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DLN: 93493137024430

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

2008

Open to Public Inspection

A Fo	r the 2	2008 са	lendar yea	r, or tax year beginni	ng 07-01-2008	and ending 06-30-200	09			.:.
<b>B</b> Ch	eck ıf a <sub>l</sub>	pplicable	Please	C Name of organization UNIVERSITY OF DELAY	VARE				D Employer ide	ntification number
☐ Add	fress ch	ange	use IRS label or						51-600029	
┌ Nai	me chai	nge	print or	Doing Business As					E Telephone nu	mber
┌ Init	ial retui	rn	type. See Specific	Number and street (or	P O hox if mail is	not delivered to street addr	ess) Room	/suite	(302) 831-8	
☐ Ter	minatio	n	Instruc- tions.	OFFICE OF THE VP FO		not delivered to street dadi	233) 100111	, saice	G Gross receipt	<b>s</b> \$ 3,793,771,027
_	ended i		cionsi	City or town, state or	country and 7ID ±	1				
_				NEWARK, DE 19716	country, and ZIF +	•				
j Apj	olication	pending								
				ne and address of Pri	ncıpal Officer				s a group return	
				CK T HARKER HULLIHEN HALL				affılıa	tes?	⊤Yes 🔽 No
				RK, DE 19716			Н(ь)	Are all	l affiliates include	d?
<b>I</b> Ta	x-exem	pt status	<b>▽</b> 501(c)	(3) <b>◄</b> (insert no )	4947(a)(1) or \[	527				See instructions )
J W	eb sit	e: 🕨 WW	/W UDEL EI	DU			H(c)	Grou	p Exemption Nui	mber 🟲
<b>К</b> Тур	e of org	janization	Corporat	ion trust associatio	n		<b>L</b> Year	r of Foi	rmation 1833 <b>M</b>	State of legal domicile DE
-		<b>C</b>								
Ра	rt I			e organization's miss	ion or most sig	nificant activities				
		•		•	-	WERE THE MOST SIG	NIFICAN	IT A C	TIVITIES	
န္		INSTRU	JCTTON, K	LSLARCH, AND FOL	SEIC SERVICE	WERE THE MOST SIG	INTITICAT	<b>VI</b> AC	.110111123	
图										
že.	2	Check t	this box	ıf the organization di:	scontinued its o	perations or disposed	of more t	han 2	5% of its assets	<b>;</b>
Governance			,			VI, line 1a)				32
			_	_		ng body (Part VI, line 1				30
Activities &				nployees (Part V, line			-,	-	5	13,558
Ĕ				lunteers (estimate if					6	31
₽ V						, line 12, column (C)			7a	4,183,978
-				ness taxable income			• •		7u _ 7b	-1,109,254
						.,		Prio	or Year	Current Year
	8	Contri	butions and	d grants (Part VIII, li	ine 1h)		_		159,678,354	155,908,000
ĕ	9			revenue (Part VIII, I	•		. —		398,923,546	435,898,842
Revenu	10	_		ne (Part VIII, columi	• ,	`		123,911,979	-33,940,540	
æ	11			art VIII, column (A ),					173,843,340	177,527,138
	12		-			art VIII, column (A), lır	ne 💳		2,3,3,3,3	1,,,52,,,133
		12)							856,357,219	735,393,440
	13	Grants	and simila	ar amounts paid (Part	: IX, column (A)	, lines 1-3)			72,112,493	76,341,110
	14	Benefi	ts paid to o	r for members (Part 1	IX, column (A),	line 4)				0
ø	15		es, other co	ompensation, employ	ee benefits (Pai	t IX, column (A), lines	5 –		432,630,183	457,712,611
Expenses		10)				- 4.4 \			432,630,183	· · ·
<u>₹</u>	16a			raising fees (Part IX,						28,610
五	Ь			penses, Part IX, column (I						
	17			Part IX, column (A),					264,367,806	267,971,413
	18					X, line 25, column (A))			769,110,482	802,053,744
. 02	19	Reven	ue less exp	enses Subtract line	18 from line 12	!			87,246,737	-66,660,304
8 9 0 8							Ве	eginni	ng of Year	End of Year
10 Kg	20	Total	assets (Par	t X, line 16)				2,	514,385,423	2,192,334,121
Net Assets or Fund Balances	21	Totall	liabilities (F	Part X, line 26)					580,313,013	577,596,946
<u> </u>	22	Netas	sets or fun	d balances Subtract	line 21 from lin	e 20		1,9	934,072,410	1,614,737,175
Pai	rt II	Sign	ature Blo	ock						
						turn, including accompanyin				
Plea	60	l.		correct, and complete De	сынацын ог ргеран	er (other than officer) is bas	eu on an in	l		er nas any knowledge
Sign		**** Sign:	*** ature of office	er				2010- Date	-05-13	
Here		l DOB	EDT M CDECT	ED VD EINANCE						
			e or print nam	ER VP FINANCE e and title						
		F	<b>.</b>		T	Date	Check If		Preparer's PTIN (	See Gen Inst \
Deta		Preparer signature		ЩС		Date	self-	. —	Treparer 3 FIIIV (	occ och mot j
Paid	ara=!-			1			empolyed	•   -		
Prepa			ame (or yours nployed),	WTAS LLC					EIN Þ	
Use (	JIIIY		and ZIP + 4	335 Commerce Drive	e - Suite 201					
				Fort Washington, PA	19034				Phone no 🕨 (2)	15) 654-1600
May	he IR	S discus	s this retu	rn with the preparer s	shown above? (S	See instructions) .			<del></del>	▼ Yes

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

<ul> <li>Did the organization undertake any significant program services during the year which were not listed the prior Form 990 or 990-EZ?</li></ul>	
Did the organization cease conducting or make significant changes in how it conducts any program services?  If "Yes," describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program services Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graying the services of the organization of the	ces by expenses
services?	ces by expenses
Describe the exempt purpose achievements for each of the organization's three largest program service Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(a) and (4) organizations and 4947(a)(1) trusts are required to report the amount of graphs of the section 501(c)(a) and (4) organizations and 4947(a)(a)(b) and (b) organizations are required to report the amount of graphs of the section 501(c)(a) and (b) organizations are required to report the amount of graphs of the section 501(c)(a) and (b) organizations are required to report the section 501(c)(a) and (b) organizations are required to report the section 501(c)(a) and (b) organizations are required to report the section 501(c)(a) and (b) organizations are required to report the section 501(c)(a) and (b) organization for the section 501(c)(a) and (b) organization for the section f	
Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of gra	
others, the total expenses, and revenue, if any, for each program service reported	
4a (Code ) (Expenses \$ 387,347,000 including grants of \$ 76,341,110) (Reversing Instruction and Departmental Research - Student enrollment during Period Was 20,500	nue \$ 344,202,751 )
4b (Code ) (Expenses \$ 109,684,976 including grants of \$ ) (Revenues SPONSORED RESEARCH	ue \$ 135,370,057 )
4c (Code ) (Expenses \$ 88,376,065 including grants of \$ ) (Revenue AUXILIARY ENTERPRISES	ue \$ 94,366,679 )
(Code ) (Expenses \$ 57,558,874 including grants of \$ ) (Revented ACADEMIC SUPPORT	ue \$ )
(Code ) (Expenses \$ 45,128,932 including grants of \$ ) (Revenue EXTENSION AND PUBLIC SERVICE	ue \$ )
(Code ) (Expenses \$ 27,228,189 including grants of \$ ) (Revenues) (Code ) (Code ) (Expenses \$ 27,228,189 including grants of \$ ) (Revenues)	ue \$ )
Ad Other program corpuses (Describe in Schedule O.)	
4d Other program services (Describe in Schedule O) (Expenses \$ 129,915,995 including grants of \$ ) (Revenue \$	20,629,000)
4e Total program service expenses \$ 715,324,036 Must equal Part IX, Line 25, column (B).	,,,

Part IV	Checklist of	Required	Schedules
	CHCCKHSCOL	ive quii e u	Julicadios

			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	Yes	
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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	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	Yes	
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part 🕬	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	11	Yes	
12	Parts VI, VIII, VIII, IX, or X as applicable	11		
	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	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	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? If "Yes," complete Schedule G, Part I	17	Yes	
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	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
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		Νο
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	Yes	
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	Yes	
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? 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		Νο
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	Yes	

#### Part IV Checklist of Required Schedules (Continued)

			res	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			
	IV	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	Yes	
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,  Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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	Yes	
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		Νo
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,	37		Νο
	Part VI			

	330 (2000)			raye L
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		Yes	N.
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		res	No
Id	of U.S. Information Returns. Enter -0- if not applicable			
	<b>1a</b> 1,762			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
·	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns?	21.		
3a	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.  Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	2b	Yes	
	return?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country UK , FR , SP , IT , BK , CS			
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1,</b> Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	Yes	
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited  Tax Shelter Transaction?	5c	Yes	
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 that such contributions or gifts			
7	were not tax deductible?	6b		
	Did the organization provide goods or services in exchange for any guid pro quo contribution of \$75 or	7a	Yes	
_	more?			<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	70		N o
f	benefit contract?	7e 7f		No
q		7: 7g		110
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	- 3		
	required?	7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		No
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)............ <b>11b</b>			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Section	Λ	Governing	Body	and	Management
section	А.	Governing	DOUY	anu	management

					Yes	No		
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumstances,					
1a	Enter the number of voting members of the governing body	1a	32					
b	Enter the number of voting members that are independent	1b	30					
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
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?	6		Νo				
7a	Does the organization have members, stockholders, or other persons who may elect governing body?		7a		No			
b	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	r other persons?	7b		Νo		
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the					
а	the governing body?			8a	Yes			
b	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		Νo		
b	If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the or		. ,	9b				
10	Was a copy of the Form 990 provided to the organization's governing body before it was describe in Schedule O the process, if any, the organization uses to review the		<del>-</del>	10	Yes			
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A the organization's mailing address? If "Yes," provide the names and addresses in Sc	,		11		No		

#### 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		No
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
- 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. another's 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

AMY NELSON CONNELL CONTROLLER UNIVERSITY OF DELAWARE 220 HULLIHEN NEWARK, DE 19716

# 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				<b>(5)</b>	(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

		(C) Position (check all that apply)							(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)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
			-								
			-								
			ļ								
			-								
			-								
1b Total			•	<u> </u>			<b>&gt;</b>	9,201,033	3	1,515,470	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶654

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> 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 J for such person	5		Νο

#### **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>B</b> ) Description of services	(C) Compensation
ARAMARK 1101 Market Street ARAMARK TOWER PHILADELPHIA, PA 19107	DINING SERVICES	26,446,557
Nason Construction INC 2000 Foulk Road Suite F WILMINGTON, DE 19810	General Contractor	5,092,549
NICKLE ELECTRICAL COMPANIES 14 MILL PARK COURT SUITE E NEWARK, DE 19713	ELECTRICAL CONTRACTR	4,584,502
Clark Companies 41155 State Highway 10 PO Box 427 DELHI, NY 13753	CONSTRUCTION SITEWRK	4,369,308
Sobieski Mechanical 14 Hadco Road WILMINGTON, DE 19804	MECHANICAL CONTRACTR	3,863,166
Total number of independent contractors (including those in 1 from the organization		175

Part Statement of Revenue VIII

							1
				(A) Total Revenue	<b>(B)</b> Related or Exempt Function Revenue	<b>(C)</b> Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns 1a			Revenue		512, 513, 01 514
22.22							
문문	ь	Membership dues					
Contributions, gifts, grants and other similar amounts	С	Fundraising events	21,573				
£. ∰.		1c					
<u>ਛ</u> ੁਰ	d	Related organizations1d	703,288				
E S	e	Government grants (contributions) <b>1e</b>	126,743,600				
ਤੂ ਵ	f	All other contributions, gifts, grants, and similar amounts not included above	28,439,539				ĺ
ĕ₹		similar amounts not included above					
눌유	g	Noncash contributions included in					
S = 0		lines 1a-1f \$430,309					
-	h	Total (Add lines 1a-1f)		155,908,000			
			Business Code				
<u> 9</u>	2a	TUITION AND FEES	900,099	332,872,618	332,872,618		
Program Service Revenue	ь	SALES & SERVICE OF EDUCATIONAL	900,099	9,246,504	9,246,504		
- B		ACTIVITIES			· ·		
<u>-</u>	С	SALES & SERVICE OF AUXILIARY ACTIVITIES	900,004	93,779,720	89,264,823	4,514,897	
ž	d						
<u>a</u>	e						
e E							
ē,	f	All other program service revenue					
Δ	g	Total. Add lines 2a-2f					
		<b>&gt;</b> \$ 435,898,842					
	3	Investment income (including divid	dends, interest				
		other sımılar amounts)		38,403,777		-839,288	39,243,065
	4	Income from investment of tax-exempt be	ond proceeds	0			
	_		▶	2,605,977	2,605,977		
	5	Royalties		2,003,977	2,003,977		
		(ı) Real	(II) Personal				
	6a	Gross Rents Less rental					
	Ь	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
		() 6	(v) 0 H				
		(1) Securities Gross amount 2,985,943,845	(II) O ther				
	7a	from sales of					
		assets other than inventory					
	ь	Less cost or 3,058,288,162 other basis and					
		sales expenses					
	С	Gain or (loss) -72,344,317					
	d	Net gain or (loss)	_	-72,344,317		111,860	-72,456,177
	8a	Cross income from fundroising	· -				
	Oa	Gross income from fundraising events (not including					
		\$98,760					
e n		of contributions reported on line 1c) See Part IV, line 18					
<u>₹</u>		Attach Schedule G if total exceeds					
é		\$15,000 a	21,573				
<u> </u>	ь	Less direct expensesb	89,425				
Other Revenue	С	Net income or (loss) from fundrais	ng events	9,335	9,335		
0	9a	Gross income from gaming	▶				
		activities See part IV, line 19					
		Complete Schedule G ıf total					
		exceeds \$15,000					
	ь	Less direct expensesb					
	c	Net income or (loss) from gaming a	activities	0			
			Þ				
	10a	Gross sales of inventory, less					
		returns and allowances .					
	L.						
	_	Less cost of goods sold <b>b</b> Net income or (loss) from sales of	ınventory►	0			
	С	Miscellaneous Revenue	Business Code	- Y			<del>                                     </del>
	11a		900,004	135,371,434	134,349,032	1,022,402	
	114	CONTRACTS AND OTHER EXCHANGE	300,004	133,37 1,737	13 1,3 13,032	1,022,702	
	ь	INTRA UNIVERSITY REVENUE	900,099	24,641,451	24,641,451		
	С	OTHER CONTRACTS SOURCES	900,099	16,344,199	16,344,199		
				-1,445,258	-819,365	-625,893	
	d	All other revenue		, , -	, -	, :-	
	е	Total. Add lines 11a-11d	\$ 174,911,826				
	12	Total Revenue. Add lines 1h, 2g, 3		735,393,440	608,514,574	4,183,978	-33,213,112
		8c,					
	j	9c, 10c, and 11e	. **				l l

## Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				).
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	76,341,110	76,341,110		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	7,289,006	2,741,101	4,206,307	341,598
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	286,974	286,974		
7	Other salaries and wages	332,504,593	305,423,371		2,986,597
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	31,038,005	27,581,996	3,127,343	328,666
9	Other employee benefits	66,080,336	58,359,907	6,981,429	739,000
10	Payroll taxes	20,513,697	18,180,976	2,110,567	222,154
11	Fees for services (non-employees)	, ,			·
а	Management	0			
Ь	Legal	1,943,207		1,943,207	
c	Accounting	295,679		295,679	
d	Lobbying	37,699		37,699	
e	Professional fundraising See Part IV, line 17	28,610			28,610
f	Investment management fees	3,532,334		3,532,334	·
g	Other	36,849,930	32,038,258	4,630,012	181,660
12	Advertising and promotion	1,233,870	969,704	229,453	34,713
13	Office expenses	96,831,561	92,947,499	2,849,647	1,034,415
14	Information technology	20,204,671	4,994,973	15,171,523	38,175
15	Royalties	1,307,774	1,283,766	24,008	
16	Occupancy	16,878,873	15,190,986	1,582,626	105,261
17	Travel	19,628,716	19,309,424	225,967	93,325
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	3,384,497	2,863,458	188,044	332,995
20	Interest	10,883,910	10,867,357	16,553	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	48,079,065	44,127,014	3,829,087	122,964
23	Insurance	2,179,078	1,161,656	1,010,721	6,701
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	LOSS ON DISPOSALS	1,368,732	654,506	714,226	
b	PAY ANNUITANTS	469,324		469,324	
c	ENDOWMENT COMMISSIONS & FEES	2,577,235		2,577,235	
d	MISCELLANEOUS	285,258		285,258	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	802,053,744	715,324,036	80,132,874	6,596,834
26	<b>Joint Costs.</b> Check  if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm <b>999</b> /2009)

Part X	Balance	Sheet
	Balance	SHEET

			(A)		(B)
	1	Cash—non-interest-bearing	Beginning of year 2,716,128	1	End of year 3,716,953
	2	Savings and temporary cash investments	71,309,691	2	87,675,087
	3	Pledges and grants receivable, net	29,838,022		26,680,908
	4	Accounts receivable, net	7,269,233		9.098.150
	5	Receivables from current and former officers, directors, trustees, key employees or	7,200,200	-	0,000,100
		other related parties Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	470,381	7	299,241
	8	Inventories for sale or use	430,231	8	514,374
\$	9	Prepaid expenses and deferred charges	741,041	9	372,413
Assets	10a	Land, buildings, and equipment cost basis   10a   1,575,178,840			
-	ь	Less accumulated depreciation Complete Part VI of			
		Schedule D	925,357,861	10c	935,387,951
	11	Investments—publicly traded securities	1,070,801,650	11	801,576,233
	12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	389,619,000	12	311,290,139
	13	Investments—program-related See Part IV, line 11 $\it Complete Part VIII$ of Schedule D .	15,322,154	13	14,976,775
	14	Intangible assets	322,526	14	745,897
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule  D	187,505	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,514,385,423	16	2,192,334,121
	17	Accounts payable and accrued expenses .	282,586,668	17	287,717,436
	18	Grants payable	14,464,766	18	14,725,183
	19	Deferred revenue	7,365,607	19	7,940,934
	20	Tax-exempt bond liabilities	236,012,060	20	237,141,906
ēŠ	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			
Ę		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	23,084,435	23	12,376,239
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	16,799,477	25	17,695,248
	26	Total liabilities. Add lines 17 through 25	580,313,013	26	577,596,946
es		Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	1,031,165,339	27	910,675,937
Balance	28	Temporarily restricted net assets	593,321,645	28	410,205,492
핕	29	Permanently restricted net assets	309,585,426	29	293,855,746
r Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
s or	30	Capital stock or trust principal, or current funds		30	
,et;	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	1,934,072,410		1,614,737,175
Ż	34	Total liabilities and net assets/fund balances	2,514,385,423		2,192,334,121
	l		-		· · · · · · · · · · · · · · · · · · ·
Pa	rt XI	Financial Statements and Reporting			

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

#### DLN: 93493137024430

Employer identification number

OMB No 1545-0047

**Public Charity Status and Public Support** 

Department of the Treasury Internal Revenue Service

**SCHEDULE A** 

(Form 990 or 990EZ)

Name of the organization

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.

Open to Public Inspection

JNIVE	RSITY (	of Delaware										
									-600029			
	rt I			harity Status (to be con					Instruct	ions)		
	organı:			ation because it is (Please								
1	<u> </u>	-		urches, or association of ch			Section :	170(Б)(1)	(A)(i).			
2	<u> </u>			i <b>on 170(b)(1)(A)(ii).</b> (Attac		•						
3	<u> </u>	A hospital	or a cooperative	e hospital service organizati	on descri	bed in <b>Sec</b>	t ion 170(l	b)(1)(A)(i	i <b>ii).</b> (Attac	h Schedu	le H)	
4		A medical i	research organı	zatıon operated ın conjunctı	on with a	hospital d	escribed i	n <b>Sect ion</b>	170(b)(1)	(A)(iii). E	nter th	е
		•	name, city, and									
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							)			
		Section 170(b)(1)(A)(iv). (Complete Part II )										
6	Γ	A federal, s	tate, or local go	overnment or governmental	unıt desci	rıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).			
7	Γ	An organiza	ation that norma	ally receives a substantial p	art of its s	support fro	m a gove	rnmental u	ınıt or fron	n the gen	eral pub	olic
		described i	n <b>Section 170(</b> b	<b>))(1)(A)(vi)</b> (Complete Par	tII)							
8	Γ	A communi	ty trust describ	ed in <b>Section 170(b)(1)(A)</b>	(vi) (Com	nplete Par	tII)					
9	Γ	An organiza	ation that norma	ally receives (1) more than	331/3% 0	of its supp	ort from c	ontributior	ns, membe	rship fee:	s, and g	ross
		receipts fro	m activities rel	ated to its exempt functions	-subject	to certair	n exceptio	ns, and (2	) no more	than 331	/3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 tax	k) from bu	ısıness	es
		acquired by	the organization	on after June 30, 1975 See	Section 5	609(a)(2).	(Complet	e Part III	)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ct ion 509	<b>(a)(4).</b> (Se	ee instruc	tions )	
11	Γ	An organiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out	the purp	oses of
				orted organizations describe						Section 5	609(a)(	<b>3).</b> Check
		the box that describes the type of supporting organization and complete lines 11e through 11h  a										
_	_	·		rtify that the organization is					d	' ''		
е	ı	•	- '	agers and other than one or			•			•	•	
		section 50				,						.,(=,
f		_		d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supporti	ng orga	nizatio <u>n,</u>
		check this			J <b>c</b> t							ı
g		following pe		as the organization accepted	d any gift	or contrib	ution from	any or the	)			
				r indirectly controls, either a	alone or to	ogether wi	th persons	describe	d ın (ıı)		Ye	s No
			•	ng body of the the supported		-	·		. ,	11g	_	No
			· -	erson described in (i) above	_					11g		No
			•	ty of a person described in (		bove?				11g(		No
h				nation about the organizatio			supports				/	
						,						
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii)	A mount of
	Supp	oorted	. ,	(described on lines 1-9	organiz	ation in	the orga	nızatıon	organiz	ation in	su	pport?
	Orgar	nization		above or IRC section		listed in		i) of your		rganized		
				(See Instructions))		verning ment?	supp	oort?	In the	US?		
					Yes	No	Yes	No	Yes	No	-	
					162	140	162	140	162	140		
						<del> </del>		<del> </del>				
						1		-				
								-				
						1						

Total

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

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</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					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					<u> </u>		
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>(b)</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 <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
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 <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
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				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
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	<b>Private Foundation.</b> 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	<b>▶</b> □
	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>(b)</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)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</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						
	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	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	monutation of Dublic Compant Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	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	<b>Supplemental Information.</b> 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)

• Se	ection 501(c)(4), (5), or (6) organ	zations complete Part III			
	ame of the organization IVERSITY OF DELAWARE			Employer ider	ntification number
				51-6000297	
Par		oy all organizations exemple the instructions for Schedule		n 501(c) and section	527
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	ıtıcal campaıgn ac	tivities in Part IV	
2	Political expenditures				\$
3	V olunteer hours				
Pai	<b>To be completed l</b> for Schedule C for d	oy all organizations exemp etails.)	t under sectio	<b>n 501(c)(3).</b> (See the	instructions
1	Enter the amount of any excis	e tax incurred by the organization (	under section 495	5	\$
2	Enter the amount of any excis	e tax incurred by organization man	agers under sectio	n 4955	\$
3	If the organization incurred in	a section 4955 tax, did it file Form	4720 for this yea	r?	┌ Yes
4a	Was a correction made?				┌ Yes
ь	If "Yes," describe in Part IV				
Pai		<b>by all organizations exemp</b> s for Schedule C for details.)	t under sectio	n 501(c), except sec	tion 501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contri	buted to other orga	nizations for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add lir	nes 1 and 2 and en	ter here and on Form	\$
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes ┌ No
5 State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which paymen were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV					
	(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 -
					<u> </u>
For	Paperwork Reduction Act Notice	e, see the instructions for Form 990	Cat No 5	0084S Schedule C (	Form 990 or 990-EZ) 20

	(election under sec	organizations exempt under section 501( tion 501(h)). (See the instructions for Schedul belongs to an affiliated group		768
	<u> </u>	checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	<b>(b)</b> A ffiliated Group Totals
1a	Total lobbying expenditures to influe			
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns—  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000	The lobbying nontaxable amount is:  20% of the amount on line 1e  \$100,000 plus 15% of the excess over \$500,000  \$175,000 plus 10% of the excess over \$1,000,000  \$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)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	m 4720 reporting	┌ Yes ┌ No

# 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.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	<b>(e)</b> Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line d, column (e))								
f	Grassroots lobbying expenditures								

Part II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form
	<b>5768 (election under section 501(h)).</b> (See the instructions for Schedule C for details.)

		(a	a)	(b)
		Yes	No	A mount
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 referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes		
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?	Yes		
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		59,868
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo	
i	Other activities If "Yes," describe in Part IV	Yes		34,173
j	Total lines 1c through 1:			94,041
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
b	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo	
-	ATT A To be completed by all every institute every trade, costion FO1/c)/4) a		-047	\

# Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

# Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b \$	
c	Total	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 \$	

#### Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

Ident if ier	Return Reference	<b>Explanation</b>
SCHEDULE C, PART II-B, LINES 1B, 1D, & 1G		A PORTION OF THE TIME OF THE UNIVERSITY'S DIRECTOR OF GOVERNMENTAL RELATIONS IS ASSOCIATED WITH LOBBYING ACTIVITIES FOR THE FISCAL YEAR ENDED JUNE 30, 2009, ONLY ONE THIRD (1/3) OF THE ABOVE DIRECTOR'S TIME WAS DEVOTED TO LOBBYING ACTIVITIES
O ther Activities	SCHEDULE C, PART II-B, LINE 11	THE UNIVERSITY OF DELAWARE IS A MEMBER OF VARIOUS HIGHER EDUCATION TRADE ASSOCIATIONS, INCLUDING BUT NOT LIMITED TO NACUBO, IN WHICH A PORTION OF ITS MEMBERSHIP DUES ARE ASSOCIATED WITH LOBBYING ACTIVITIES
SCHEDULE C, PART II-B, LINE 2D		THE UNIVERSITY OF DELAWARE WAS NOT SUBJECT TO AN IRC SECTION 4912 TAX ACCORDINGLY, THE UNIVERSITY OF DELAWARE WAS NOT REQUIRED TO FILE FORM 4720 FOR THIS TAX YEAR

1 \$

Part IV Supplemental I	upplemental Information							
Ident if ier	Return Reference	Explanation						

Schedule C (Form 990 or 990EZ) 2008

# OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2008

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

▶ 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.

**Employer identification number** Name of the organization UNIVERSITY OF DELAWARE

			51-6000297	
Part			ds or Accounts	. Complete if the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds and	other accounts
1 T	otal number at end of year	1		
<b>2</b> A	ggregate Contributions to (during year)	2,000		
<b>3</b> A	ggregate Grants from (durıng year)	897		
<b>4</b> A	ggregate value at end of year	25,614		
	ıd the organization inform all donors and donor advi inds are the organization's property, subject to the o		advısed	✓ Yes
u:	id the organization inform all grantees, donors, and sed only for charitable purposes and not for the ben npermissible private benefit?		ay be	✓ Yes
Part :	Conservation Easements. Complete	ıf the organızatıon answered "Yes" to F	orm 990, Part I	/, line 7.
1 P 	urpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space		• •	•
	omplete lines 2a-2d if the organization held a quali n the last day of the tax year	fied conservation contribution in the form of	a conservation eas	sement
			Held at	the End of the Yea
a -	Fotal number of conservation easements		2a	
ь -	Total acreage restricted by conservation easement:	s	2b	
c l	Number of conservation easements on a certified hi	storic structure included in (a)	2c	
d [	Number of conservation easements included in (c) a	acquired after 8/17/06	2d	
	umber of conservation easements modified, transfene taxable year 🕨	rred, released, extinguished, or terminated b	y the organization	during
l N	umber of states where property subject to conserva	ation easement is located 🕨		
	oes the organization have a written policy regarding inforcement of the conservation easements it holds?		ns, and	┌ Yes ┌ No
S	taff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the ye	ar ►	
<b>,</b> A	mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the year	<b>►</b> \$	
	oes each conservation easement reported on line 2 70(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sectio	n	┌ Yes ┌ No
b	n Part XIV, describe how the organization reports co alance sheet, and include, if applicable, the text of t ne organization's accounting for conservation easen	he footnote to the organization's financial st		
Part I	Organizations Maintaining Collectio Complete if the organization answered "		Other Similar	Assets.
a	the organization elected, as permitted under SFAS rt, historical treasures, or other similar assets held rovide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research i	n furtherance of pu	
- h	the organization elected, as permitted under SFAS istorical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research in fu		•
(i	) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$	316,289
(i	i) Assets included in Form 990, Part X		<b>F</b> \$	8,853,375
	the organization received or held works of art, histo llowing amounts required to be reported under SFA		nancıal gaın, provı	de the
a <sub>R</sub>	evenues included in Form 990, Part VIII, line 1		<b>►</b> \$	

Cat No 52283D

**b** Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Art,</u>	His	tori	<u>cal Tre</u>	<u>eas</u>	ures, or Ot	:her	Simila	ar Asse	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne foll	owing th	nat a	re a sıgnıfıcar	nt us	e of its	collectio	n	
а	▼ Public exhibition		d	~	Loan o	rexo	hange progra	ms				
ь	Scholarly research		e	$\Gamma$	Other							
с	✓ Preservation for future generations											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV											
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								lar	Г	Yes	√ No
Pai	t IV Trust, Escrow and Custodial						anızatıon an	ารพ	ered "Ye	es" to F	orm 9	90,
_	Part IV, line 9, or reported an an											
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes No											
b	If "Yes," explain why in Part XIV and comple	te the following table	<u> </u>									
_										A mou		
C	Beginning balance						10					744,427
d	Additions during the year						<u> </u>	d				551,189
e	Distributions during the year						10	_			87,2	79,578
f	Ending balance						1	f				16,038
2a	Did the organization include an amount on Fo		21?							ı	Yes	✓ No
ь	If "Yes," explain the arrangement in Part XIV  rt V Endowment Funds. Complete i				d "Vaa	.!! 4.0	Farm 000	Dowl	T\/ l.m.	. 10		
Ра	rt V Endowment Funds. Complete	(a)Current Year		b)Prior			FORM 990, Two Years Back				<b>e)</b> Four Y	ears Back
1a	Beginning of year balance	1,131,736,776		,		(-/-		1 ( )				
b	Contributions	6,463,696										
c	Investment earnings or losses	-215,928,929										
d	Grants or scholarships	6,902,533										
e	Other expenditures for facilities and programs	47,256,333										
f	Administrative expenses	8,154,000										
g	End of year balance	859,958,677										
2	Provide the estimated percentage of the yea	r end balance held as	5									
а	Board designated or quasi-endowment 🕨	28 %										
ь	Permanent endowment 🕨 72 %											
c	Term endowment ▶											
3a	Are there endowment funds not in the posses	ssion of the organiza	tion t	that a	re held	and	admınıstered	for t	he		_	
	organization by  (i) unrelated organizations									2-/:)	Yes	No
	• •			•		•		•		. 3a(i) 3a(ii)		No No
ь	(ii) related organizations									. 3b	1	
4	Describe in Part XIV the intended uses of th	•										<u> </u>
Pai	rt VI Investments—Land, Buildings	s, and Equipmen	t. S	ee F	orm 99	0, P	art X, line 1	LO.				
	Description of investment				Cost or otl		(b)Cost or oth basis (other)		(c) Depr	eciation	<b>(d)</b> Bo	ok value
1a	Land					0	52,102,	407			5	2,102,40
ь	Buildings					0	1,122,491,	$\neg$	386,	.502,503		5,988,90
	Leasehold improvements					0	14,715,	432	3,	001,470	1	1,713,962
d	Equipment					0	360,766,	510	250,	286,916	11	0,479,594
e	Other					0	25,103,	082			2	5,103,082

935,387,951

investments—Other Securities. See	Form 990, Part X, line 12.	
<ul><li>(a) Description of security or cateory (including name of security)</li></ul>	( <b>b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		·
Closely-held equity interests		
Other LIMITED PARTNERSHIPS	266,524,964	F
Other FUNDS HELD IN TRUST BY OTHERS	35,692,436	
Other MORTGAGES	7,085,629	F
Other REAL ESTATE	1,485,000	F
Other INSURANCE	502,110	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	311,290,139	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 13	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(B) Book value	Cost or end-of-year market value
STUDENT LOAN PROGRAMS	14,976,775	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(a) Descri		( <b>b</b> ) Book value
ACCRUED INTEREST - RECEIVABLE		0
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15)	<u> </u>
Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability	( <b>b</b> ) A mount	
Federal Income Taxes		
STUDENT DEPOSITS	549,698	
ASSET RETIREMENT OBLIGATION		
	11,761,022	
ANNUITY & LIFE INCOME FUNDS PAYABLE	5,384,528	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	17,695,248	

Part	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	735,393,440
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	802,053,744
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-66,660,304
4	Net unrealized gains (losses) on investments	4	-253,870,770
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1,193,149
9	Total adjustments (net) Add lines 4 - 8	9	-252,677,621
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-319,337,925
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	382,798,152
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	1,224,539
3	Subtract line <b>2e</b> from line <b>1</b>	3	381,573,613
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	353,819,827
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	735,393,440
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	702,136,077
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a b	Donated services and use of facilities		
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	1,255,929
3	Subtract line <b>2e</b> from line <b>1</b>	3	700,880,148
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		, 55,555,115
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 101,173,596		
c	Add lines <b>4a</b> and <b>4b</b>	4c	   101,173,596
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	802,053,744
	Supplemental Information		

Supplemental Information

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

Identifier Return Reference Explanation

#### OMB No 1545-0047

2008

Open to Public

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

**Schools** 

Name of the organization UNIVERSITY OF DELAWARE Employer identification number

	51-6000297			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain  The University of Delaware is committed to assuring equal opportunity to all persons and does not discriminate on the basis of race, color, gender, religion, ancestry, national origin, sexual orientation, veteran status, age, or disability in its educational programs, activities, admissions, or employment practices. This statement is included on a variety of University forms and publications. A website regarding the University's commitment to diversity can be found at www udel edu/diversity.	3	Yes	
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		Νo
b	Admissions policies?	5b		Νο
c	Employment of faculty or administrative staff?	5с		Νο
d	Scholarships or other financial assistance?	5d		Νο
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νο
g	Athletic programs?	5g		Νο
h	O ther extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	5h		No
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b	Yes	N a
D	If you answered "Yes" to either 6a or b, please explain using an attached statement	OD		Νο
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	7	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493137024430

OMB No 1545-0047

2008

### **SCHEDULE F** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Open to Public **Inspection** 

Employer identification number

UNI	VERSITY OF DELAWARE						_
						51-600029	
Pa	<b>General Infor</b> "Yes" to Form 9			ide the United State:	<b>s.</b> Complete	e if the orgai	nization answered
1				ecords to substantiate	the amount	of the grant	s or
	<del>-</del>	_		assistance, and the se		_	
	the grants or assistan	ce					┌ Yes ┌ No
2	For grant makers. Descri United States	be in Part IV the	organization's pr	rocedures for monitoring tl	ne use of gra	nt funds outsic	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed )			
		(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activi	ty listed in (d)	
	(a) Region	offices in the	employees or	region (by type) (i e , fundraising, program services,		am service,	(f) Total expenditures in
	(=,g	region	agents in region	grants to recipients located in		pecific type of	region
Fura	pe (Including Iceland and	1	1	the region) Program Services	ACADEMIC	s) in region	1,677,890
	enland)	1	7	riogiani Services	ACADEMIC	SOFFORI	1,077,890
	,						
-							
Tota	de L	1	.  4	1	1		1,677,890

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							-
	_							_
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		1					
		+					
			•				

Schedule F (Form 990) 2008

ReturnReference PART I, LINE 3, COLUMN F	Explanation THE ACCOUNTING METHOD USED TO REPORT EXPENDITURES IN COLUMN (F) IS ACCRUAL
TAKT I, LINE 3, GO LOTIN I	EXPENDITURES IN COLUMN (F) IS ACCRUAL

Software ID:

**Software Version:** 

**EIN:** 51-6000297

Name: UNIVERSITY OF DELAWARE

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
--------------------------	---	------------	-------------------------	------------------------------	------------------------------------	---	--	--

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As Filed Data -

DLN: 93493137024430

Employer identification number

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

**Supplemental Information Regarding** 

**Fundraising or Gaming Activities** 

Name of the organization UNIVERSITY OF DELAWARE

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

		•				<u>'</u>					
1 a	Indicate whether the orga  Mail solicitations	nızatıon raısed funds	through a	ny of the		eck all that apply non-government grants					
b	_				Solicitation of government grants						
_	<del>-</del>				•						
c	_	_			<b>g</b>  ✓ Special fundrai	sing events					
d	✓ In-person solicitation	S									
2a	or key employees listed in	n Form 990, Part VII	) or entity	ın conne	ction with professional	fundraising activities?	V Yes I				
b	If "Yes," list the ten highe to be compensated at leas	•	•								
	(i) Name of Individual or entity (fundraiser)	I (II) A ctivity		Did er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in	(vi) A mount paid to (or retained by) organization				
			contributions?			col (i)					
			Yes	No							
соі	LWELL SALMON	PHONE SOLICITING		No	24,613	28,610	-3,997				
		+			<del>                                     </del>						

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

 $\mathsf{CT},\mathsf{FL},\mathsf{MD},\mathsf{NV},\mathsf{NJ},\mathsf{NY},\mathsf{NC},\mathsf{PA},\mathsf{TX},\mathsf{VA}$ 

Total

Pai	t II	Fundraising Events. Com more than \$15,000 on Form					repor	ted
		, , , , , , , , , , , , , , , , , , ,	(a) Event #1  Golf Outing (event type)	(b) Event #2  Golf Classic (event type)	(c) O ther Events  3 (total number)	( <b>d)</b> T c (A dd col	otal Eve ( <b>a)</b> th	
Φ.	1		37,027				11	9,203
Revenue	2	Gross receipts  Less Charitable contributions	520	7,700	13,353		2	1,573
	3	Gross revenue (line 1 minus line 2)	36,507	20,91	1 40,212		9	7 ,6 30
	4	Cash Prizes	0		0			0
စ္	5	Non-cash Prizes	7,698	6,03	2,210		1	5,943
Sens	6	Rent/Facility costs	16,050	10,50	7,553		3	4,110
Direct Expenses	7	Other direct expenses	28,177	2,21	8,366		3	8,755
<u>₽</u>		Direct expense summary Add lin	as 4 through 7 in column	(4)	<b>L</b>		8	8,808
Δ	8	Net income summary Combine III	-	• •				8,822
Par	_		ganızatıon answered '			rted mo		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tota col (a) th		
œ	1	Gross revenue						
—— တ	2	Cash prizes						
Direct Expenses	3	Non-cash prizes						
<u>Б</u>	4	Rent/facility costs						
ā	5	Other direct expenses						
	6	Volunteer labor	┌ Yes		┌ Yes			
	7	Direct expense summary Add line	s 2 through 5 ın column (	d)				
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	🕨			
9 a b	Is	er the state(s) in which the organiza the organization licensed to operate No," Explain				· 9a	Yes	No
10a b		re any of the organization's gaming l Yes," Explain	ıcenses revoked, suspen	ded or terminated during	g the tax year?	10a		
11		es the organization operate gaming a	activities with nonmembe	rs?		<del> </del>   11		
12	Is	the organization operate gaming the organization a grantor, beneficial med to administer charitable gaming	ry or trustee of a trust or					

			 <del></del>
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

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**Grants and Other Assistance to Organizations,** 

OMB No 1545-0047

DLN: 93493137024430

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Governments and Individuals in the U.S.

Open to Public Inspect ion

Name of the organization						Employer identif	ication number
UNIVERSITY OF DELAWARE						51-6000297	
Part I General Inform	mation on Grai	nts and Assistance					
	d to award the grar	nts or assistance?			ıbılıty for the grants or ass		V Yes □
Form 990, Part : Part IV and Sch	IV, line 21 for ar edule I-1 if addit	ny recipient that rece tional space is	erved more than \$5,0	00. Check this box	tes. Complete if the order if no one recipient rece	ived more than \$5,0	
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
<ul><li>2 Enter total number of seconganizations</li><li>3 Enter total number of oth</li></ul>							

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" 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	<b>(c)</b> A mount of cash grant	( <b>d)</b> A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
ee Additional Data Table					

Part TV	Supplemental Information. Com	plete this part to p	rovide the information red	uured in Part I line 2 an	d any other additional information
	Supplemental Information Con	piece and pare to p	TO VIGE GIE HITOT HIGGOTT LEG	ian ca ni i ai c i, nnc 2, an	a arry outer additional information.

Ident if ier	Return Reference	Explanation

Software ID: Software Version:

**EIN:** 51-6000297

Name: UNIVERSITY OF DELAWARE

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> 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
UNIVERSITY OF DELAWARE SCHOLARSHIPS FOR STUDENTS	4079		17,204,174	FAIR VALUE	SCHOLARSHIPS
DELAWARE NEED BASED GRANTS	1591		5,019,250	FAIR VALUE	FINANCIAL AID
ATHLETIC SCHOLARSHIPS	1067		7,361,549	FAIR VALUE	SCHOLARSHIPS
UNIVERSITY ENDOWMENT SCHOLARSHIPS	1279		4,076,534	FAIR VALUE	SCHOLARSHIPS
DELAWARE MERIT SCHOLARSHIPS	522		1,974,000	FAIR VALUE	MERIT SCHOLARSHIPS
Graduate Student Scholarships	3431		27,087,970	FAIR VALUE	SCHOLARSHIPS
Graduate Student Fellowships	447		3,527,730	FAIR VALUE	FELLO WSHIPS
University Gift Scholarships	167		1,510,139	FAIR VALUE	SCHOLARSHIPS
Other Scholarships and Grants	1026		1,817,927	FAIR VALUE	FINANCIAL AID

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As Filed Data -

DLN: 93493137024430

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

2008

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

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

Open to Public Inspection

Name of the organization UNIVERSITY OF DELAWARE

Employer identification number

51-6000297

Pa	rt I Questions Regarding Compensation	<u>n</u>				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First class or charter travel	<u>                                      </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	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 wi provision of all the expenses described above? If "N			1b	Yes	
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the	nat app	ly			
	Compensation committee	<u> </u>	, , , , , , , , , , , , , , , , , , , ,			
	✓ Independent compensation consultant	<u> </u>	, ,			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part V I	II, Section A , line 1a			
а	Receive a severance payment or change of control p	aymer	nt?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal no	nqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased c	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide t	he applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	e lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1 a	a, did the organization pay or accrue any			
а	The organization?			5a	Yes	
Ь	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 1 a	a, did the organization pay or accrue any			
а	The organization?			6a		No
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," o			7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III		•	8		N o

### 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	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(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	
See Addıtıonal Data Table (i)								
(ii)								
(i)								
(ii)								
(i)								
(ii)								
(i)								
(ii)								
(i)								
(ii)								
(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
PART I, LINE 1A		Certain University Officers received a housing allowance in the amount of \$20,834 Certain current and former officrs were provided benefits to health and social clubs in the amount of \$116,129 In addition, one University officer received personal services in the form of housekeeping services in the amount of \$10,590 It is the University's policy to treat the above items as taxable compensation and report the applicable amounts on the Officers' Form W-2
PART I, LINE 4B		Pursuant to the terms of the University's deferred compensation plan, a former officer, received payment of \$572,000 upon retirement from the University
PART I, LINE 5A		The University's Chief Investment Officer, a key employee, received a bonus payment of \$83,025 which is partially based on the performance of the University's investment portfolio. Additionally, the University's Vice President for Development and Alumni Relations, an officer, received a bonus payment of \$30,000 which is partially based upon the level of contributions raised by the Development Office. This type of compensation is subject to the University's executive compensation process which ensures that the amount of total compensation is fair and reasonable.
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Software ID: Software Version:

**EIN:** 51-6000297

Name: UNIVERSITY OF DELAWARE

Form 990, Schedule J, Pa	rt ]	II - Officers, Direc	tors, Trustees, Ke	y Employees, and	l Highest Compen	sated Employees	T	
(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Patricia A Deleon	(I) (II)	105,220 0	0	20,500 0	13,746 0	21,141	160,607 0	61,141 0
Patrick T Harker	(ı) (ıı)	598,682 0	100,000	152,300 0	25,300 0	39,600 0	915,882 0	370,062 0
Scott R Douglass	(I)	344,916	50,000	<b>4</b> 3,206	25,300	26,188	489,610	198,078
	(II)	0	0	0	0	0	0	0
Daniel Rich	(ı) (ıı)	332,460 0	40,000 0	31,764 0	38,610 0	26,153 0	468,987 0	212,502
Monica M Taylor	(ı)	226,279	30,000	33,631	25,300	17,784	332,994	116,517
	(ıı)	0	0	0	0	0	0	0
Pierre D Hayward	(I)	228,211	25,100	23,564	26,565	31,906	335,346	143,268
	(II)	0	0	0	0	0	0	0
Patricia Ann Plummer	(ı)	197,284	30,000	31,885	22,550	23,375	305,094	135,866
Wilson	(ıı)	0	0	0	0	0	0	0
Robert M Specter	(ı)	210,455	15,000	33,521	25,300	26,423	310,699	126,939
	(ıı)	0	0	0	0	0	0	0
Thomas M Apple	(ı)	237,846	0	20,500	25,300	24,441	308,087	0
	(ıı)	0	0	0	0	0	0	0
Conrado M Gempesaw	(ı)	218,877	0	37,223	28,105	40,478	324,683	0
II	(ıı)	0	0	0	0	0	0	0
Robin W Morgan	(ı)	204,215	0	20,500	24,640	20,555	269,910	0
	(ıı)	0	0	0	0	0	0	0
Michael A Gilbert	(I)	174,099	20,000	20,539	21,450	22,712	258,800	100,017
	(II)	0	0	0	0	0	0	0
Michael J Chajes	(I) (II)	196,526 0	0	14,490 0	23,348 0	25,974 0	260,338 0	0 0
Betty J Paulanka	(ı) (ıı)	167,560 0	0	41,000 0	22,853 0	23,269 0	254,682 0	0
Nancy M Targett	(ı)	170,042	0	23,500	21,203	27,433	242,178	0
	(ıı)	0	0	0	0	0	0	0
Carl W Jacobson	(ı)	150,948	0	27,700	19,640	26,155	224,443	0
	(ıı)	0	0	0	0	0	0	0
David Lee Brond	(I)	130,861	0	17,647	16,133	19,746	184,387	0
	(II)	0	0	0	0	0	0	0
Michael Gamel-	(I)	135,995	0	5,689	15,645	24,956	182,285	0
McCormick	(II)	0	0	0	0	0	0	0
Mark A Barteau	(ı)	273,086	0	<b>4</b> 5,676	35,118	27,668	381,548	149,673
	(ıı)	0	0	0	0	0	0	0
Mark Stalnecker	(ı)	189,640	83,025	<b>41</b> ,000	25,300	17,524	356,489	165,064
	(ıı)	0	0	0	0	0	0	0
Havıdan Rodrıguez	(I)	187,135	0	15,500	22,440	30,727	255,802	0
	(II)	0	0	0	0	0	0	0
Tsu-Wei Chou	(I) (II)	200,905 0	0	111,391 0	30,949 0	25,428 0	368,673 0	152,240 0
Kurt C Keeler	(ı)	251,083	37,000	22,579	25,300	49,378	385,340	0
	(ıı)	0	0	0	0	0	0	0
Bernard L Herman	(ı)	122,155	0	185,350	17,160	24,049	348,714	0
	(ıı)	0	0	0	0	0	0	0
Donald L Sparks	(ı)	266,339	0	40,192	32,652	24,506	363,689	149,406
	(ıı)	0	0	0	0	0	0	0
Daniel Carson	(ı)	212,415	0	81,337	25,300	28,958	348,010	0
	(ıı)	0	0	0	0	0	0	0
David E Hollowell	(ı) (ıı)	379,210 0	0	603,165 0	40,000 0	36,192 0	1,058,567 0	515,225 0
Maxine R Colm	(ı)	160,399	15,000	41,068	21,074	22,709	260,250	142,456
	(ıı)	0	0	0	0	0	0	0
David P Roselle	(ı) (ıı)	333,677 0	0	335,471 0	31,075 0	27,710 0	727,933 0	378,660 0

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Schedule K

**Supplemental Information on Tax Exempt Bonds** 

OMB No 1545-0047

2008

DLN: 93493137024430

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.

Provide descriptions, explanations, and any additional information in Schedule O.

Inspection

Employer identification number

VEDCITY OF DELAWARE									Linployer	ucitinca	lion num	Dei	
VERSITT OF DELAWARE									51-6000	297			
rt I Bond Issues (Required	for 2008)						_		•	_		•	
(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	<b>(e)</b> Issu	e Price	<b>(f)</b> Des	cription of F	urpose	e <b>(g)</b> Def		Beh	On alf of suer
										Yes	No	Yes	No
University of Delaware	51-6000297	91425MAY3	04-08-	2004	53,	457,434	SEE SCHED	ULE O			X		x
University of Delaware	51-6000297	91425MAZ0	07-14-	2005	49,	945,000	SEE SCHED	SEE SCHEDULE O			х		×
University of Delaware	51-6000297	91425MBD8	03-17-	2009	71,	310,000	SEE SCHEDULE O				х		Х
Proceeds (Optional for	2008)		-		_								
1 Total Proceeds of Issue				A	<u> </u>	B		C	D			E	
Gross Proceeds in Reserve Funds													
Proceeds in Refunding or Defeasa	nce Escrows												
Other Unspent Proceeds													
Issuance Costs from Proceeds													
Working Capital Expenditures fror	n Proceeds												
Capital Expenditures from Procee	ds												
Year of Substantial Completion													
Were the bonds issued as part of a	a current refunding iss	sue?	Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
Were the bonds issued as part of a	an advance refunding	ıssue?									-		
·											+		
Does the organization maintain adequate books and records to support the													
· · · · · · · · · · · · · · · · · · ·	(Optional for 2008	)		ı			L		L				
				A	I	В		С	D			E	
		,	Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
		mber of an LLC,											
		nanced property											
	(a) Issuer Name  University of Delaware  University of Delaware  University of Delaware  University of Delaware  Total Proceeds (Optional for Total Proceeds in Reserve Funds Proceeds in Reserve Funds Proceeds in Refunding or Defeasa Other Unspent Proceeds  Issuance Costs from Proceeds  Working Capital Expenditures from Capital Expenditures from Proceed Year of Substantial Completion  Were the bonds issued as part of Were the bonds issued as part of The Were the bonds issued as part of The Were the Business Use  Was the organization maintain and final allocation of proceeds?  **TIII** Private Business Use	THE Bond Issues (Required for 2008)  (a) Issuer Name  (b) Issuer EIN  University of Delaware  51-6000297  University of Delaware  51-6000297  University of Delaware  51-6000297  Total Proceeds (Optional for 2008)  Total Proceeds in Reserve Funds  Proceeds in Refunding or Defeasance Escrows  Other Unspent Proceeds  Issuance Costs from Proceeds  Working Capital Expenditures from Proceeds  Year of Substantial Completion  Were the bonds issued as part of a current refunding issued the bonds issued as part of an advance refunding Has the final allocation of proceeds been made?  Does the organization maintain adequate books and received final allocation of proceeds?  **TIII** Private Business Use (Optional for 2008)  Was the organization a partner in a partnership, or a metal which owned property financed by tax-exempt bonds?	TITE Bond Issues (Required for 2008)  (a) Issuer Name (b) Issuer EIN (c) CUSIP #  University of Delaware 51-6000297 91425MAY3  University of Delaware 51-6000297 91425MAZ0  University of Delaware 51-6000297 91425MBD8  IN Proceeds (Optional for 2008)  Total Proceeds of Issue Gross Proceeds in Reserve Funds Proceeds in Refunding or Defeasance Escrows Other Unspent Proceeds Usuance Costs from Proceeds Working Capital Expenditures from Proceeds Capital Expenditures from Proceeds Year of Substantial Completion  Were the bonds issued as part of a current refunding issue?  Were the bonds issued as part of an advance refunding issue?  Has the final allocation of proceeds been made?  Does the organization maintain adequate books and records to support the final allocation of proceeds?  Issuer Costs from Proceeds Year of Substantial Completion  Were the bonds issued as part of an advance refunding issue?  Was the organization maintain adequate books and records to support the final allocation of proceeds?  Issuer EIN  Col CUSIP #  University of Delaware  51-6000297 91425MAZ0 91425MBD8  Proceeds (Option297 91425MAZ0 91425MBD8  Total Proceeds (Option297 91425MBD8  Total Proceeds (Option297 91425MBD8  Total Proceeds of Issue Gross Proceeds Insue Gross Proceeds Insue Gross Proceeds Gross Proceeds Gross Proceeds Gross Proceeds Gross Proceeds Gr	TETE Bond Issues (Required for 2008)  (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date  University of Delaware 51-6000297 91425MAY3 04-08- University of Delaware 51-6000297 91425MAZ0 07-14- University of Delaware 51-6000297 91425MBD8 03-17-  TETE Proceeds (Optional for 2008)  Total Proceeds of Issue Gross Proceeds in Reserve Funds Proceeds in Refunding or Defeasance Escrows Other Unspent Proceeds Issuance Costs from Proceeds Working Capital Expenditures from Proceeds Capital Expenditures from Proceeds Year of Substantial Completion  Were the bonds issued as part of a current refunding issue?  Were the bonds issued as part of an advance refunding issue?  Has the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the final allocation of proceeds?  **TITE Private Business Use (Optional for 2008)  Yes  Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?  Are there any lease arrangements with respect to the financed property	TET Bond Issues (Required for 2008)  (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued  University of Delaware 51-6000297 91425MAY3 04-08-2004  University of Delaware 51-6000297 91425MAZ0 07-14-2005  University of Delaware 51-6000297 91425MBD8 03-17-2009  ITT Proceeds (Optional for 2008)  Total Proceeds of Issue  Gross Proceeds in Reserve Funds  Proceeds in Refunding or Defeasance Escrows  Other Unspent Proceeds  Issuance Costs from Proceeds  Working Capital Expenditures from Proceeds  Year of Substantial Completion  Were the bonds issued as part of a current refunding issue?  Were the bonds issued as part of an advance refunding issue?  Has the final allocation of proceeds been made?  Does the organization maintain adequate books and records to support the final allocation of proceeds?  ITT Private Business Use (Optional for 2008)  A  Yes No  Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?  A Yes No	TETE Bond Issues (Required for 2008)  (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issuer University of Delaware 51-6000297 91425MAY3 04-08-2004 53, University of Delaware 51-6000297 91425MAZ0 07-14-2005 49, University of Delaware 51-6000297 91425MBD8 03-17-2009 71, TETE Proceeds (Optional for 2008)  Total Proceeds (Optional for 2008)  Total Proceeds in Reserve Funds Proceeds in Refunding or Defeasance Escrows Other Unspent Proceeds Issuance Costs from Proceeds Verking Capital Expenditures from Proceeds Capital Expenditures from Proceeds Year of Substantial Completion  Were the bonds issued as part of a current refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of an advance refunding issue? Were the bonds in the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the final allocation of proceeds?  **ITI Private Business Use (Optional for 2008)  Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?  A te there any lease arrangements with respect to the financed property	TELL Bond Issues (Required for 2008)  (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price  University of Delaware 51-6000297 91425MAY3 04-08-2004 53,457,434  University of Delaware 51-6000297 91425MAY0 07-14-2005 49,945,000  University of Delaware 51-6000297 91425MBD8 03-17-2009 71,310,000  TELL Proceeds (Optional for 2008)  A B  Total Proceeds of Issue  Gross Proceeds in Reserve Funds  Proceeds in Refunding or Defeasance Escrows  Other Unspent Proceeds  Working Capital Expenditures from Proceeds  Capital Expenditures from Proceeds  Year of Substantial Completion  Were the bonds issued as part of a current refunding issue?  Were the bonds issued as part of an advance refunding issue?  Has the final allocation of proceeds been made?  Does the organization maintain adequate books and records to support the final allocation of proceeds?  **III Private Business Use (Optional for 2008)  **A B  Yes No Yes No  Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?  Are there any lease arrangements with respect to the financed property	### Bond Issues (Required for 2008)  University of Delaware   51-6000297   91425MAY3   04-08-2004   53,457,434   SEE SCHED University of Delaware   51-6000297   91425MAZ0   07-14-2005   49,945,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   91425MBD8   03-17-2009   71,310,000   SEE SCHED University of Delaware   51-6000297   71,310,000   SEE SCHED University of Delaware   71,310,000   71,31	### Bond Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price (f) Description of Fig. 1	### Repart of DeLaware   Color   Color	Second   S	No   No   No   No   No   No   No   No	Canage   C

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		4	A	E	3	(	С	I	D	I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(	<u>c</u>	ı	<u> </u>	ı	Ε
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

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DLN: 93493137024430

## OMB No 1545-0047

### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

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

2008

Open to Public Inspection

	Name of the organization UNIVERSITY OF DELAWARE									Employer identification number 51-6000297						
Part I						(4) organı	zatıoı	ns or	ıly).			4.0.1				
	To be completed by organizati		"Yes" on 	Form 990, Part IV	, line	25a or 25t	o, or F	orm S	990-EZ							
1	(a) Name of disqualifie	ed person		<b>(b)</b> Des	crıpt	ion of transa	ction			<u>⊢</u>	(c) Cor					
											res	No				
sec	er the amount of tax imposed on tion 4958 er the amount of tax, if any, on li	ne 2, above, reimb	 ursed by					nder •	\$ \$							
Pait I.	To be completed by organiza			on Form 990, Part	IV,I	ine 26, or Fo	orm 9	90-E	Z, Part	V , line	38a					
(a) N	ame of interested person and purpose	(b) Loan to or from the organization?		Original principal amount		Salance due		In	(f) Approve by board committee		(g)W	/rıtten ment?				
		To From					Yes	No	Yes	No	Yes	No				
			•													
Total	<u> </u>															
Part II	Grants or Assistance E To be completed by orga				90,	Part IV, lır	ne 27									
(	a) Name of interested person			ween interested pe organization	rson	<b>(c)</b> A m	ount (	of gra	nt or ty	pe of a	assista	nce				
NA		NA									3	32,536				
Part I	Business Transactions To be completed by orga				90	Part IV lin	ne 28	a 28	Sh or	28c						
	io be completed by orga	(b) Relation			,,		.0 20	<u> </u>	, o.		e) Sha	arıng of				
(a	) Name of interested person	between inter	ested the	(c) A mount of transaction	f	( <b>d)</b> Descr	ription	oftr	ansactı	on C	rganız rever	ation's				
		organizati									Yes	No				
	E Targett	Spouse of Nanc Targett	У	,		Employmen						No				
Lynn Dell	le Jacobson	Spouse of Carl Jacobson		72,	126	Employmen	t					Νo				
Elizabeth	A Chajes	Spouse of Mich	ael	37,	609	Employmen	t					Νo				

Patrick T Harker

Chajes

UNIVERSITY

PRESIDENT

7,907,147 SEE SCHEDULE O

Νo

## **SCHEDULE M** (Form 990)

# **Non-Cash Contributions**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Name of the organization Employer identification number UNIVERSITY OF DELAWARE 51-6000297

Pa	rt I Types of Property				31-0000297			
		(a) Check If applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of do reven	etermi	nıng	
1	Art—Works of art	Х	27	-	Opinions of Experts			
2	Art—Historical treasures		21	101,000	o pililolis of Experts			
3	Art—Fractional interests							
4	Books and publications	X		54 917	Opinions of Experts			
_	Clothing and household			34,517	o pililolis of Experts			
3	goods	X		6,560	Cost/Selling Price			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Q ualified conservation							
	contribution (other)							
	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other	<u> </u>	10.5	24.700				
18	Collectibles	X	496	94,/32	Opinions of Experts			
	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts		105	20 175	O = : = : = = = = = = = = = = = = = = =			
	Scientific specimens Archeological artifacts	X	105	29,175	Opinions of Experts			
24	· ·	×	34	79.046	Cost/Selling Price			
25	Other (describe SEE PART II )		26		Cost/Selling Price			
	Other (describe SEE PART II ) Other (describe SEE PART II )	X	5		Cost/Selling Price			
	Other (describe SEE PART II )	X	1		Cost/Selling Price			
28 29	Number of Forms 8283 received			·	Cost/Sennig i rice			
23	which the organization complete			in for contributions for	29			1
	Acknowledgement							
							Yes	No
30a	During the year, did the organization hold for at					 		 
	least three years from the date of			not required to be used for a	exempt purposes			۱
_	for the entire holding period? .					30a		No
	If "Yes", describe the arrangeme						<sub>v</sub>	
31	Does the organization have a gif					31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	22-		N. a
h	If "Yes", describe in Part II				· · ·	32a		No
	If the organization did not report	reveniles i	n Column (c) for a type of n	roperty for which Column (a	a) is			1
	checked, describe in Part II	. ICVCIIUES I	Columnity of for a type of p	Topoley for Mineri Corumni (e	., . <del>.</del>			

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. ReturnReference Explanation PART I, COLUMN B The numbers in column (B) represent the number of items contributed PART I, LINE 25 Line 25 represents laboratory tools and equipment for the College of Engineering valued at \$36,000, a compact x-ray diffraction system for the Center for Catalytic Science and Technology valued at \$40,000, and miscellaneous tools for the College of Engineering valued at \$2,046 PART I, LINE 26 Line 26 represents garden tools and plants for the College of Agriculture & Natural Resource valued at \$1,487, and various plants for the Univ of DE Botanic Gardens valued at \$1,126 PART I, LINE 27 Line 27 represents miscellaneous equipment for the Univ of DE Men's Crew Club valued at \$2,266 PART I, LINE 28 Line 28 represents room and board for the Univ of DE Men's Golf Team (golf tournament) valued at \$1,000

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## **SCHEDULE 0** (Form 990)

Department of the Treasury Internal Revenue Service

# **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

Inspection

Name of the organization UNIVERSITY OF DELAWARE

**Employer identification number** 

51-6000297

ldentifier	Return Reference	Explanation
OTHER PROGRAM SERVICES	Part III, Line 4d	Other program services are Extension and Public Service, total expenses of \$45,128,932, Academic Support, total expenses of \$27,228,189

ldentifier	Return Reference	Explanation
FORM 990 REVIEW	Part VI, Section A, Line 10	The University's Form 990 is prepared by the Office of the Vice President for Finance and signed by the Vice President for Finance. The Form 990 is reviewed by additional members of University management, including the Executive Vice President and University Treasurer, the Vice President for Administration, and the Vice President and General Counsel. It is also reviewed by the University's independent tax advisors who sign the return as "Paid Preparers." The Audit Visiting Committee of the Board of Trustees reviews and discusses the full Form 990 at its spring meeting (held in April 2010). Additionally, the full Form 990 is provided to the full Board of Trustees prior to the filing of the Form 990 with the IRS.

ldentifier	Return Reference	Explanation
CONFLICT OF INTEREST	Part VI, Section B, Line 12c	The Board of Trustees, Officers and key employees of the University, by virtue of their offices, have a fiduciary relationship with the University which requires that they act in good faith and with fidelity to the University's best interests. The University has written conflict of interest polices which are intended to permit the University and its Trustees, Officers and other key employees to identify, evaluate and address any conflict of interest that might call into question this fiduciary duty to the University. The conflict of interest policy covering Trustees is documented in the Bylaws of the Board of Trustees of the University, Chapter 1, Section II(H). The conflict of interest policies covering Officers and other key employees are documented in the following University policies. 4-41, Professional and Salaried Staff Code of Ethics and 6-11, Faculty and Professional Staff Involvement in Commercial Enterprises that have Relationships with the University of Delaw are Each Trustee, Officer and key employee is required to report any conflicts of interest to the University as soon as practical after they become aware of such a conflict Each Trustee, Officer and key employee shall also annually complete a Conflict of Interest Questionnaire. The University monitors compliance with its conflict of interest policies by review of the annual conflict of interest questionnaires by the Office of the Vice President for Finance if conflicts of interest exist for officers and key employees, the President (or his designee) determines the corrective measure, if any, to be taken to resolve the conflict, or will impose appropriate restrictions, if any on the person with the conflict. For conflicts of interest involving the President or Trustees, the Audit Visiting Committee of the Board of Trustees will be notified of the conflict and will recommend to the Executive Committee of the Board of Trustees the corrective measures, if any, to be taken to resolve the conflict or appropriate restrictions, if any to be imposed on t

ldentifier	Return Reference	Explanation
Officer and Key Employees Compensation Process	Part VI, Section B, Line 15 A & B	The compensation of all Officers of the University is reviewed and approved annually by the Compensation Committee of the Board of Trustees, and is subsequently approved by the full Board of Trustees. Such review includes the use of benchmark compensation data and 3rd party experts. The Officers' compensation process is contemporaneously documented by the Compensation Committee of the Board of Trustees. The compensation of key employees is set by their respective supervising Officer within the constraints of the University's operating budget, which is reviewed and approved by the Finance. Committee of the Board of Trustees, and subsequently by the full Board of Trustees. The Key Employees' compensation process is contemporaneously documented by the University.

ldentifier	Return Reference	Explanation
Disclosure of Governing Documents	Part VI, Section C, Line 19	The University's governing documents, conflict of interest polices and audited financial statements are available as public information on the University's website, and in hardcopy upon request. In addition the University's Form 990, Form 990-T and IRS Determination Letter are made available for public review upon request.

ldentifier	Return Reference	Explanation
Schedule K, Part I, Line A		In April 2004, the University issued \$12,070,000 of Series 2004A Revenue Bonds Approximately \$8,041,000 of these Series 2004A Bonds were used to retire the Series 1993 Revenue Notes. The remaining portion were used to construct a parking garage, to demolish existing University dormitories, to construct three new dormitory buildings, and for other capital improvements. In April 2004, the University issued \$40,835,000 of Series 2004B Variable Rate Demand Revenue Bonds. The Bonds were used to construct a parking garage, to demolish existing University dormitories, to construct three new dormitory buildings, and for other capital improvements.

ldentifier	Return Reference	Explanation
Schedule K, Part I, Line B		In July 2005, the University issued \$49,945,000 of Series 2005 Variable Rate Demand Revenue Bonds \$37,880,000 of the Series 2005 Bonds were used to complete the construction of three new dormitory buildings, the demolition of some existing University dormitories, and other capital improvements started with proceeds of the Series 2004B Revenue Bonds. Also, \$12,065,000 was used to Advance Refund a portion of the Series 1997 Bonds.

ldentifier	Return Reference	Explanation
Schedule K, Part I, Line C		In March 2009, the University issued \$71,310,000 of Series 2009A Variable Rate Revenue Bonds. These bonds were issued for the purpose of refinancing the taxable bank demand note as follows. In July 2008, the University obtained a \$73,600,000 30-day bank demand note at a variable interest rate based on one-month LIBOR. The note was used to redeem the Series 2007 Series Auction rate Revenue Bonds. The original series 2007 bonds were used to pay a portion of the costs of renovation, construction, and equipping of certain university project facilities.

ldentifier	Return Reference	Explanation
SCHEDULE L, PART IV, COLUMN D	PATRICK T HARKER	DR HARKER, WHO IS PRESIDENT OF THE UNIVERSITY, IS ALSO A DIRECTOR ON THE BOARD OF DIRECTORS OF PEPCO HOLDINGS, INC PEPCO HOLDINGS, INC OWNS DELMARVA POWER AND LIGHT, INC AS WELL AS PEPCO ENERGY SERVICES, INC, WHICH PROVIDE ELECTRIC UTILITY SERVICES TO THE UNIVERSITY OF DELAWARE THESE ELECTRIC UTILITY SERVICES ARE PROVIDED TO THE UNIVERSITY OF DELAWARE ON AN ARM'S LENGTH BASIS

DLN: 93493137024430

OMB No 1545-0047

**Open to Public** Inspection

# **SCHEDULE R** (Form 990)

Department of the Treasury

▶ 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.

**Related Organizations and Unrelated Partnerships** 

Internal Revenue Service Name of the organization UNIVERSITY OF DELAWARE

**Employer identification number** 

51-6000297

Part I	Identification	of I	Disregarded	Entities

<b>(A)</b> Name, address, and EIN of disregarded entity	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Total income	<b>(E)</b> End-of-year assets	<b>(F)</b> Direct controlling entity
Blue Hen Hotel LLC Hullihen Hall Suite 220 Newark, DE 19716 51-0411499	HOTEL	DE	4,413,687	18,074,381	NA
1743 HOLDINGS LLC HULLIHEN HALL SUITE 220 NEWARK, DE 19716 27-1332816	INACTIVE	DE	0	0	NA

#### Part II Identification of Related Tax-Exempt Organizations

administration of Related Tax Exempt organizations								
(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	<b>(F)</b> Direct controlling entity			
Alumni Association of the Univ of DE								
24 E Main Street Newark, DE19716 51-6016065	SCHOLARSHIP	DE	501(C)(3)	TYPE III-FI	NA			
University of Delaware Research Fdn								
220 Hullihen Hall Newark, DE197160099 51-6017306	Research	DE	501(C)(3)	Type III-O	NA			
University of De Library Associates Inc								
University of Delaware Library Newark, DE197175267 51-6017971	DONATIONS	DE	501(C)(3)	TYPE III-FI	N/A			
Bartol Research Fdn co Franklin Instit								
222 N 20th St Philadelphia, PA19103 23-2482657	Research	РА	501(C)3	TYPE 1	FRANKLIN INS			
Karl W Boer Solar Energy Medal of Merit								
c/o Ralf R Boer Trustee Milwaukee, WI532025306 39-6596448	Award	DE	501(C)(3)	Туре І	NA			
For Demonstrate Destruction And Marking and the Treatment in the Form 200	•	C-+ N - 50125V			C-ll-l- D (F 000) 2000			

Part III Identification of R	elated Organ		cable as a Par	tnersnip								,	
<b>(A)</b> Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Direct controlling entity	(E) Predominincome(rekinvestme unrelate	ated, :nt,	( <b>I</b> Share of to	F) otal income	<b>(G)</b> Share of end-of-year assets	(H Dispro alloca	<b>H)</b> prtionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana	<b>J)</b> eral or aging ener?
									Yes	No		Yes	No
Arlington Fund 1 LLC 100 Summer Street Boston, MA02110 47-0900223	Investments	DE	NA	Unrelated			-32,868,472	98,240,658		No	0	Yes	
										<u> </u>			
Part IV Identification of R	elated Organ			poration o	or Tru								
(A) Name, address, and EIN of related or	ganızatıon	<b>(B)</b> Primary activity	(C) Legal domic (state or foreign country)			( <b>D)</b> t controlling entity	(E) Type of er (C corp, S or trust	corp,	ome	Sh end-	are of Perc	<b>H)</b> entage ership	
NONE													

(5)

(6)

University of Delaware Research Foundation

University of DE Library Associates Inc

Part V	Transactions with Related Organizations
	riansactions with Related organizations

P	Transactions with Related Organizations					
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			,	Yes	No
1 [	uring the tax year, did the orgranization engage in any of the following transactions with	n one or more related organizations listed in Parts II-IV	'?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	a '	Yes	
ь	Gift, grant, or capital contribution to other organization(s)		11:	ь		No
c	Gift, grant, or capital contribution from other organization(s)		10	c '	Yes	
d	Loans or loan guarantees to or for other organization(s)		10	d		No
e	Loans or loan guarantees by other organization(s)		16	е		No
f	Sale of assets to other organization(s)		1f	f		No
g	Purchase of assets from other organization(s)	19	g		No	
h	Exchange of assets	11	h		No	
i	Lease of facilities, equipment, or other assets to other organization(s)		11	i		No
j	Lease of facilities, equipment, or other assets from other organization(s)			j		No
k	Performance of services or membership or fundraising solicitations for other organizar	tion(s)	114	k		No
1	Performance of services or membership or fundraising solicitations by other organizat	ion(s)	11	ı		No
n	Sharing of facilities, equipment, mailing lists, or other assets		1r	m		No
n	Sharing of paid employees		1r	n		No
o	Reimbursement paid to other organization for expenses		10	0		No
p	Reimbursement paid by other organization for expenses		15	р `	Yes	
q	O ther transfer of cash or property to other organization(s)		10	<b>q</b> ,	Yes	
	Other transfer of cash or property from other organization(s)		11	-+		No
2	If the answer to any of the above is "Yes," see the instructions for information on who	(B)	s and transaction thresholds			
	Name of other organization(s)	Transaction	Amount Involved			

	Name of other organization(s)	type(a-r)	Amount Involved
(1)	Arlington Fund 1 LLC-Newark Series	a(ı)	34,884
(2)	Arlington Fund 1 LLC-Newark Series	q	400,000
(3)	Alumni Association of the University of DE	с	153,288
(4)	Alumni Association of the University of DE	р	214,543

С

С

480,000

70,000

### 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

of K-1 managing partner?	Yes No	No								
<b>(G)</b> Code V—UB amount on B 20 of K-1										
r) ortionate :ions?	No	No								
(F Disprop allocat	Yes									
<b>(E)</b> Share of end-of-year assets										
e all tners tion c)(3) izations?	No	No								
parti sect 501(d organiz	Yes									
<b>(C)</b> Legal domicile (state or foreign country)										
<b>(B)</b> Primary activity										
(A) Name, address, and EIN of entity		NONE								

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

	(A) Name of other organization	<b>(B)</b> Transaction type(a-r)	<b>(C)</b> A mount Involved (\$)
(1)	Arlıngton Fund 1 LLC-Newark Series	a(ı)	34,884
(2)	Arlington Fund 1 LLC-Newark Series	q	400,000
(3)	Alumnı Association of the University of DE	с	153,288
(4)	Alumnı Association of the University of DE	р	214,543
(5)	University of Delaware Research Foundation	с	480,000
(6)	University of DE Library Associates Inc	с	70,000

Software ID: Software Version:

**EIN:** 51-6000297

Name: UNIVERSITY OF DELAWARE

#### Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	<u> </u>									
		<b>(C)</b> Position (check all that apply)								(F)
<b>(A)</b> 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
Tony Allen , Trustee	10	Х						0	0	0
James C Borel , Trustee	2 0	Х						0	0	0
Thomas J Burns , Trustee	2 0	Х						0	0	0
Irwin G Burton , Trustee	10	Х						0	0	0
RRM Carpenter III , Trustee	2 0	Х						0	0	0
John R Cochran , Trustee	2 0	Х						0	0	0
Richard S Cordrey , Trustee	10	Х						0	0	0
Howard E Cosgrove , Trustee	2 0	Х						0	0	0
Allison Burris Castellanos , Trustee	10	Х						0	0	0
Patricia A Deleon , Trustee and Professor	1 0	×						125,720	0	34,887
Robert A Fischer , Trustee	2 0	Х						0	0	0
Terı Q uınn Gary , Trustee	10	Х						0	0	0
Robert W Gore , Trustee	10	Х						0	0	0
T Henley Graves , Trustee	10	Х						0	0	0
Scott A Green , Trustee	1 0	Х						0	0	0
Teagan J Gregory , Trustee	10	Х						0	0	0
Terrı Kelly , Trustee	1 0	Х						0	0	0
Dennis E Klima , Trustee	1 0	Х						0	0	0
Carey M Koppenhaver , Trustee	1 0	Х						0	0	0
Jack A Markell , Trustee	10	Х						0	0	0
Cynthia Primo Martin , Trustee	10	Х						0	0	0
William H Narvel Jr , Trustee	10	Х						0	0	0
Christopher H Schell , Trustee	1 0	Х						0	0	0
A Gilchrist Sparks , Trustee	6 0	Х						0	0	0
Everett C Toomey , Trustee	1 0	Х						0	0	0
H Wesley Towers Jr , Trustee	1 0	Х						0	0	0
P Coleman Townsend Jr , Trustee	2 0	Х						0	0	0
Sherman L Townsend , Trustee	2 0	Х						0	0	0
John E Wallace , Trustee	10	Х						0	0	0
Kenneth C Whitney , Trustee	1 0	Х						0	0	0

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa								1		
		Posit t	(C non ( hat a	ched		I			(E)	(F)
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	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
Mary Jane Willis , Trustee	1 0	Х						0	0	0
Patrick T Harker , President	55 0	X		Х				850,982	0	64,900
Scott R Douglass , Executive VP and Treasurer	55 0			х				438,122	0	51,488
Daniel Rich , Provost	55 0			Х				404,224	0	64,763
Monica M Taylor , Vice President	55 0			Х				289,910	0	43,084
Pierre D Hayward , VP and University Secretary	55 0			х				276,875	0	58,471
Patricia Ann Plummer Wilson , Vice President/Chief of Staff	55 0			x				259,169	0	45,925
Robert M Specter , Vice President	55 0			Х				258,976	0	51,723
Thomas M Apple , Dean	55 0			Х				258,346	0	49,741
Conrado M Gempesaw II , Dean	55 0			Х				256,100	0	68,583
Robin W Morgan , Dean	55 0			Х				224,715	0	45,195
Michael A Gilbert , Vice President	55 0			Х				214,638	0	44,162
Michael J Chajes , Dean	55 0			Х				211,016	0	49,322
Betty J Paulanka , Dean	55 0			Х	<u> </u>			208,560	0	46,122
Nancy M Targett , Dean	55 0			Х	<u> </u>			193,542	0	48,636
Carl W Jacobson , Vice President	55 0			Х				178,648	0	45,795
David Lee Brond , Vice President	55 0			Х				148,508	0	35,879
Michael Gamel-McCormick , Dean	55 0			Х				141,684	0	, , , , , , , , , , , , , , , , , , , ,
Jennifer W Davis , Vice President	55 0			Х				27,500	0	4,976
Maxine R Colm , FMR VICE PRESIDENT	55 0			х				216,467	0	43,783
Mark A Barteau , Senior Vice Provost	50 0				X			318,762	0	62,786
Mark Stalnecker , Chief Investment Officer	50 0				х			313,665	0	42,824
Havidan Rodriguez , VICE PROVOST	50 0				Х			202,635	0	53,167
Tsu-Wei Chou , DUPONT CHAIR PROFESSOR	50 0					x		312,296	0	56,377
Kurt C Keeler , HEAD COACH V	50 0					Х		310,662	0	74,678
Bernard L Herman , CHAIRPERSON	50 0					Х		307,505	0	41,209
Donald L Sparks , HALLOCK DUPONT PROFESSOR	50 0					х		306,531	0	57,158
Daniel Carson , CHAIRPERSON	50 0					Х		293,752	0	54,258
David E Hollowell , FMR EXECUTIVE VP & TREASURER							х	982,375	0	76,192
David P Roselle , Former President							Х	669,148	0	58,785

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

Mission Statement: The University of Delaware exists to cultivate learning, develop knowledge, and foster the free exchange of ideas. State-assisted yet privately governed, the University has a strong tradition of distinguished scholarship, research, teaching, and service that is grounded in a commitment to increasing and disseminating scientific, humanistic, and social knowledge for the benefit of the larger society. Founded in 1743 and chartered by the state in 1833, the University of Delaware today is a landgrant, sea-grant, space-grant, and urban-grant university. The University of Delaware is a major research university with extensive graduate programs that is also dedicated to outstanding undergraduate and professional education. University faculty is committed to the intellectual, cultural, and ethical development of students as citizens, scholars, and professionals. University graduates are prepared to contribute to a global society that requires leaders with creativity, integ