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DLN: 93493046021000

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 2008

Open to Public

Department of the Treasury

Form **990**

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

			_					Inspection	
			_	r, or tax year beginning 07-01-20 C Name of organization	008 and ending 06-30-200)9	D Employer ider	ntification number	
_	:k ıf apı ess cha		ease se IRS	Wisconsin Alumni Research Foundati	on		39-0833612		
_		la	bel or int or	Doing Business As			E Telephone nui		
_	e chan	ty	pe. See				(608) 263-2	825	
_	l return	In	ecific struc-	Number and street (or P O box if m 614 N Walnut Street	all is not delivered to street addre	ess) Room/suite	G Gross receipts		
_	ination		ons.				i		
	nded re			City or town, state or country, and Z Madison, WI 53726	IP + 4		i		
Appli	cation	pending					<u> </u>		
				ne and address of Principal Offic Gulbrandsen	er		s a group return t		
				Walnut Street		affilia	tes?	⊤Yes ▼ No	
		<u> </u>		on, WI 53726		H(b) Are all	l affiliates included	d?	
) (3) ◀ (Insert no)	or 527			See instructions)	
We	b site	: ► WWW	WARFO	RG		H(c) Grou	p Exemption Nun	nder F	
Туре	of orga	anization 🔽	Corporat	tion trust association other		L Year of For	rmation 1925 M S	State of legal domicile WI	
Par	+ T	Summa	ırv						
				ne organization's mission or mos	t significant activities				
Sall lands		dditional D			-				
	2	Check this	s box 🏻	if the organization discontinued	its operations or disposed	of more than 2	:5% of its assets	3	
	3	Number of	fvoting	members of the governing body ((Part VI, line 1a)		. з_	16	
	4	Number of	fındepe	ndent voting members of the gov	erning body (Part VI, line 1	.b)	. 4 _	16	
{	5	Total num	berofe	mployees (Part V , line 2a) .			5 _	98	
				olunteers (estimate if necessary			6 _	(
		_		ated business revenue from Part	• •	_	315.10		
•	ь	Net unreia	atea bus	iness taxable income from Form	990-1, line 34	Deia	7b or Year	-315,107 Current Year	
	8	Contribut	uone an	d grants (Part VIII, line 1h)			r Year	Current Year	
<u>9</u>	9		53,702,160	56,465,957					
venue	10			revenue (Part VIII, line 2g) . me (Part VIII, column (A), lines		' <u> </u>	47,276,856	-330,681,771	
2:	11			art VIII, column (A), lines 5, 6d		;	282,882,043	1,674	
	12			dd lines 8 through 11 (must equa					
		12)			(1)	-	383,861,059	-274,214,140	
	13			ar amounts paid (Part IX, column	, ,,		64,278,029	68,191,174	
	14 15			or for members (Part IX, column (ompensation, employee benefits		5_		С	
\$	13	10)	other co	ompensation, employee benefits	(Fait IX, Column (A), mes	J-	8,399,418	9,778,579	
පිරිම මෙම මෙම	16a	Professio	nal fund	Iraising fees (Part IX, column (A)), lıne 11e)			C	
<u>ਜ</u> ਿ	b	(Total fund	raising ex	penses, Part IX, column (D), line 25 $\frac{0}{}$)				
_	17	Otherex	penses ((Part IX, column (A), lines 11a-	11d, 11f-24f)		33,489,206	39,845,266	
	18	Total exp	enses—	-add lines 13–17 (must equal Pa	rt IX, line 25, column (A))		106,166,653	117,815,019	
	19	Revenue	less exp	penses Subtract line 18 from line	e 12	;	277,694,406	-392,029,159	
5 0 3 0 0						Beginni	ing of Year	End of Year	
Fund Balances	20	Total ass	ets (Par	rt X, line 16)		2,	176,885,460	1,680,643,850	
[평가	21	Total liab	ılıtıes (F	Part X, line 26)			227,918,762	325,502,644	
	22	Net asset	ts or fun	nd balances Subtract line 21 from	n line 20	1,9	948,966,698	1,355,141,206	
Part	ш	Signat							
				егјигу, I declare that I have examined th correct, and complete Declaration of pr					
leas	se	*****				2010-	-02-10		
ign Iere		Signatur	e of office	er		Date			
				en Managing Director					
		T Type or	ринк пат	ne and title					
		Preparer's signature	Jım Gr	raham	Date	Check if self-	Preparer's PTIN (S	See Gen Inst)	
		gacure	,			empolyed 🕨 🦵			
aid					EIN 🕨				
repa		Firm's name		RSM McGladrey Inc			EIN 🕨		
	nlv		oyed),	P			Phone no • (60		

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission See Part I, Line 1
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting or make significant changes in how it conducts any program services?
4	If "Yes," describe these changes on Schedule O 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	Organic Materials, Land Use, Materials Design, Mathematical Physics, Minimally Invasives Medical Techniques, Molecular Biology, Symbiosis, Systems Biology, Vitamin D and Women's Health The Department of the University of Misconsin of the Invention of the University of Misconsin has delegated this right to the Course of university of Wisconsin and an agency of the Gendral Baylor of the University of Misconsin Date of the Misconsin Date of the Inventions and a new research for Excellence funded 45 interdisciplinary faculty members in the following areas, Agroecology, Chemical Biology, Chemistry, Cognitive Science, Computational Sciences, Computer Engineering, Cosmology, Disability Studies, Energy Sources/Policy, Food Safety, Functional Organic Materials, Land Use, Materials Design, Mathematical Physics, Minimally Invasive Medical Techniques, Molecular Biometry, Neurodegenerative Diseases, Stem Cell Biology, Symbiosis, Systems Biology, Vitamin D and Women's Health The patent and licensing function produced the following results during the year. The University of Madison disclosed 345 inventions to the Wisconsin Alumni Research Foundation. The Foundation filed 265 U.S. patents and 47 foreign patent applications on behalf of the University of Wisconsin During the 2008-09 fiscal year 111 U.S. patents and 114 foreign patents were granted to the Foundation by the respective patent offices Under federal law (i.e. The Bayh Dole Act) universities or their 501(c)(3) patent management organizations have the right to take title to inventions made in the course of university research funded in whole or in part by an agency of the federal government. The University of Wisconsin - Madison has delegated this right to WARF WARF is the designated patent management organization for the University of Wisconsin-Madison and in that role WARF exercises the University's rights and obligations under the Bayh Dole Act. During fiscal year 2008-09, 56 licenses and options and 1 equity agreement were concluded with industrial firms.
4b	(Code) (Expenses \$ 1,800,000 including grants of \$ 1,800,000) (Revenue \$) Wicell's primary purpose is to support human embryonic stem cell research at the University of Wisconsin - Madison, provide scientific research and investigation into the culture, development and differentiation of human and animal embryonic stem cells, distribute cells, teach scientists how to successfully culture the cells, educate the general public about the science, license the technology to other qualified research organizations to promote additional scientific research in this area WiCell distributes human and animal embryonic stem cells and licenses the related technology only to qualified research organizations which commit to carry on such research in an ethical manner. The scientific research carried out by WiCell and others who acquire cells and the right to use the related technology have as their objective the eventual, use of cells to treat or prevent disease and to enable defective or injured body parts or systems to be repaired or replaced, as well as to understand early human development. In September, 2005 WiCell was selected by the National Institutes of Health to establish the federal government's first and only National Stem Cell Bank. The main goal of the project is to establish a National Stem Cell Bank (NSCB) that will serve the research community by performing comprehensive characterization of the 21 HESC lines registered with the federal government and distributing these cell lines to investigators in academic and non-profit research institutions throughout the world WiCell laboratory operations are located in three separate facilities. 1) the Spring Street laboratory located near the UW-Madison campus provides core support to numerous stem cell research activities. 2) A laboratory located at the UW Research Park is used to derive and characterize new, non-federally approved, cell lines During fiscal year 2008-09 WiCell provided 12 training sessions on stem cell maintenance and care The sessions were attended
4c	(Code) (Expenses \$ 200,000 including grants of \$ 200,000) (Revenue \$)
	The WiSys Technology Foundation was established in March 2000 to provide technology transfer service for the University of Wisconsin campuses excluding the University of Wisconsin-Madison. The mission of WiSys is to provide protection for technology through patents or other methods, for the UW system faculty's discoveries and to negotiate license agreements that enable industry to commercialize inventions from UW Systems' institutions During fiscal year 2008-09 WiSys reviewed 26 new invention disclosures received from UW-System faculty and accepted 11 of the disclosures for further study and patenting. During fiscal 2008-09 WiSys applied for 12 U S. patents and derivatives and 2 foreign patents and derivatives. WiSys received 2 U S. issued patents and 1 foreign issued patent WiSys completed 3 new license and options agreements and 2 new material transfer agreements. WiSys operates its offices located at 614 Walnut Street, Madison, Wisconsin with 4 employees.
	(Code) (Expenses \$ 8,000,000 including grants of \$ 8,000,000) (Revenue \$)
4d	Other program services (Describe in Schedule O)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses \$ 104.179.259 Must equal Part IX. Line 25. column (B).

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C,	4	Yes	
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? If "Yes," complete Schedule C, Part III	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? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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? If "Yes," complete Schedule D, Part IV	9		No
10 11	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	10		N o
	Parts VI, VII, VIII, IX, or X as applicable	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? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
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 ? If "Yes," complete Schedule F, Part I	14b		No
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? If "Yes," complete Schedule F, Part III	16		No
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? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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? If "Yes," complete Schedule L, Part I			N o
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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			
а	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			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	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		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		Νo
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		Νo
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	Yes	
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		Νο
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

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliano	e				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	703			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t	o ven	dors and reportable			
·	gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements filed for the calendar year ending with or within the year covered by this	2a	98			
.	return					
ь	If at least one is reported in 2a, did the organization file all required federal employr Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin					
	return?			3a		Νο
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch	edule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a sover, a financial account in a foreign country (such as a bank account, securities acaccount)?			4a		No
ь	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Re Financial Accounts.	eport o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sł	nelter transaction?	5b		Νo
С	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp	t Entit	ty Regarding Prohibited			
	Tax Shelter Transaction?	•		5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	natsu •••	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section $170(c)$.					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbut	ion of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services p	rovide	d?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prope		· ·			
	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	/ prem	niums on a personal			
	benefit contract?			7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8	8899	as required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization f	ile a F	orm 1098-C as			
	required?	• •		7h		No
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a excess business holdings at any time during the			8		
0	year?					
9 -				0-		
a	Did the organization make any taxable distributions under section 4966?			9a 9b		
10	Did the organization make a distribution to a donor, donor advisor, or related person	•		90		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a	I			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	10a				
U	facilities	100				
11	Section 501(c)(12) organizations Enter					
а	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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	ı lıeu d	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
			i		ı	

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	v and Manageme	dv	В	ernina	Gov	Α.	ion	Sect	S
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			Yes	No				
	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.							
1a	Enter the number of voting members of the governing body 1a 16							
Ь	Enter the number of voting members that are independent 16							
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?	2		Νο				
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?							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?							
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο				
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	the governing body?	8a	Yes					
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νο				
b	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?	9b						
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	10		Νο				
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	11		Νο				

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	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?	16a		Νο
b	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?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed CA
- 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 own website. 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

Carl E Gulbrandsen 614 N Walnut St Madison, WI 537052336 (608) 890-1787

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

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

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i	·	Posit	(C) chec	:k al				(-)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

			(i tion that a			II			(E)	(F)
(A) Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Оппов	Key employee	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			_							
			+							
			-							
			+	\vdash	\dashv		\vdash			
1b Total			.	<u> </u>			>	2,964,273	185,000	852,599

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►10

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3	Yes	
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5	163	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
FindorffMortenson a Joint Venture 300 S Bedford St Madison, WI 53703	Building Construction	28,765,820
Findorff Inc PO Box 575 Madison, WI 537010575	Building Construction	10,923,633
UihleIn & Wilson Architects 322 E Michigan St Ste 400 Milwaukee, WI 53202	Building Design	5,493,096
Quarles & Brady LLP 411 E Wisconsin Ave 2550 Milwaukee, WI 53202	Legal Services	3,705,433
Irell & Manella LLP 1800 Ave of the Stars Ste 900 Los Angeles, CA 900674276	Legal Services	3,268,140
2 Total number of independent contractors (including those in 1) who re from the organization	. , ,	39

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
	1a	Federated cam	paigns 1a					
nts nts	ь	Membership du	ies					
gra	c	Fundraising ev	1b ents					
Contributions, gifts, grants and other similar amounts	`	r unuruising ev	1c					
<u>=</u> ,ਰ	d	Related organiz						
ar Sim	e	Government grant						
e Ei	f	All other contribute similar amounts no	ons, gifts, grants, and ot included above					
흔들			1f					
걸	g	Noncash contri lines 1a-1f \$ _	ıbutıons ıncluded ın					
O 4	h		es 1a-1f)					
				Business Code				
e E	2a	royalties		900,099	52,266,693	52,266,693		
Wer	ь	licensing		900,099	4,199,264	4,199,264		
<u>م</u>	С							
Š	d							
33	e							
Za Ea	f	All other progra	am service revenue					
Program Serwice Revenue	g	Total. Add lines ► \$ 56,465,957						
	3		ome (including divi	dends, interest				
		other sımılar aı			12,484,217			12,484,217
	4	Income from inves	stment of tax-exempt be	ond proceeds				
	_	Davidhia		▶				
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross Rents	(I) Kedi	(ii) i ersonar				
	ь	Less rental						
	С	expenses Rental income						
	d	or (loss) Net rental inco	me or (loss)					
		Net rentar med		· · · · •				
	7a	Gross amount	(ı) Securities	(II) O ther 544,000				
	74	from sales of assets other than inventory		311,000				
	ь	Less cost or other basis and sales expenses	343,320,627	389,361				
	С .	Gain or (loss)	-343,320,627	154,639	242 165 000			242 165 000
	d	Net gain or (los	ss) • • • • •	. ▶	-343,165,988			-343,165,988
۸.	8a		from fundraising					
Other Revenue		1c) See Part I <i>Attach Schedule</i>	G If total exceeds					
r Œ	 	\$15,000						
the	b c		pensesb (loss) from fundrais	ing events				
ō	9a	Gross income f						
		Complete Sched exceeds \$15,000	ule G ıf total 0					
	ь	loco dimarkan	apensesb					
	c		pensesb (loss) from gaming a	activities •-				
	10a	Gross sales of returns and allo		·				
	ь	Less cost of a	oods sold b					
	c		(loss) from sales of	ınventory►				
		Miscellaneous	Revenue	Business Code				
	11a	Other income		900,099	1,674	1,674		
	ь							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	 \$ 1,674				
	12	Total Revenue.	. Add lines 1h, 2g, 3		-274,214,140	56,467,631	0	-330,681,771
		8c,	1e					

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) org Il other organizations must complete column (A) but are not r		plete columns (
Do r	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	68,191,174	68,191,174		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,873,506	221,405	1,652,101	
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	5,303,527	2,870,678		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,397,508	621,594	775,914	
9	Other employee benefits	787,011	377,213	409,798	
10	Payroll taxes	417,027	200,657	216,370	
11	Fees for services (non-employees)				
а	Management	487,333	140,250	347,083	
b	Legal	8,584,394	8,584,394		
С	Accounting	136,540		136,540	
d	Lobbying	340,584		340,584	
е	Professional fundraising See Part IV, line 17				
f	Investment management fees	4,497,484		4,497,484	
g	Other	316,634		316,634	
L2	Advertising and promotion	94,195	4,056	90,139	
L3	Office expenses	200,012	7,361	192,651	
L 4	Information technology	1,009,807	146,044	863,763	
15	Royalties	11,437,845	11,437,845		
L6	Occupancy	352,392	13,884	338,508	
17	Travel	167,198	89,029	78,169	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	119,190	46,659	72,531	
20	Interest	46,028		46,028	
21	Payments to affiliates	_			
22	Depreciation, depletion, and amortization	286,940	60	286,880	
23 24	Insurance	184,309		184,309	
	total expenses shown on line 25 below)	4 764 761	4 744 74		
_	Domestic Legal/Patents	4,761,744	4,761,744		
Ь	Foreign Legal/Patents Foreign Patent Mtc Food	3,894,742	3,894,742		
q C	Foreign Patent Mtc Fees	1,041,463	1,041,463		
d	US Patent Mtc Fees	819,399	819,399		
e f	All other expenses	254,178	254,178 455,430	257 425	
	Total functional expenses. Add lines 1 through 24f	812,855	455,430	357,425	
25		117,815,019	104,179,259	13,635,760	(
26	Joint Costs. Check fiffollowing 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	Shoot
	Balance	Sneer

						(A)		(B)
	1	Cach non interest hearing				Beginning of year 338,678	1	End of year 3,533,501
		Cash—non-interest-bearing	• •			2,154		58,227
	2	Savings and temporary cash investments		85.542.719		, , , , , , , , , , , , , , , , , , ,		
	3	Pledges and grants receivable, net				, ,		38,870,282
	4	Accounts receivable, net		273,349	4	4,582,698		
	5	Receivables from current and former officers, directors, trusted other related parties Complete Part II of Schedule L			oyees or		5	
	6	Receivables from other disqualified persons (as defined under persons described in section 4958(c)(3)(B) Complete Part II o					6	
	7	Notes and loans receivable, net					7	
	8	Inventories for sale or use					8	
2	9	Prepaid expenses and deferred charges					9	
ssets	10a	Land, buildings, and equipment cost basis	10a	I	76,324,440			
⋖		Land and the state of the state	10a		70,324,440			
	Ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь		2,638,124	23,358,639	10c	73,686,316
	11	Investments—publicly traded securities	٠			517,959,443	11	286,516,727
	12	Investments—other securities See Part IV, line 11 Complete Schedule D	Part V1	II of		1,548,153,679	12	1,201,374,747
	13	Investments—program-related See Part IV, line 11 Complete of Schedule D .			13			
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule				1,256,799	1-7	72,021,352
	13	D	1,250,755	15	72,021,002			
	16	Total assets. Add lines 1 through 15 (must equal line 34)				2,176,885,460	16	1,680,643,850
	17	Accounts payable and accrued expenses .				5,881,306	17	14,265,188
	18	Grants payable		214,741,983	18	203,326,693		
	19	Deferred revenue		3,294,887	19	897,821		
	20	Tax-exempt bond liabilities					20	
eS.	21	Escrow account liability Complete Part IV of Schedule D					21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ē		persons Complete Part II of Schedule L			22			
_	23	Secured mortgages and notes payable to unrelated third partie			23	28,000,000		
	24	Unsecured notes and loans payable			24			
	25	Other liabilities Complete Part X of Schedule D		4,000,586	25	79,012,942		
	26	Total liabilities. Add lines 17 through 25				227,918,762	26	325,502,644
		Organizations that follow SFAS 117, check here ▶ ✓ and com	plet e	lines 2	7	· · · · · · · · · · · · · · · · · · ·		<u> </u>
ě		through 29, and lines 33 and 34.	•					
a Di	27	Unrestricted net assets				1,812,650,842	27	1,277,110,000
Balance	28	Temporarily restricted net assets				136,315,856	28	78,031,206
Ξ	29	Permanently restricted net assets			29			
r Fund		Organizations that do not follow SFAS 117, check here ► a lines 30 through 34.						
S Of	30	Capital stock or trust principal, or current funds					30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
S.S.	32	Retained earnings, endowment, accumulated income, or other			32			
Net /	33	Total net assets or fund balances		1,948,966,698		1,355,141,206		
Ź	34	Total liabilities and net assets/fund balances		2,176,885,460		1,680,643,850		
	1	The second secon	-			,,, 199	- •	,,,-
Pa	rt XI	Financial Statements and Reporting						

ParitXI	Financial	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			_
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
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		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

Employer identification number

HATTIE PINK DO NOT I KOCESS

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

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

Open to Public Inspection

Wiscon	sın Alu	mnı Research F	oundation						000001	_			
Par	. T	Passan	for Dublic C	harity Status (to be se	malatad	by all or	aanizatio		-0833612				
				harity Status (to be co ation because it is (Please		_			IIISU UCU	10115)			
1	- Gain		•	nurches, or association of ch					(A)(i)				
2	<u>'</u>	•		t ion 170(b)(1)(A)(ii). (Atta			Section 1	.,,(,,,	(*)(1).				
3	<u>'</u>			e hospital service organizati		-	tion 170/l	.\/1\/A\/:	/ A ++ > c	h Cabadu	ا ما	`	
4	<u>'</u>			zation operated in conjuncti									
-	'		-	•	OII WILII a I	ilospitai ui	escribeu ii	Section	170(D)(1)	(A)(III). L	iiiei	tile	
5	Г	' '	ospital's name, city, and state n organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
3	'		Section 170(b)(1)(A)(iv). (Complete Part II)										
-	_					uhad in Ca	ation 170	/L\/4\/A\	/ \				
6	<u> </u>	•	, -	overnment or governmental					•	. + h		مالطيي	
7	ı	-		ally receives a substantial p		support fro	om a gove	nmentai t	init or fron	n the gene	erai p	ublic	
	_			o)(1)(A)(vi) (Complete Par			L T T \						
8 9	<u> </u>			ped in Section 170(b)(1)(A)						rahın faas		d aro.	
9	ı	=		ally receives (1) more than					•	· ·	•	_	> >
		-		lated to its exempt functions estment income and unrelate	=		•		-				
			_	on after June 30, 1975 See			•			() IIOIII bu	Sille	5565	
10	Г		_	and operated exclusively to					•	o instrus	tions	. \	
11	, \	-	-	and operated exclusively fo			•					•	os of
11	1*	_	_	orted organizations describe						•			
		the box tha	that describes the type of supporting organization and complete lines 11e through 11h										
	_	•	ype I b				nally Integ		d	ГТуре			
e				rtify that the organization is									
		section 50		agers and other than one or	more publ	icly suppo	orted orga	nizations (described	in section	1509	∂(a)(1	L) or
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng or	ganız	atıon,
		check this	box								•	_	广
g				as the organization accepte	d any gift	or contrib	utıon from	any of the)				
		following pe		r indirectly controls, either a	alona orto	agether wit	th nare one	dascriba	d in (ii)		Г	Yes	No
			·	ng body of the the supported		-	tii persons	describe	u III (II)	11g	-	163	No
			· -	erson described in (i) above	=	CIOII				11g(No
			•	ty of a person described in (hove?				11g(_		No
h				mation about the organizatio			sunnorts			1-9(,		110
				mation about the organization	no the eng	, a m L a t i o i i	о арропто						
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did v	ou notify	(vi) I	s the	(vii	i) A m	ount of
	• •	orted	, ,	(described on lines 1- 9		atıon ın	the orga	•	organiz	atıon ın		supp	
O rganızatıon		ıızatıon		above or IRC section	col (i)) of your		rganized			
				(See Instructions))	your go		supp	ort?	ın the	US7			
document? Yes No Yes						No	Yes	No	1				
UNTVE	RSITY	OF			162	110	163	140	163	140	 		
WISC	NISNC		396006492	2	Yes		Yes		Yes			581	91174
MADISON 396006492			230000732		'55				' ' ' '			551	/ ¬

Total

58,191,174

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.)

Pι	ıblic Support		, ,	,				
Cale	endar 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 The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	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							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts 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							
10	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 instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched)(2)		
	ction A. Public Support						
Cale	ndar 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						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	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						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
·	line 6)						
To	tal Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or loss						
12	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organization's fi	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶□
	mputation of Public Support Perc						
15	Public Support Percentage for 2008 (line		•	olumn (f))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
	mputation of Investment Income			40 1 1			
17	Investment Income Percentage for 2008 (-))	17	
18	Investment Income Percentage from 2007	'Schedule A , Pa	rt IV-A, line 27	h		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 **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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax)

	ection 501(c)(4), (5), or (6) organi	zations complete Part III		Γ.	
	me of the organization sconsin Alumni Research Foundation			Employer ider	itification number
		39-0833612			
ar		by all organizations exemp e the instructions for Schedule		n 501(c) and section	527
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	tıcal campaıgn act	ivities in Part IV	
2	Political expenditures				\$
3	Volunteer hours				
Par	To be completed be for Schedule C for d	oy all organizations exemp etails.)	t under sectio	501(c)(3). (See the	instructions
1	Enter the amount of any excise	e tax incurred by the organization u	nder section 4955	i	\$
2	Enter the amount of any excise	e tax incurred by organization mana	agers under sectio	n 4955	\$
3	If the organization incurred in	a section 4955 tax, did it file Form	4720 for this year	?	┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
ь	If "Yes," describe in Part IV				
Par		y all organizations exemp for Schedule C for details.)	t under section	n 501(c), except sect	tion 501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	section 527 exem	ot function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contrib	outed to other orga	nizations for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	mpt function expenditures Add lin	es 1 and 2 and ent	er here and on Form	\$
4	Did the filing organization file $oldsymbol{I}$	Form 1120-POL for this year?			┌ Yes ┌ No
5	were made Enter the amount p political contributions received	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly deliver action committee (PAC) If addition	paid from the filing ed to a separate po	g organization's own interna Olitical organization, such a	l funds or were s a separate
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
				+	+
			-	+	+

section 4911 tax for this year?

┌ Yes ┌ No

P		organizations exempt under section 501(ction 501(to)). (See the instructions for Schedule		68
4		belongs to an affiliated group		
В	Check 🔽 if the filing organization	checked box A and "limited control" provisions apply		
		bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1 a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
Ь	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)	340,584	
c	: Total lobbying expenditures (add line	es 1a and 1b)	340,584	
d	Other exempt purpose expenditures		104,179,259	
e	Total exempt purpose expenditures	104,519,843		
f	Lobbying nontaxable amount Enter t	1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (ente	r 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a Enter -	0- If line g is more than line a	0	
i	Subtract line 1f from line 1c Enter -	O- if line fis more than line c	0	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total			
<u>2a</u>	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000			
b 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000			
c	Total lobbying expenditures	263,674	379,162	386,682	340,584	1,370,102			
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000			
e 	Grassroots ceiling amount (150% of line d, column (e))					1,500,000			
f	Grassroots lobbying expenditures								

	5768 (election under section 501(h)). (See the instructions for Schedule C for d					
		(a	1)		(b)	
	·	Yes	No	A	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of Volunteers?					
ь				1		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i	Other activities If "Yes," describe in Part IV					
j	Total lines 1c through					
-	1) Did the patientias in line 1 agree the arrangements in the net decombed in section FO1/a)/2)2		Ī	1		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes" enter the amount of any tax incurred under section 4912			+		
	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	5016) or	
G.	section 501(c)(6). (See the instructions for Schedule C for details.)		301(,, 0.	
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), sec					
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.)	OK II	Part	III-A	٠,	
1	Dues, assessments and similar amounts from members	T	1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	F	'			
	expenses for which the section 527(f) tax was paid).					
	Current Year		2a \$			
b	Carryover from last year		2b\$			
C	Total	<u> </u>	2c \$			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3 \$			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?		4 \$			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5 \$			
Pā	Supplemental Information	•				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information	art II	l-B, line	e 1ı		
	Identifier Return Reference Explanation	on				

Part IV Supplemental Information					
Ident if ier	Return Reference	Explanation			

Schedule C (Form 990 or 990EZ) 2008

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

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2008

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

▶ 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.

Supplemental Financial Statements

Employer identification number Name of the organization Wisconsin Alumni Research Foundation 39-0833612

Par	Organizations Maintaining Donor Adorganization answered "Yes" to Form 99		unds or Accounts. Complete if the
	organization answered Tes to Form 95	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate Contributions to (during year)		
	Aggregate Grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi	usors in writing that the assets held in don	oradvised
	funds are the organization's property, subject to the	organization's exclusive legal control?	☐ Yes ☐ No
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	efit of the donor or donor advisor or other	☐ Yes ☐ No
Par	t II Conservation Easements. Complete	if the organization answered "Yes" to	o Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating in the conservation of natural habitat. Preservation of open space	on or pleasure) Preservation of an Preservation of ce	historically importantly land area
2	Complete lines 2a-2d if the organization held a qual on the last day of the tax year	ified conservation contribution in the form	Held at the End of the Year
а	Tabel number of concentration and		2a
	Total number of conservation easements		
Ь	Total acreage restricted by conservation easement		2b
c	Number of conservation easements on a certified h	istoric structure included in (a)	2c
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminate	d by the organization during
	the taxable year ▶		
4	Number of states where property subject to conserva	ation easement is located ►	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		ations, and Yes No
6	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year 🕨
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2(d) above satisfy the requirements of sec	tion Yes No
	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financial nents	statements that describes
Part	Organizations Maintaining Collection Complete if the organization answered		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its first similar assets.	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i	
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
	If the organization received or held works of art, hist following amounts required to be reported under SFA		or financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$
ь	Assets included in Form 990 Part Y		b- ⊄

Cat No 52283D

3	Using the organization's accession and othe	•			•			ontinuea)
	items (check all that apply)		_	J	•			
а	Public exhibition	d	Г	Loan or exc	hange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co Part XIV	ollections and explain ho	w the	y further the o	organization's ex	empt purpose in		
5	During the year, did the organization solicit						Yes	□ No
Par	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the sold to raise funds rather than the sold to raise funds rather than the sold to raise funds rather than the sold to					·		,
	Part IV, line 9, or reported an an				anizacion answ	crea res to r	01111 3	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other intermediary	forc	ontributions	or other assets I		Yes	┌ No
b	If "Yes," explain why in Part XIV and comple	ete the following table						
						A mo	unt	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21?				Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1						
Pa	rt V Endowment Funds. Complete							
		(a)Current Year (b) Prior	Year (c)Tw	o Years Back (d)	Three Years Back (e) Four Y	ears Back
1a	Beginning of year balance							
b	Contributions							
С	Investment earnings or losses							
d	Grants or scholarships							
e	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the yea	r end balance held as						
а	Board designated or quasi-endowment 🕨							
ь	Permanent endowment 🕨							
С	Term endowment ▶							
3a	Are there endowment funds not in the posses organization by	ssion of the organization	that	are held and a	admınıstered for	the	Yes	No
	(i) unrelated organizations					3a(i)		
	(ii) related organizations					3a(ii)	
b	If "Yes" to 3a(II), are the related organizatio					3b		
4	Describe in Part XIV the intended uses of th							
Pa	t VI Investments—Land, Buildings	s, and Equipment. S						
	Description of investment		(a) bas	Cost or other (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Bo	ok value
1a	Land				15,327,047		1	5,327,047
b	Buildings							
c	Leasehold improvements				889,537	531,616		357,921
d	Equipment				2,560,293	2,106,508		453,785
е	Other				57,547,563		5	7,547,563
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, column (B,), line	10(c).)		>	7	3,686,316
					·	Schedule D (Form 9	90) 2008

Pair VIII Investments—Other Securities. See	FOI III 990, Part X, IIIIe 12	<u> </u>
(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		·
Closely-held equity interests		
Other MONEY MARKET FUNDS	356,899,608	
Other Hedge Funds	616,113,865	
Other investment in wicell	2,972,709	
Other investment in wisys	1,087,206	
Other fixed income	52,304,244	
Other private equity - Itd ps	143,229,637	
Other investment in morgridge	11,816,250	
Other investment in warf startup companies	16,951,228	
Strong Companies	20,502,220	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,201,374,747	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 1	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	. ,	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) 🕨		
Part IX Other Assets. See Form 990, Part X, III		
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	15.)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
(a) Description of Liability	(b) A mount	
Federal Income Taxes		
royalties payable	223,002	
due to broker	1,134,360	
liability for pension benefits	4,667,139	
Securities lending cash collateral obligation	72,988,441	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	79,012,942	

2	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	-274,214,140
Net unrealized gains (losses) on investments 5	2	Total expenses (Form 990, Part IX, column (A), line 25)	2	117,815,019
Donated services and use of facilities 6 1 1 1 1 1 1 1 1 1	3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-392,029,159
The first sequence	4	Net unrealized gains (losses) on investments	4	-177,999,034
7	5	Donated services and use of facilities	5	
Society Soci	6	Investment expenses	6	
Part Add Innes 4 - 8	7	Prior period adjustments	7	
9 Total adjustments (net) Add lines 4 - 8 9 -201,796,333 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 10 -593,825,492	8	Other (Describe in Part XIV)	8	-23,797,299
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Combine lines 3 Combi	9	·	9	-201,796,333
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments	10		10	-593,825,492
1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments	Par	, , , , ,	er R	eturn
Net unrealized gains on investments	1	·		
b Donated services and use of facilities 2b 4 11,437,844 4 4 11,437,844 4 4 11,437,844 4 4 11,437,844 4 11,437,844 4 11,437,844 4 11,437,844 4 11,437,844 5 7 274,214,140 6 11,437,844 11,437,844 6 11,437,844 6 11,437,844 11,437,844 1 1 1 1 1 1 1,437,844 1 1,437,844 1 1,437,844 1 1,437,844 1 1,437,844 1 1,437,844 1 1,437,844 1 1 1 1,437,844 1 1 1 1,437,844 1 1 1,437,844 1 1 1,437,844 1 1 1 1,437,844 1 1 1 1	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
c Recoveries of prior year grants 2c 4	а	Net unrealized gains on investments		
d Other (Describe in Part XIV) 2d 4 e Add lines 2a through 2d 2e -177,999,034 3 Subtract line 2e from line 1 3 -285,651,984 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 5 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 11,437,844 b Other (Describe in Part XIV) 4b 11,437,844 5 -274,214,140 4c 11,437,844 5 -274,214,140 5 -274,214,140 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 108,118,524 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a 1 108,118,524 a Donated services and use of facilities 2b 1 108,118,524 b Prior year adjustments 2c 2a 2a 2a 2a 2a 1,741,349 c Losses reported on Form 990, Part IX, line 2	b	Donated services and use of facilities		
Add lines 2a through 2d	c	Recoveries of prior year grants		
Subtract line 2e from line 1	d	Other (Describe in Part XIV)		
A mounts 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 b Other (Describe in Part XIV)	e	Add lines 2a through 2d	2e	-177,999,034
Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b 11,437,844 b Other (Describe in Part XIV)	3	Subtract line 2e from line 1	3	-285,651,984
b Other (Describe in Part XIV) 4b 11,437,844 4c 11,437,844 c Add lines 4a and 4b 4c 11,437,844 5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 -274,214,140 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 108,118,524 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a 1 108,118,524 b Prior year adjustments 2a .	4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	b	Other (Describe in Part XIV)		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements	c		4c	11,437,844
Total expenses and losses per audited financial statements			_	, ,
A mounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities				
Donated services and use of facilities			1	108,118,524
b Prior year adjustments				
c Losses reported on Form 990, Part IX, line 25 2c 4 1,741,349 4 4 1,741,349 4 4 1,741,349 4 4 1,741,349 4 4 1,741,349 4 4 1,741,349 4 4 1,741,349 3 106,377,175 3 106,377,175 4				
d Other (Describe in Part XIV) 2d 1,741,349 2e 1,741,349 e Add lines 2a through 2d 2e 1,741,349 2e 1,741,349 3 Subtract line 2e from line 1 3 106,377,175 4 A mounts included on Form 990, Part IX, line 25, but not on line 1: 4a 4a 4a b Other (Describe in Part XIV) 4a 11,437,844 c Add lines 4a and 4b 4c 11,437,844 5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5 117,815,019		· · ·		
e Add lines 2a through 2d			-	
3 Subtract line 2e from line 1			,	1 741 240
4 A mounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b				
a Investment expenses not included on Form 990, Part VIII, line 7b 4a			-	100,377,175
b Other (Describe in Part XIV) 4b 11,437,844 c Add lines 4a and 4b 4c 11,437,844 5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5 117,815,019		, , , , , , , , , , , , , , , , , , ,		
c Add lines 4a and 4b				
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		<u> </u>	1	11 427 944
				117,015,019

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

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 XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanat ion
		PART XI, LINE 8 1)ALLOCATION OF INVEST APPREC TO DEPT ROYALTY TRUSTS, UNIVERSITY & DONOR FUNDS = 32,459,157 2)EQUITY LOSS IN SUBSIDIARIES = -3,091,423 3)TRANSFER OF ASSETS FROM SUBSIDIARIES = 4,672,000 4)APPRECIATION IN DONOR DIRECTED FUNDS = -11,614,663 5)CHANGE IN MINIMUM PENSION OBLIGATION = -1,741,349 6)LOSS ON PLEDGE ADJUSTMENT = -46,010,494 7)TRANSFER TO DONOR FUNDS = 1,529,473 PART XII, LINE 4B SHARED ROYALTIES NETTED AGAINST INCOME IN AUDIT = 11,437,844 PART XIII, LINE 2D CHANGE IN MINIMUM PENSION = 1,741,349 PART XIII, LINE 4B SHARED ROYALTIES NETTED AGAINST EXPENSES IN AUDIT = 11,437,844

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DLN: 93493046021000

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

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

Grants and Other Assistance to Organizations,

Governments and Individuals in the U.S.

Open to Public **Inspection**

Wisconsin Alumni Research Fo						39-0833612	
1 Does the organization mathe selection criteria use 2 Describe in Part IV the o	untain records to s d to award the grai	nts or assistance?	t of the grants or assista				
Form 990, Part I Part IV and Sch	IV, line 21 for ar edule I-1 if addi	ny recipient that rece	and Organizations erved more than \$5,0	00. Check this box		ceived more than \$5	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Wisconsin - Madison1025 W Johnson St Madison, WI 53706	39-6006492	501(c)(3)	58,191,174				See Program Accomplishments, Form 990, Part III, Line 4a
WiCell Research Institute Inc614 N Walnut St Madison, WI 53726	39-1972235	501(c)(3)	1,800,000				See Program Accomplishments, Form 990, Part III, Line 4b
WıSys Technology Institute Inc614 N Walnut St Madıson, WI 53726	39-1992463	501(c)(3)	200,000				See Program Accomplishments, Form 990, Part III, Line 4c
Morgridge Institute for Research614 N Walnut St Madison, WI 53726	20-8325570	501(c)(3)	8,000,000				See Program Accomplishments, Form 990, Part III, Line 4d
2 Enter total number of seconganizations					<u> </u>		4
3 Enter total number of other For Paperwork Reduction Act Not			<u> </u>	Cat No 50055			b 0 chedule I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States	Complete if the organization	n answered "Yes	s" on Form 990.	Part IV, line	22.
	Use Schedule I-1 (Form 990) if additional space is needed.			,	· · · · · · · · · · · · · · · · · · ·	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

See Additional Data Table

e de l'iduitional Buta l'abic		
Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 1) UW - the university provides WARF with an annual summary of grant expenditures that details how the grant funds were spent from the previous year 2) Wicell, Wisys, and MIR - WARF has access to the financial statements of all three organizations Also WARF Managing Director Carl Gulbrandsen sits on the boards of all three affiliates

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As Filed Data -

DLN: 93493046021000

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

2008

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

Attach to Form 990. To be completed by organizations

Open to Public Inspection

Department of the Treasury Internal Revenue Service

ternal Revenue Service that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization
Wisconsin Alumni Research Foundation

Employer identification number

39-0833612

Рa	Questions Regarding Compensation	<u>'N</u>			
				Yes	Νo
1a	11 1 ()	ovided any of the following to or for a person listed in Form I to provide any relevant information regarding these items			
	First class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "!	ritten policy regarding payment or reimbursement or No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all t	hat apply			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	A pproval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VII, Section A, line 1a			
а	Receive a severance payment or change of control	payment?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	pased compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pi	rovide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	, line 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	, line 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes,"		7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	paid or accured pursuant to a contract that was n Regs section 53 4958-4(a)(3)? If "Yes," describe			

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-MIS	SC compensation	(C) Deferred compensation	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation		benefits	(B)(ı)-(D)	990 or Form 990-EZ
CARL E GULBRANDSEN	(I) (II)	398,701 30,000	123,450		166,300	27,939	716,390 30,000	226,00
CHRIS WINSLOW	(ı) (ıı)	246,780	18,783		43,996	24,223	333,782	143,76
CRAIG CHRISTIANSON	(ı) (ıı)	186,703 10,000	27,809		37,176	25,122	276,810 10,000	108,93
MICHAEL FALK	(ı) (ıı)	213,393	28,500		47,790	25,519	315,202	115,83
CARRIE THOME	(ı) (ıı)	264,387	130,000		32,427	27,831	454,645	156,66
ALAIN HUNG	(ı) (ıı)	221,925	161,000		42,154	27,564	452,643	252,76
ANDY DETIENE	(ı) (ıı)	109,839	17,808		13,333	24,033	165,013	69,25
KENNETH LUTZ	(1) (11)	203,953	20,053		186,135	25,260	435,401	124,57
STEPHANIE ADAMANY	(ı) (ıı)	135,235	18,428		14,945	15,350	183,958	79,87
HOWARD BREMMER	(ı) (ıı)	105,708	7,680			7,968	121,356	52,32
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
-		
	·	

Software ID: Software Version:

EIN: 39-0833612

Name: Wisconsin Alumni Research Foundation

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

(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	1 ' '	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
CARL E GULBRANDSEN	(ı) (ıı)				166,300	27,939	716,390 30,000	
CHRIS WINSLOW	(1) (11)		18,783		43,996	24,223	333,782	143,767
CRAIG CHRISTIANSON	(ı) (ıı)		,		37,176	25,122	276,810	•
MICHAEL FALK	(ı) (ıı)		28,500		47,790	25,519	315,202	115,833
CARRIE THOME	(ı) (ıı)		130,000		32,427	27,831	454,645	156,667
ALAIN HUNG	(1) (11)		161,000		42,154	27,564	452,643	252,769
ANDY DETIENE	(1) (11)		17,808		13,333	24,033	165,013	69,253
KENNETH LUTZ	(1) (11)		20,053		186,135	25,260	435,401	. 124,578
STEPHANIE ADAMANY	(ı) (ıı)		18,428		14,945	15,350	183,958	79,875
HOWARD BREMMER	(1) (11)		7,680			7,968	121,356	52,326

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Department of the Treasury

(Form 990)

SCHEDULE 0

Internal Revenue Service Name of the organization

Wisconsin Alumni Research Foundation

Supplemental Information to Form 990

▶ 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.

OMB No 1545-0047

DLN: 93493046021000

Inspection

Employer identification number

39-0833612

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	The Morgridge Institute for Research was established in December, 2006 to support ongoing research and education at the University of Wisconsin - Madison. The primary purposes for the Institute are as follows. 1) Collaboration - Spark research collaborations across the sciences that accelerate breakthrough discoveries to improve human health. 2) Interaction - Foster interaction betw een public and private research that breaks dowing barriers betw een researchers, labs and scientific disciplines. 3) Community - Develop vibrant public space on the campus of the University of Wisconsin - Madison that builds community and engages the public in the sciences and humanities. During fiscal 2008-09 the Morgridge Institute for Research allocated \$1,251,447 to support 8 collaborative medical research projects. The projects were seed grants initiated in February 2007. The projects supported are as follows. 1) Early Detection of Disease - Polycystic Ovary Syndrome 2) Understanding Neurobiology of Hyperactivity. 2) Repairing the Heart Using Stem Cells. 4) Reducing Inflammation Associated with Tumors. 5) Restoring Vision and Developing Optical Devices. 6) Healing Wounds. 7) New Methods of Drug Discovery. 8) Reducing the Gap of School Performance of Disadvantaged Children. On September 2 thru. 3, 2008. The Morgridge Institute sponsored a Math and Bio Symposium for Research at the Interface of Mathematics and Biology. The symposium was held at the Microbial Science Building on the campus of the University of Wisconsin - Madison. Over 350 participants attended the 2 day seminar. The Morgridge Institute provided \$250,000 to develop the organization and research plan for the Wisconsin Institute for Discovery the public partner of the Morgridge Institute for Research. The Morgridge Institute provided \$623,125 to the University of Wisconsin - Madison to support 6 graduate school fellow ships for the study of bioinformatics and 1 graduate school fellow ship in history. The Morgridge Institute had \$2,370,674 of Bioinformatics and Rege

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		1) The WARF Controller prepares the Part IX page 10 Statement of Functional Expenses using the WARF audited general ledger as the data source 2) WARF Controller completes the McGladrey - Client Prepared Form 990 Questionnaire - 501(C)(3) 3) Information prepared in 1) and 2) above is transmitted to the tax staff at McGladrey 4) McGladrey tax staff prepares the appropriate 990 Forms using the transmitted data and the year-end audited financial statement and audit work papers 5) McGladrey reviews and signs the Form 990 6) The Controller reviews the Form 990 with WARF's Managing Director. The WARF Managing Director signs the Form 990 7) The WARF Audit Committee reviews the Form 990 at the Spring Audit Committee.

ldentifier	Return Reference	Explanation
Form 990, Par VI, Section B, line 12c	t	The WARF Managing Director requires that the Trustees review the conflict of interest policy and complete a conflict of interest questionnaire annually. WARF reviews conflict matters as disclosed through the annual disclosure and on a rolling basis and considers them in the matter proscribed in its conflict policy. A Conflict of Interest Committee of the Board of Trustees also meets as appropriate to consider conflict situations. All WARF employees sign a conflict of interest agreement. The agreement requirements are reviewed annually at an employee meeting.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Ine 15		A) WARF retains a Madison, Wisconsin-based independent human resources consulting firm specializing in compensation activities to review compensation for the CEO, top management, officers and key employees of the organization. The consultant is retained by and reports to the Chair of the Salary and Fringe Benefit Committee and to the Trustee President. B) Each year in mid August the consultant provides comparative compensation data to the Trustee President and the Salary and Fringe Benefits Committee. C) The Trustee President reviews a written summary of executive accomplishments for the fiscal year. This information is shared with the Salary and Fringe benefits Committee and with the Board's Executive Committee. D) In late August or early September the Salary and Fringe Benefits Committee holds a teleconference to discuss the general direction and scope/range of executive compensation. The outside consultant participates in the discussion. E) In mid September the Board President and the Chair of the Salary and Fringe Benefit Committee discuss the executive evaluation and determine the compensation adjustment. F) The Salary and Fringe Benefits Committee reviews the recommendation in (E) above and approves final compensation adjustments. G) The Chairman of the Salary and Fringe Benefits Committee reviews the compensation adjustments with the full board at the Fall Trustee. H) The outside consultant provides a letter to the Chair of the Salary and Fringe Benefit Committee describing the consultant's role in establishing the rebuttable presumption of reasonableness standard under the Intermediate Sanctions regulations and how the consultant provided the analysis to determine the reasonableness of the executive compensation package.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		These documents are not made available

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		The independent accounts are retained and report directly to the six member Audit Committee. The Committee operates under Audit Committee Charter that is reviewed annually. The Committee meets as circumstances dictate but no less than twice annually. The spring meeting of the Audit Committee is convened to principally perform the following tasks a Review actions taken by management to address significant findings and recommendations from the previous year's independent audit b. Evaluate the independent auditor and approve retention of same for the upcoming fiscal year-end audit c. Request review of the audit plan and request review of specific areas of internal control, accounting functions and reporting that are of concern of the committee. The fall meeting of the Audit Committee is convened to review the audited financial statements and outside auditor opinion with respect to such financial statements including the rationale behind those estimates as well as all critical accounting policies identified to the committee by the outside auditors.

Part I Identification of Disregarded Entities

DLN: 93493046021000

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

Department of the Treasury

(Form 990)

SCHEDULE R

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

► See separate instructions. Internal Revenue Service **Employer identification number** Name of the organization Wisconsin Alumni Research Foundation

39-0833612

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
WARF Properties LLC 614 Walnut Street Madison, WI 53726 20-3521556	Holding Real Estate	WI		1,787,237	Wisconsin Alumni Research Foundation
Part II Identification of Related Tax-Exempt Organizat	ions		·		
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public chanty status (if section 501(c)(3))	(F) Direct controlling entity
WiCell Research Institute Inc					
614 Walnut St Madison, WI537052336 39-1972235	Research	WI	501(c)(3)	11	N/A
WiSys Technology Foundation Inc	Technology Transfer				
614 Walnut St Madison, WI537052336 39-1992463	Service	WI	501(c)(3)	11	N/A
Morgridge Institute for Research					
614 Walnut St 13th floor Madison, WI53726 20-8325570	Research	WI	501(c)(3)	4	N/A
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	1	Cat No 50135	Y		Schedule R (Form 990) 2008

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V	Transactions with Related Organizations	
Note.	Complete line 1 if any entity is listed in Parts II, III or IV	Y

1 During the tax year did the orgranization engage	in any of the following transactions with on	e or more related organizations listed in Parts II-IV?
2 During the tax year, are the orginization engage	in any or the following transactions with on	e or more related organizations instead in raits if iv

- a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- **b** Gift, grant, or capital contribution to other organization(s)
- **c** Gift, grant, or capital contribution from other organization(s)
- **d** Loans or loan guarantees to or for other organization(s)
- e Loans or loan guarantees by other organization(s)
- f Sale of assets to other organization(s)
- Purchase of assets from other organization(s)
- Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- I Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- Reimbursement paid to other organization for expenses
- **p** Reimbursement paid by other organization for expenses
- **q** Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

Note. Complete line 1 if any entity is listed in Parts II, III or IV	· · · · · ·	Yes	No
Ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
Gift, grant, or capital contribution to other organization(s)	1b	Yes	
Gift, grant, or capital contribution from other organization(s)	1 c		No
Loans or loan guarantees to or for other organization(s)	1d		No
Loans or loan guarantees by other organization(s)	1e		No
Sale of assets to other organization(s)	1f		No
Purchase of assets from other organization(s)	1 g		No
Exchange of assets	1h		No
Lease of facilities, equipment, or other assets to other organization(s)	1i	<u> </u>	No
Lease of facilities, equipment, or other assets from other organization(s)	1j		No
Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
Performance of services or membership or fundraising solicitations by other organization(s)	11		No
Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
Sharing of paid employees	1n	Yes	
Reimbursement paid to other organization for expenses	10		No
Reimbursement paid by other organization for expenses	1р		No
O ther transfer of cash or property to other organization(s)	1q		No
O ther transfer of cash or property from other organization(s)	1r	Yes	
	ш	<u></u>	Ь—
1	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity Gift, grant, or capital contribution to other organization(s) Gift, grant, or capital contribution from other organization(s) Loans or loan guarantees to or for other organization(s) Loans or loan guarantees by other organization(s) Sale of assets to other organization(s) Purchase of assets from other organization(s) Exchange of assets Lease of facilities, equipment, or other assets to other organization(s) Lease of facilities, equipment, or other assets from other organization(s) Performance of services or membership or fundraising solicitations for other organization(s) Sharing of facilities, equipment, mailing lists, or other assets Sharing of paid employees Reimbursement paid to other organization for expenses Reimbursement paid by other organization for expenses Other transfer of cash or property to other organization(s)	Receipt of (i) interest (ii) annuities (ivi) royalties (iv) rent from a controlled entity Gift, grant, or capital contribution to other organization(s) Loans or loan guarantees to or for other organization(s) Loans or loan guarantees by other organization(s) Loans or loan guarantees by other organization(s) Loans or loan guarantees by other organization(s) Sale of assets to other organization(s) Furchase of assets from other organization(s) Exchange of assets from other organization(s) Lease of facilities, equipment, or other assets to other organization(s) Lease of facilities, equipment, or other assets from other organization(s) Lease of facilities, equipment, or other assets from other organization(s) Performance of services or membership or fundraising solicitations for other organization(s) Sharing of facilities, equipment, mailing lists, or other assets Animal of facilities, equipment, mailing lists, or other assets Reimbursement paid to other organization for expenses Loans or loan guarantees by other organization for expenses Loans or loan guarantees by other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or for other organization for expenses Loans or loan guarantees to or the organization for expenses Loans or loan guarantees to or the organ	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity Gift, grant, or capital contribution to other organization(s) Cift, grant, or capital contribution from other organization(s) Loans or loan guarantees to or for other organization(s) Loans or loan guarantees to or for other organization(s) Call coans or loan guarantees by other organization for expenses Call coans or loan guarantees by other organization for expenses Call coans or loan guarantees by other organization for expenses Call coans or loan guarantees by other organization for expenses Call coans or loan guarantees by other organization(s) Call coans or loan guarantees by other organiza

(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)		
See Additional Data Table		
(2)		
(3)		
(4)		
(5)		
(6)		

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_					
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1		r J
			Yes	No		Yes	No		Yes	No				
			•	•		•		Cabadul	D / Form					

Software ID: Software Version:

EIN: 39-0833612

Name: Wisconsin Alumni Research Foundation

Form 990, Schedule R, Part V - Transactions with Related Organizations

	(A) Name of other organization	(B) Transaction type(a-r)	(C) A mount Involved (\$)
(1)	WARF Properties	R	4,672,115
(2)	WiCell Research Institute Inc	С	1,800,000
(3)	WiCell Research Institute Inc	N	624,048
(4)	WiSys Technology Foundation Inc	С	200,000
(5)	WiSys Technology Foundation Inc	N	56,004
(6)	WiSys Technology Foundation Inc	М	32,834
(7)	Morgridge Institute for Research	С	8,000,000
(8)	Morgridge Institute for Research	N	176,014

Software ID: Software Version:

EIN: 39-0833612

Name: Wisconsin Alumni Research Foundation

Form 990, Part VII - Section Aaa											
		Posit	(C tion (hat a	chec		İ			(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
ERNEST A MICEK, TREASURER	10 00	Х		Х				20,000	20,000	0	
JOHN P MORGRIDGE , TRUSTEE	10 00	Х						0	0	0	
CAROLYN MARTIN , TRUSTEE	10 00	Х						10,000	0	0	
DORIS MEISSNER , TRUSTEE	10 00	Х						0	0	0	
THOMAS F PYLE , TRUSTEE	10 00	Х						15,000	5,000	0	
BURNELL R ROBERTS , TRUSTEE	10 00	Х						10,000	30,000	0	
CAROL N SKORNICKA , TRUSTEE	10 00	Х						15,000	0	0	
KATHY SMITH , TRUSTEE	10 00	Х						15,000	15,000	0	
JOAN E SPERO , TRUSTEE	10 00	Х						10,000	0	0	
JAN K VER HAGEN , TRUSTEE	10 00	Х						20,000	25,000	0	
DAVID R WHITWAM , TRUSTEE	10 00	Х						15,000	10,000	0	
JOHN D WILEY , TRUSTEE	10 00	Х						15,000	0	0	
GORDON F BRUNNER , TRUSTEE	10 00	Х						10,000	0	0	
PATRICIA LIPTON , SECRETARY	10 00	Х		Х				20,000	15,000	0	
PETER P TONG , TRUSTEE	10 00	Х						15,000	0	0	
WINSLOW L SARGRANT , TRUSTEE	10 00	Х						15,000	5,000	0	
JOHN W ROWE , PRESIDENT	10 00	Х		Х				20,000	20,000	0	
LEE R RAYMOND , TRUSTEE	10 00	Х						0	0	0	
CARL E GULBRANDSEN , MANAGING DIRECTOR	40 00			х				522,151	30,000	194,239	
CHRIS WINSLOW, CHIEF FINANCIAL OFFICER	40 00			х				265,563	0	68,219	
CRAIG CHRISTIANSON , DIRECTOR OF LICENSING	40 00				х			214,512	10,000	62,298	
MICHAEL FALK , DIRECTOR OF PATENTS	40 00				х			241,893	0	73,309	
CARRIE THOME , DIRECTOR OF INVESTMENTS	40 00				х			394,387	0	60,258	
ALAIN HUNG , ASSOC DIR OF INVESTMENTS	40 00					х		382,925	0	69,718	
ANDY DETIENE , LICENSING MANAGER	40 00					х		127,647	0	37,366	
KENNETH LUTZ , CONTROLLER	40 00					Х		224,006	0	211,395	
STEPHANIE ADAMANY , ASSOC GENERAL COUNSEL	40 00					х		153,663	0	30,295	
LAURA HEISLER , DIRECT PROG DEVELOP'T	40 00					х		99,138	0	37,534	
HOWARD BREMMER , PATENT CONSULTANT	40 00						х	113,388	0	7,968	

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

1) Promote, encourage and aid scientific investigation and research at and within the University of Wisconsin - Madison2) Provide means to develop, apply and patent university inventions for the overall benefit of humankind3) Provide funds from use of discoveries to stimulate and promote further investigation and research at the university4) Pay out and distribute WARF's funds to promote, encourage, and aid its purposes5) Use and administer gifts, grants, and bequests for the benefit of the University of Wisconsin - Madison