules (Continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29 Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30 Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a354		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b8		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a3,483		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . Note: <i>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	2b			Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	<i>Section 501(c)(7) organizations.</i> Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	<i>Section 501(c)(12) organizations.</i> Enter			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization?	Yes	
	Describe the process in Schedule O		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed _____
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> own website <input checked="" type="checkbox"/> another's website <input checked="" type="checkbox"/> upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. PRATIMA GANDHI CONTROLLER 103 SWORDS HALL 1501 W BRADLEY PEORIA, IL 61625 (309) 677-3123

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

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

Form 990 (2008)

Part VIII

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues		485,786			
	c	Fundraising events	1b				
	d	Related organizations . . .	1c				
	e	Government grants (contributions)	1d				
	f	All other contributions, gifts, grants, and similar amounts not included above	1e	5,232,731			
	g	Noncash contributions included in lines 1a-1f \$	1f	12,560,337			
	h	Total (Add lines 1a-1f)		430,841			
				18,278,854			
Program Service Revenue	2a	INSTRUCTION & RESEARCH	Business Code	611,600	122,355,561	122,355,561	
	b	AUXILLARY SERVICE		722,210	12,333,644	12,179,282	154,362
	c	FOOD SERVICE REVENUE		611,710	6,927,195	6,927,195	
	d	DEPT PGMS		611,710	4,218,179	4,218,179	
	e	INTERCOLLEGIATE ATHLET		611,710	3,200,987	2,913,385	287,602
	f	All other program service revenue			619,697	619,697	
	g	Total. Add lines 2a-2f					
		\$ 149,655,263					
Other Revenue	3	Investment income (including dividends, interest other similar amounts)		9,289,976			9,289,976
	4	Income from investment of tax-exempt bond proceeds		1,535,189			1,535,189
	5	Royalties					
	6a	Gross Rents	(i) Real	295,589			
	b	Less rental expenses	(ii) Personal	476,872			
	c	Rental income or (loss)		-181,283			
	d	Net rental income or (loss)		-181,283			-181,283
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
	b	Less cost or other basis and sales expenses	(ii) Other	44,952,493			
	c	Gain or (loss)		-44,952,493			
	d	Net gain or (loss)		-44,952,493			-44,952,493
	8a	Gross income from fundraising events (not including \$ 200,688 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000	a				
	b	Less direct expenses . . .	b	125,114			
	c	Net income or (loss) from fundraising events . . .		75,574	75,574		
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000	a	128,765			
	b	Less direct expenses . . .	b	53,634			
	c	Net income or (loss) from gaming activities		75,131	75,131		
	10a	Gross sales of inventory, less returns and allowances . . .	a				
	b	Less cost of goods sold . . .	b				
	c	Net income or (loss) from sales of inventory . . .					
	Miscellaneous Revenue	Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			133,776,211	149,364,004	441,964	-34,308,611

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).					
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	42,648,138	42,648,138		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	8,500	8,500		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,361,817	190,374	1,008,523	162,920
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	61,462,544	52,408,299		1,821,352
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,029,310	1,699,006	266,209	64,095
9	Other employee benefits	10,235,684	8,563,384	1,326,039	346,261
10	Payroll taxes	4,028,959	3,373,181	528,526	127,252
11	Fees for services (non-employees)				
a	Management	1,558,022	1,558,022		
b	Legal	240,733	1,989	238,744	
c	Accounting	84,350	4,715	79,635	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	765,134		765,134	
g	Other	389,448	278,618	110,830	
12	Advertising and promotion	321,860	299,944	21,566	350
13	Office expenses	10,417,433	7,786,742	2,002,777	627,914
14	Information technology	1,430,178	1,096,401	296,054	37,723
15	Royalties	39,960	39,960		
16	Occupancy	10,577,783	10,024,777	402,257	150,749
17	Travel	2,860,248	2,624,479	110,310	125,459
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	209,921	198,030	7,641	4,250
20	Interest	2,224,918	2,224,918		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,591,190	8,591,190		
23	Insurance	1,068,857	1,031,392	37,465	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	ATHLETIC MISCELLANEOUS	2,740,841	2,740,841		
b	OTHER PROGRAM MISCELLAN	1,436,764	1,436,764		
c	CFA MISCELLANEOUS	299,403	299,403		
d	RADIO MISCELLANEOUS	284,072	284,072		
e	ALLOCATION OF INDIRECT	0	1,338,253	-1,388,738	50,485
f	All other expenses	1,379,559	905,283	335,948	138,328
25	Total functional expenses. Add lines 1 through 24f	168,695,626	151,656,675	13,381,813	3,657,138
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet**

		(A) Beginning of year		(B) End of year		
Assets	1 Cash—non-interest-bearing	17,901,387	1	30,048,293		
	2 Savings and temporary cash investments	50,943,486	2	15,802,654		
	3 Pledges and grants receivable, net	23,222,397	3	22,391,509		
	4 Accounts receivable, net	2,697,615	4	2,566,980		
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5			
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6			
	7 Notes and loans receivable, net	831,980	7	10,190		
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges	3,326,921	9	2,460,767		
	10a Land, buildings, and equipment—cost basis	<table><tr><td>10a</td><td>363,063,981</td></tr></table>	10a	363,063,981		
	10a	363,063,981				
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	<table><tr><td>10b</td><td>115,903,339</td></tr></table>	10b	115,903,339	208,570,450	10c 247,160,642
	10b	115,903,339				
	11 Investments—publicly traded securities	237,407,133	11	165,516,615		
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	16,962,242	12	16,594,791		
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>	5,647,027	13	5,819,789		
14 Intangible assets		14				
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>		15				
16 Total assets. Add lines 1 through 15 (must equal line 34)	567,510,638	16	508,372,230			
Liabilities	17 Accounts payable and accrued expenses	23,715,801	17	22,085,050		
	18 Grants payable		18			
	19 Deferred revenue	1,810,721	19	1,909,383		
	20 Tax-exempt bond liabilities	126,281,901	20	124,529,401		
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21			
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>	103,550	22	770,040		
	23 Secured mortgages and notes payable to unrelated third parties	2,054,116	23	4,395,155		
	24 Unsecured notes and loans payable	9,399,441	24	8,879,462		
	25 Other liabilities <i>Complete Part X of Schedule D</i>	18,010,108	25	23,448,515		
	26 Total liabilities. Add lines 17 through 25	181,375,638	26	186,017,006		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27 Unrestricted net assets	294,761,734	27	233,430,818		
	28 Temporarily restricted net assets	41,528,238	28	37,094,939		
	29 Permanently restricted net assets	49,845,028	29	51,829,467		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30 Capital stock or trust principal, or current funds		30			
	31 Paid-in or capital surplus, or land, building or equipment fund		31			
	32 Retained earnings, endowment, accumulated income, or other funds		32			
	33 Total net assets or fund balances	386,135,000	33	322,355,224		
	34 Total liabilities and net assets/fund balances	567,510,638	34	508,372,230		

Part XI **Financial Statements and Reporting**

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization BRADLEY UNIVERSITY	Employer identification number 37-0661494
--	--

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).
2	<input checked="" type="checkbox"/>	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II)
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).
7	<input type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II)
8	<input type="checkbox"/>	A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)
11	<input type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a <input type="checkbox"/> Type I b <input type="checkbox"/> Type II c <input type="checkbox"/> Type III - Functionally Integrated d <input type="checkbox"/> Type III - Other
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	<input type="checkbox"/>	Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total Support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Computation of Public Support Percentage		
14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% Facts and Circumstances Test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		<input type="checkbox"/>

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total Add lines 1-5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
cTotal of lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13Total Support (Add lines 9, 10c, 11 and 12)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage			
15	Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16	Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	

Computation of Investment Income Percentage			
17	Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	
19a	33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20	Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

Additional Data

Software ID:
Software Version:
EIN: 37-0661494
Name: BRADLEY UNIVERSITY

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
REX LINDER , TRUSTEE	1 00	X						0	0	0
GERALD L SHAHEEN , CHAIRMAN	5 00	X						0	0	0
KEITH L ALM , TRUSTEE	1 00	X						0	0	0
WAYNE E BAUM , TRUSTEE	1 00	X						0	0	0
CARL M BIRKELBACH , TRUSTEE	1 00	X						0	0	0
ROBERT J CLANIN , TRUSTEE	1 00	X						0	0	0
CHERYL D CORLEY , TRUSTEE	1 00	X						0	0	0
MICHAEL N CULLINAN , TRUSTEE	1 00	X						0	0	0
GEORGINA E HEARD-LABONNE , TRUSTEE	1 00	X						0	0	0
WILLIAM P HEIDRICH , TRUSTEE	1 00	X						0	0	0
JOAN L JANSSEN , TRUSTEE	1 00	X						0	0	0
WAYNE G KLASING , TRUSTEE	1 00	X						0	0	0
MICHEL A MCCORD , VICE CHAIRMAN	1 00	X						0	0	0
KAY W MCCURDY , SECRETARY	1 00	X						0	0	0
JUDSON C MITCHELL , TRUSTEE	1 00	X						0	0	0
HARRY L PUTERBAUGH , TRUSTEE	1 00	X						0	0	0
DAVID P RANSBURG , TRUSTEE	1 00	X						0	0	0
MELVIN J SMITH , TRUSTEE	1 00	X						0	0	0
MICHELE J RICHEY , TRUSTEE	1 00	X						0	0	0
RAJESH K SOIN , TRUSTEE	1 00	X						0	0	0
THOMAS E SPURGEON , TRUSTEE	1 00	X						0	0	0
DOUGLAS S STEWART , TRUSTEE	1 00	X						0	0	0
ROBERT E TURNER , TRUSTEE	1 00	X						0	0	0
DONALD L ULLMAN , TRUSTEE	1 00	X						0	0	0
W PHILIP WILMINGTON , TRUSTEE	1 00	X						0	0	0
MICHAEL LANDWIRTH , TRUSTEE	1 00	X						0	0	0
JOANNE GLASSER , PRESIDENT	60 00			X				467,145	0	116,450
GARY M ANNA , VP OF BUS AFFAIRS	50 00			X				242,647	0	61,844
ROBERT I BOLLA , PROVOST	50 00				X			166,540	0	35,155
ALAN G GALSKY , VP STUDENT AFFAIRS	50 00				X			168,776	0	24,208

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES LES , BASKETBALL COACH	40 00					X		403,758	0	38,776
D PAUL MEHTA , PROFESSOR	40 00					X		236,335	0	31,594
AARON BUCHKO , PROFESSOR	40 00					X		215,566	0	21,550
PATRICIA A HATFIELD , PROFESSOR	40 00					X		185,672	0	33,283
JOHN W GILLETT , PROFESSOR	40 00					X		177,930	0	18,503
PETER B JOHNSEN , PROVOST	50 00						X	200,648	0	41,970
WILLIAM D ENGLEBRECHT , VP, DEVELOPMENT	50 00						X	170,570	0	68,876

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a INSTRUCTION & RESEARCH	611,600	122,355,561	122,355,561		
b AUXILLARY SERVICE	722,210	12,333,644	12,179,282	154,362	
c FOOD SERVICE REVENUE	611,710	6,927,195	6,927,195		
d DEPT PGMS	611,710	4,218,179	4,218,179		
e INTERCOLLEGIATE ATHLET	611,710	3,200,987	2,913,385	287,602	

Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

BRADLEY UNIVERSITY IS COMMITTED TO NURTURING THE MULTIFACETED DEVELOPMENT OF STUDENTS TO ENABLE THEM TO BECOME LEADERS, INNOVATORS, AND PRODUCTIVE MEMBERS OF SOCIETY. OUR GRADUATES ARE PREPARED FOR LIFE AND PROFESSIONS IN A CHANGING WORLD AND THEY ARE ABLE TO CROSS ACADEMIC, GEOGRAPHIC, AND CULTURAL BOUNDRIES. A BRADLEY EDUCATION IS CHARACTERIZED BY SMALL CLASSES, ACTIVE LEARNING, MENTORING BY HIGHLY QUALIFIED FACULTY, CHALLENGING ACADEMIC PROGRAMS, OPPORTUNITIES FOR STUDY ABROAD, AND NUMEROUS CO-CURRICULAR ACTIVITIES.WE RECRUIT, DEVELOP, AND SUPPORT FACULTY WHO ARE PASSIONATE EDUCATORS AND OUTSTANDING SCHOLARS WHOSE RESEARCH AND CREATIVE CONTRIBUTIONS BENEFIT SOCIETY. WE EXPECT AND REWARD PEDAGOGY AND SCHOLARSHIP OF EXCEPTIONAL QUALITY AND INFLUENCE.

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

BRADLEY UNIVERSITY IS COMMITTED TO NURTURING THE MULTIFACETED DEVELOPMENT OF STUDENTS TO ENABLE THEM TO BECOME LEADERS, INNOVATORS, AND PRODUCTIVE MEMBERS OF SOCIETY. OUR GRADUATES ARE PREPARED FOR LIFE AND PROFESSIONS IN A CHANGING WORLD AND THEY ARE ABLE TO CROSS ACADEMIC, GEOGRAPHIC, AND CULTURAL BOUNDRIES. A BRADLEY EDUCATION IS CHARACTERIZED BY SMALL CLASSES, ACTIVE LEARNING, MENTORING BY HIGHLY QUALIFIED FACULTY, CHALLENGING ACADEMIC PROGRAMS, OPPORTUNITIES FOR STUDY ABROAD, AND NUMEROUS CO-CURRICULAR ACTIVITIES.WE RECRUIT, DEVELOP, AND SUPPORT FACULTY WHO ARE PASSIONATE EDUCATORS AND OUTSTANDING SCHOLARS WHOSE RESEARCH AND CREATIVE CONTRIBUTIONS BENEFIT SOCIETY. WE EXPECT AND REWARD PEDAGOGY AND SCHOLARSHIP OF EXCEPTIONAL QUALITY AND INFLUENCE.

SCHEDULE D
(Form 990)

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2008

Open to Public Inspection

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization
BRADLEY UNIVERSITY

Employer identification number
37-0661494

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate Contributions to (during year)	
3	Aggregate Grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area☐ Protection of natural habitat☐ Preservation of certified historic structure☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements

Part III

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

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$0

(ii) Assets included in Form 990, Part X

► \$258,695

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

For Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2008

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

b

☐

Scholarly research

c

☒

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain why in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	251,408,127			
b	Contributions	5,085,081			
c	Investment earnings or losses	-61,664,008			
d	Grants or scholarships	3,007,868			
e	Other expenditures for facilities and programs	4,215,018			
f	Administrative expenses	891,468			
g	End of year balance	186,714,846			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 54 440 %

b

Permanent endowment ▶ 40 850 %

c

Term endowment ▶ 4 710 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

Yes

No

(ii)

related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		23,780,206		23,780,206
b Buildings		230,519,626	53,372,212	177,147,414
c Leasehold improvements				
d Equipment		67,524,886	57,217,448	10,307,438
e Other		41,239,263	5,313,679	35,925,584
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				247,160,642

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products	8,747,860	F
Closely-held equity interests		
Other MORTGAGES AND NOTES	600,895	C
Other OTHER	290,472	C
Other REAL ESTATE & FARMS	5,074,158	F
Other LIFE INSURANCE POLICIES	898,726	F
Other EXTERNAL TRUSTS	982,680	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	16,594,791	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
PERKINS STUDENT LOAN PROGRAM	5,819,789	C
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	5,819,789	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
POST-RETIREMENT BENEFITS OTHER THAN PENSIONS	17,930,338
SWAP CONTRACT	3,921,827
STUDENT DEPOSITS	1,596,350
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	23,448,515

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	133,776,211
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	168,695,626
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-34,919,415
4	Net unrealized gains (losses) on investments	4	-25,061,821
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,798,540
9	Total adjustments (net) Add lines 4 - 8	9	-28,860,361
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-63,779,776

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	94,894,797
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-38,771,900
e	Add lines 2a through 2d	2e	-38,771,900
3	Subtract line 2e from line 1	3	133,666,697
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	765,134
b	Other (Describe in Part XIV)	4b	-655,620
c	Add lines 4a and 4b	4c	109,514
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	133,776,211

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	203,615,794
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	74,457,202
e	Add lines 2a through 2d	2e	74,457,202
3	Subtract line 2e from line 1	3	129,158,592
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	765,134
b	Other (Describe in Part XIV)	4b	38,771,900
c	Add lines 4a and 4b	4c	39,537,034
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	168,695,626

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
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SCHEDULE E

(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Name of the organization BRADLEY UNIVERSITY	Employer identification number 37-0661494
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1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain

THE STATEMENT "BRADLEY UNIVERSITY IS COMMITTED TO A POLICY OF NON-DISCRIMINATION AND THE PROMOTION OF EQUAL OPPORTUNITIES FOR ALL PERSONS REGARDLESS OF AGE, COLOR, CREED, DISABILITY, ETHNICITY, MARITAL STATUS, NATIONAL ORIGIN, RACE, RELIGION, SEX,SEXUAL ORIENTATION, OR VETERAN STATUS THE UNIVERSITY IS ALSO COMMITTED TO COMPLIANCE WITH ALL APPLICABLE LAWS REGARDING NON-DISCRIMINATION, HARASSMENT AND AFFIRMATIVE ACTION " IS CONSPICUOUSLY DISPLAYED IN ALL ADMISSIONS MATERIAL INCLUDING UNIVERSITY CATALOGS

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)

5 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

b Admissions policies?

c Employment of faculty or administrative staff?

d Scholarships or other financial assistance?

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)

6a Does the organization receive any financial aid or assistance from a governmental agency?

b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 6a or b, please explain using an attached statement

7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

YES

NO

1

Yes

2

Yes

3

Yes

4a

Yes

4b

Yes

4c

Yes

4d

Yes

5a

No

5b

No

5c

No

5d

No

5e

No

5f

No

5g

No

5h

No

6a

Yes

6b

No

7

Yes

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
BRADLEY UNIVERSITY

Employer identification number

37-0661494

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance ☐ **Yes** ☒ **No**

2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EAST ASIA			PROGRAM SERVICES	CPA PREP EXAMINATIONS	60,419
NORTH AMERICA			PROGRAM SERVICES	TRAVEL AS PART OF PROGRAM OF STUDY	11,801
SOUTH ASIA			PROGRAM SERVICES	TRAVEL AS PART OF PROGRAM OF STUDY	50,525
SOUTH ASIA			PROGRAM SERVICES	TRAVEL AS PART OF PROGRAM OF STUDY	108,695
EUROPE			PROGRAM SERVICES	STUDY ABROAD PROGRAM	510,874
MIDDLE EAST & NORTH AFRICA			PROGRAM SERVICES	STUDY ABROAD PROGRAM	100,225
Totals ►					842,539

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐ ☐
Use Schedule F-1 if additional space is needed.

[illegible]

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► _____

3 Enter total number of other organizations or entities

Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule F (Form 990) 2008

Software ID:

Software Version:

EIN: 37-0661494

Name: BRADLEY UNIVERSITY

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			AUCTION	GOLF OUTING		(Add col (a) through col (c))
			(event type)	(event type)	(total number)	
	1	Gross receipts	81,104	58,905	60,679	200,688
Direct Expenses	2	Less Charitable contributions				
	3	Gross revenue (line 1 minus line 2)	81,104	58,905	60,679	200,688
	4	Cash Prizes				
	5	Non-cash Prizes		135		135
	6	Rent/Facility costs	20,721	21,920	29,676	72,317
	7	Other direct expenses	10,018	15,289	27,355	52,662
	8	Direct expense summary Add lines 4 through 7 in column (d) ▶				125,114
	9	Net income summary Combine lines 3 and 8 in column (d). ▶				75,574

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue			128,765	128,765
Direct Expenses	2	Cash prizes			51,869	51,869
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses			1,765	1,765
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 75 000 % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				53,634
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶				75,131

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities IL		
a	Is the organization licensed to operate gaming activities in each of these states?	9a Yes	
b	If "No," Explain		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	No
b	If "Yes," Explain		
11	Does the organization operate gaming activities with nonmembers?	11 Yes	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	No

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b 100 000 %		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
Name ▶ CRAIG DAHLQUIST			
Address ▶ 1501 W BRADLEY AVE PEORIA,IL 61604			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____		
c	If "Yes," enter name and address		
Name ▶			
Address ▶			
16	Gaming manager information		
Name ▶ CRAIG DAHLQUIST			
Gaming manager compensation ▶ \$ _____ 0			
Description of services provided ▶ BOOKS & RECORDS			
<input type="checkbox"/> Director/officer <input checked="" type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	No
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
BRADLEY UNIVERSITY

Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

OMB No 1545-0047

2008

Open to Public
Inspection

Employer identification number
37-0661494

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

☒

1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations

3

Enter total number of other organizations

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
BRADLEY UNIVERSITY

Employer identification number
37-0661494

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div><div><div><div><input checked="" type="checkbox"/> First class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>b</div><div>If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain</div></div>		No
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</div></div>	Yes	
<div><div>3</div><div>Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply</div><div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div><div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a</div><div><div>a</div><div>Receive a severance payment or change of control payment?</div></div><div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div><div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div><div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div></div></div>		
<div><div>501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.</div></div>		
<div><div>5</div><div>For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div><div><div>a</div><div>The organization?</div></div><div><div>b</div><div>Any related organization?</div><div>If "Yes," to line 5a or 5b, describe in Part III</div></div></div>		No
<div><div>6</div><div>For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</div><div><div>a</div><div>The organization?</div></div><div><div>b</div><div>Any related organization?</div><div>If "Yes," to line 6a or 6b, describe in Part III</div></div></div>		No
<div><div>7</div><div>For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</div></div>		No
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III</div></div>		No

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOANNE GLASSER	(i) (ii)	396,049		71,096	83,500	32,950	583,595	
GARY M ANNA	(i) (ii)	193,473		49,174	45,933	15,911	304,491	15,000
ROBERT I BOLLA	(i) (ii)	166,288		252	20,500	14,655	201,695	
ALAN G Galsky	(i) (ii)	153,776	15,000		7,723	16,485	192,984	
JAMES LES	(i) (ii)	386,577		17,181	15,500	23,276	442,534	
D PAUL MEHTA	(i) (ii)	236,335			20,500	11,094	267,929	
AARON BUCHKO	(i) (ii)	215,566			5,196	16,354	237,116	
PATRICIA A HATFIELD	(i) (ii)	185,672			15,500	17,783	218,955	
JOHN W GILLETT	(i) (ii)	177,930			6,075	12,428	196,433	
PETER B JOHNSEN	(i) (ii)	194,906		5,742	20,250	21,720	242,618	
WILLIAM D ENGLEBRECHT	(i) (ii)	169,729		841	20,500	48,376	239,446	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

Schedule J (Form 990) 2008

Software ID:

Software Version:

EIN: 37-0661494

Name: BRADLEY UNIVERSITY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOANNE GLASSER	(i) (ii)	396,049		71,096	83,500	32,950	583,595	
GARY M ANNA	(i) (ii)	193,473		49,174	45,933	15,911	304,491	15,000
ROBERT I BOLLA	(i) (ii)	166,288		252	20,500	14,655	201,695	
ALAN G GALSKY	(i) (ii)	153,776	15,000		7,723	16,485	192,984	
JAMES LES	(i) (ii)	386,577		17,181	15,500	23,276	442,534	
D PAUL MEHTA	(i) (ii)	236,335			20,500	11,094	267,929	
AARON BUCHKO	(i) (ii)	215,566			5,196	16,354	237,116	
PATRICIA A HATFIELD	(i) (ii)	185,672			15,500	17,783	218,955	
JOHN W GILLETT	(i) (ii)	177,930			6,075	12,428	196,433	
PETER B JOHNSEN	(i) (ii)	194,906		5,742	20,250	21,720	242,618	
WILLIAM D ENGLEBRECHT	(i) (ii)	169,729		841	20,500	48,376	239,446	

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds	OMB No 1545-0047
		2008
		Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization BRADLEY UNIVERSITY	Employer identification number 37-0661494
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Part I Bond Issues (Required for 2008)									
(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A ILLINOIS FINANCE AUTHORITY SERIES 2007 A	86-1091967	45200B3A4	04-17-2007	59,003,141	FINANCE REFUND AND ISSUANCE COSTS		X		X
B ILLINOIS FINANCE AUTHORITY SERIES 2008 A&B	86-1091967	45200FDZ9	03-25-2008	63,775,000	FINANCE REFUND AND ISSUANCE COSTS		X		X

Part II Proceeds <i>(Optional for 2008)</i>											
		A		B		C		D		E	
1	Total Proceeds of Issue										
2	Gross Proceeds in Reserve Funds										
3	Proceeds in Refunding or Defeasance Escrows										
4	Other Unspent Proceeds										
5	Issuance Costs from Proceeds										
6	Working Capital Expenditures from Proceeds										
7	Capital Expenditures from Proceeds										
8	Year of Substantial Completion										
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?										
10	Were the bonds issued as part of an advance refunding issue?										
11	Has the final allocation of proceeds been made?										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use (Optional for 2008)											
		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2	Are there any lease arrangements with respect to the financed property which may result in private business use?										

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

Part IV

Arbitrage (Optional for 2008)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?										
6	Did the bond issue qualify for an exception to rebate?										

Schedule L
(Form 990 or 990-EZ)

OMB No 1545-0047

2008

Open to Public Inspection

Transactions with Interested Persons

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.
▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38b or 40b.

Name of the organization BRADLEY UNIVERSITY	Employer identification number 37-0661494
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
CONTRACT PAYABLE - PETER JOHNSEN	X			770,040		No	Yes		Yes	
Total ▶ \$ 770,040										

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
DOUG STEWART	TRUSTEE, BOARD	130,057	PROVISION FOR GOODS & SERVICES		No
GERALD SHAHEEN	TRUSTEE, BOARD	130,057	PROVISION FOR GOODS & SERVICES		No
KAY MCCURDY	TRUSTEE, BOARD	100,785	PROVISION FOR GOODS & SERVICES		No

SCHEDULE M (Form 990)	Non-Cash Contributions	OMB No 1545-0047
		2008
		Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization BRADLEY UNIVERSITY	Employer identification number 37-0661494
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Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	1	5,000	OPINION OF EXPERT
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		5,702	OPINION OF EXPERT
5 Clothing and household goods				
6 Cars and other vehicles	X		68,372	LEASE VALUE - AUTOS
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	14	99,403	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts	X	1	3,250	OPINION OF EXPERT
23 Scientific specimens				
24 Archeological artifacts				
25 Other (describe PTS - ENGINEERING CLASS)	X	7	75,985	RECEIPTS
26 Other (describe MTG RECEPTION EXPENSE)	X	64	34,235	RECEIPTS
27 Other (describe BUILDING MATERIALS)	X	6	50,350	INVOICES
28 Other (describe PRINTING, POSTERS)	X	4	4,666	FAIR MARKET VALUE
Other (describe BROADCAST TIME FOR ATHLETICS)	X	2	39,518	FAIR MARKET VALUE
Other (describe ATHLETIC EVENTS INCLUDING FUNDRAISING)	X	5	8,907	FAIR MARKET VALUE
Other (describe FUNDRAISING - WCBU)	X	24	33,328	FAIR MARKET VALUE
Other (describe MISCELLANEOUS)	X	3	2,125	FAIR MARKET VALUE
Other (describe USE OF AUTOS)	X	16	68,372	LEASE VALUE AUTOS
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement				298

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes", describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No
b If "Yes", describe in Part II			
33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is checked, describe in Part II			

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<div>SCHEDULE O</div> <div>(Form 990)</div> <div>Department of the Treasury</div> <div>Internal Revenue Service</div>		<div>Supplemental Information to Form 990</div> <div>► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.</div>			OMB No 1545-0047
					<div>2008</div>
		Name of the organization BRADLEY UNIVERSITY			Employer identification number 37-0661494

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	INTERCOLLEGIATE SPORTS - PROVIDES FOR INTERCOLLEGIATE ATHLETIC ACTIVITY DIVISION 1 SPORTS OF MEN'S BASKETBALL, TENNIS, TRACK, GOLF, BASEBALL, AND SOCCER AND WOMEN'S BASKETBALL, VOLLEYBALL, CROSS COUNTRY, GOLF, SOFTBALL, AND TENNIS Expenses \$ 10157371 including grants of \$ 2478562 Revenue \$ 3200987

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER EDUCATIONAL BENEFITS - PROVIDES TECHNICAL SUPPORT FOR FACULTY, STAFF, AND STUDENTS, CHILDCARE CENTER FOR TRAINING OPPORTUNITIES, EMPLOYMENT CENTER FOR STUDENTS Expenses \$ 1652774 including grants of \$ 0 Revenue \$ 619697

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER DEPARTMENT PROGRAMS - PROVIDES SERVICES FOR TRANSCRIPTS, CULTURAL PROGRAMS OFFERED TO CAMPUS AND PUBLIC, CONTINUING EDUCATION PROGRAMS, AND MISCELLANEOUS PROGRAMS Expenses \$ 4554628 including grants of \$ 0 Revenue \$ 4218179

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 4		BY-LAWS OF THE ORGANIZATION WERE REVISED

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE FORM 990 DETAIL IS PREPARED BY THE CONTROLLER, AND ASSISTANT CONTROLLERS THE ENTIRE FORM IS THEN REVIEWED AND APPROVED BY THE CONTROLLER WHO THEN SUBMITS IT TO THE VICE PRESIDENT BUSINESS AFFAIRS FOR REVIEW AND APPROVAL THEREAFTER, THE FORM 990 WAS PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES FOR REVIEW PRIOR TO SUBMISSION TO THE ENTIRE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		ON AN ANNUAL BASIS, THE TRUSTEES OF THE BOARD COMPLETE CONFLICT OF INTEREST FORMS FORMS ARE REVIEWED AND DISCLOSED TO THE EXECUTIVE COMMITTEE AS APPROPRIATE CONFLICT OF INTEREST FORM ARE ALSO COMPLETED ANNUALLY BY OFFICERS AND KEY EMPLOYEES FORMS ARE REVIEWED BY THE PRESIDENT THE PRESIDENT'S CONFLICT OF INTEREST FORM IS REVIEWED BY COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES FACULTY MUST CERTIFY TO THEIR DEPARTMENT CHAIRS ON AN ANNUAL BASIS THEIR COMPLIANCE WITH THE UNIVERSITY'S CONFLICT OF COMMITMENT AND CONFLICT OF INTEREST POLICIES BY COMPLETING A FORM THE DEPARTMENT CHAIR FORWARDS THESE CERTIFICATIONS TO THE PROVOST IF THERE IS A CONFLICT AN AD HOC DISCLOSURE FORM IS COMPLETED AFTER DEPARTMENT CHAIR REVIEWS THIS FORM IS FORWARDED TO THE DEAN, THEN PROVOST FOR APPROVAL OF DETERMINATION CERTAIN ADMINISTRATIVE AND PROFESSIONAL STAFF AT THE UNIVERSITY ARE ALSO REQUIRED TO COMPLETE CONFLICT OF INTEREST FORMS THESE FORMS ARE THEN REVIEWED BY THEIR DIRECTORS AND FORWARDED TO THE APPROPRIATE VICE PRESIDENT FOR REVIEW, APPROVAL, AND DETERMINATION

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES DETERMINES THE PRESIDENT'S COMPENSATION BASED UPON FORM 990 OF OTHER ORGANIZATIONS AND COMPENSATION SURVEYS A WRITTEN EMPLOYMENT CONTRACT IS ISSUED THE UNIVERSITY PRESIDENT DETERMINES COMPENSATION OF THE OTHER OFFICERS AND KEY EMPLOYEES BASED UPON COMPENSATION SURVEYS THIS IS THEN SUBMITTED TO THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES FOR REVIEW A WRITTEN EMPLOYMENT CONTRACT IS ISSUED

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		DOCUMENTS ARE AVAILABLE UPON REQUEST AS WELL AS ON THE ORGANIZATION'S WEBSITE

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINC2C		THE AUDIT COMMITTEE OF THE UNIVERSITY'S BOARD OF TRUSTEES IS CHARGED WITH THE OVERSIGHT RESPONSIBILITIES AND SELECTION OF THE INDEPENDENT AUDITOR

Identifier	Return Reference	Explanation
FORM 926	FORM 926 - FROM PARTNERSHIPS	BRADLEY UNIVERSITY IS AN INVESTOR IN 3 PARTNERSHIPS THAT PROVIDED BRADLEY UNIVERSITY WITH FORM 926 THE FORMS LIST NUMEROUS TRANSFERS TO FOREIGN CORPORATIONS THE DETAILED TRANSFERS WERE PROVIDED TO THE INTERNAL REVENUE SERVICE AS AN ATTACHMENT TO THE FORM 990-T