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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

Open to Public Inspection

A	- For t	ne 2010 calendar year, or tax year beginning	and	ending					
В	Check applica	C Name of organization			D Employer identifi	cation number			
Γ	Add	ress UNIDEL FOUNDATION, INC.	_						
Ĩ	Nan Cha	e	<u> </u>		51-6015046				
Ī	Initi	1	vered to street address)	Room/suite	E Telephone number				
	Terr	nn- D O BOY 1146			302-658-7691				
	Ame retu	City or town, state or country, and ZIP + 4			G Gross receipts \$	73,886,398.			
	App	MIDMINGION, DE 13033		H(a) Is this a group re	eturn				
	pen	F Name and address of principal officer G . A	ARNO LOESSNER,	PHD	for affiliates?	Yes X No			
same as C above H(b) Are all affiliates included? Yes No									
I Tax-exempt status. X 501(c)(3) 501(c) () (Insert no.) 4947(a)(1) or 527 If "No," attach a list (see instructions)									
J Website: ► N/A H(c) Group exemption number ►									
			sociation Other >	L Year	of formation: 1939 N	A State of legal domicile: DE			
L	Part I	Summary			1 1 1 1				
;	g 1	Briefly describe the organization's mission or most							
	covernance 5 2	Delaware by making targets							
=	2		ntinued its operations or dispo	sed of more		1			
	6 3 5 4	Number of voting members of the governing body (Number of independent voting members of the gov	•		3	5			
ഞ	20	Total number of individuals employed in calendar you	• • • • • •		5	3			
	6 Kie	Total number of volunteers (estimate if necessary)	cai 2010 (i ait v, iiie 2a)		6	0			
	=	Total unrelated business revenue from Part VIII, col	lumn (C), line 12		7a	0.			
	⋖ ``	Net unrelated business taxable income from Form §	, ,,		7b	0.			
<u> </u>				, T	Prior Year	Current Year			
	_w 8	Contributions and grants (Part VIII, line 1h)	RECEIVED		0.	0.			
5	로 9	Program service revenue (Part VIII, line 2g)	Q		0.	0.			
	9 9 10	Investment income (Part VIII, column (A), lines 8,14,	and//4) 1 7 2011 0 9c, 10c, and 11e) 0		-4,864,364.	13,613,897.			
)	- 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e) ဟု		0.	17,704.			
_	12	Total revenue - add lines 8 through 11 (must equal			-4,864,364.	13,631,601.			
	13	Grants and similar amounts paid (Part IX, column (A			16,620,000.	7,000,000.			
	14	Benefits paid to or for members (Part IX, column (A)		-	0.	0.			
:	15 16: 16: 16: 17	Salaries, other compensation, employee benefits (F			157,086.	165,788.			
	ë 16	a Professional fundraising fees (Part IX, column (A), lii	•	<u>,</u> –	0.	0.			
Ĺ	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Total fundraising expenses (Part IX, column (D), line	· · · ———	0.	1 226 722	1 022 227			
	17 18	Other expenses (Part IX, column (A), lines 11a-11d, Total expenses Add lines 13-17 (must equal Part IX	•		1,226,722. 18,003,808.	1,032,227.			
	19	Revenue less expenses Subtract line 18 from line		<u> </u>	22,868,172.	8,198,015. 5,433,586.			
- -	8	The vertice less expenses oubtract line to from line	12		ginning of Current Year	End of Year			
ets	20 21 22	Total assets (Part X, line 16)			06,246,693.	230,281,003.			
ASS	සි 21	Total liabilities (Part X, line 26)		_	9,296,126.	12,324,000.			
Set	들 22	Net assets or fund balances Subtract line 21 from	line 20	1	96,950,567.	217,957,003.			
	Part I			-					
U	nder pe	nalties of perjury, peclare that have examined this return,	including accompanying schedule	s and statem	ents, and to the best of m	y knowledge and belief, it is			
tr	true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.								
A. Mus Joespel May 13, 2011									
Sign Synature of officer Date									
Here G. ARNO LOESSNEK, PHD, SECRETARY/TREASURER Type or print name and title									
ъ.	a i d		Prepare a signature		ir L				
	aid reparer	Peter Kennedy Firm's name Cover & Rossiter	, P.A.		5/11/11 self-employe				
Use Only Firm's address 62 Rockford Road, Suite 200									
	•my	Wilmington, DE 19			Phone no. (302) 656-6632			
M	lay the	IRS discuss this return with the preparer shown above			[i none no. (X Yes No			
	2001 02			ons.		Form 990 (2010)			
			, III GU WOLI			(=010)			

Form 990 (2010) UNIDEL FOUNDATION, INC.

Part IV Checklist of Required Schedules

	•		<u>res</u>	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_	<u> </u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		X
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	•		v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6_		<u> </u>
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	-	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide	8		
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	_9_		
.0	If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X		22	
••	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a		x
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
15	and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		<u> X</u> _
ıə	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	45		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> X</u>
.0	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	•••		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			†
-	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
		Form	990	(2010)

Note. All Form 990 filers are required to complete Schedule O	38	A 1	l .
		v	
	31		
· · · · · · · · · · · · · · · · · · ·	37		х
·	30		
	36		х
	35		X
	34	_X	77
		١,,	
	33	-	X
			,
Schedule N, Part II	32		X
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	31		<u> X</u>
Did the organization liquidate, terminate, or dissolve and cease operations?			
	30		X
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a]	х
instructions for applicable filing thresholds, conditions, and exceptions).			
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			_
Schedule L, Part III	27		х
	20	\dashv	
	26	l	х
	200		
Schedule L, Part I	25h		х
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
			_
disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
any tax-exempt bonds?	24c		
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
Schedule K If "No", go to line 25	24a		X
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
Schedule J	23		х
	22		X
	21	Λ	
	,	v	
Did the organization report more than \$5,000 of greate and other assistance to accompany and assistance of the		Yes	No
	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 lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization aminitaria an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I I 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 I 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 is tax year? If "Yes," complete Schedule L, Part II I Was the organization provide a grant or other assistance to an officer, director, trustee, every employee, which a current or applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," co	United States on Part IX, Column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I and 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 lines 24b through 24d and complete Schedule I II and the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person on uning the year? If "Yes," complete Schedule I, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person on a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule I, Part II Was the organization provide a grant or other assistance to an 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 I, Part II Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, lightly compensated employee, or dequalified person organization as of the endition of the organization with a curre	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," to righted Schedule I, Parts I and III Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization scure and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I 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 lines 24b through 24d and complete Schedule I If "Yes," the organization is never than 100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I If "Yes," than 1 a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization answer than an escrow account other than a refunding escrow at any time during the year of defease any tax-exempt bonds? Did the organization aware that it engaged in an excess benefit transaction with a disqualified person of uring the year? If "Yes," complete Schedule I, Part II is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Erms 990 or 990 E2? If "Yes," complete Schedule I, Part II was a loan to by a current or former officer, director, trustee, experiments of prior prior prior prior prior prior prior prior prior prio

032004 12-21-10

Form **990** (2010)

14h

b_If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2010) 51-6015046 UNIDEL FOUNDATION, Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response to any question in this Part VI [X]Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a **b** Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Х Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Х 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Х Does the organization have members or stockholders? 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year 8 by the following a The governing body? Х 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Does the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 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 X Does the organization have a written whistleblower policy? Х 13 13 14 Does the organization have a written document retention and destruction policy? X 14 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? a The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 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? Х 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 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 X Another's website Own website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19

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

State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► G• ARNO LOESSNER − 302−658−7691

1201 N. MARKET ST., STE 505, WILMINGTON, DE 19801

Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- 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, and 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

Check this box if neither the organization nor any related org						nper	nsat				
(A)	(B)			_ (0				(D)	(E)	(F)	
Name and Title	Average	Position (check all that apply)					I. A	Reportable	Reportable	Estimated	
	hours per week	-	Teck	alli	mai	арр	<u> </u>	compensation from	compensation from related	amount of other	
	(describe	rector						tho	organizations	compensation	
	hours for	or di	tee			ated		organization	(W-2/1099-MISC)	from the	
	related	ustee	trust		8	npen		(W-2/1099-MISC)		organization	
	organizations	T leal	tronal		ploy	st con yee	_			and related	
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Кеуеп	Highest compensated employee	Forme			organizations	
IRENEE DU PONT, JR.											
PRESIDENT	2.00	X						0.	0.	0	
ANDREW B. KIRKPATRICK, JR, ESQ.											
VICE PRESIDENT	2.00	X						0.	0.	0	
RICHARD L. SUTTON, ESQ.											
TRUSTEE	2.00	X	<u> </u>				L	0.	0.	0	
DAVID D. WAKEFIELD											
TRUSTEE	2.00	X				_	L	0.	0.	0	
ROBERT W. GORE, Ph.D.								<u> </u>			
TRUSTEE	2.00	X					L	_0.	0.	0	
G. ARNO LOESSNER, PHD.											
SECRETARY-TREASURER	25.00			X	<u> </u>	_	$ldsymbol{ld}}}}}}$	104,929.	0.	8,394	
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Part	VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)			
	· (A)	(B)			(0)			(D) (E)			(F)	
	Name and title	Average				Position			Reportable	Reportable	Es	stimate	d
		hours per	(cł	neck	k all that apply)		ly)	compensation	compensation	an	nount	of	
		week (describe	ctor						from	from related	000	other	.
		hours for	r dire				ᇐ		the organization	organizations (W-2/1099-MISC)		pensa om the	
		related	stee o	trustee			ensal		(W-2/1099-MISC)	(** 2) 1000 111100)		anızat	
		organizations	ıal tru	onal t		loyee	S 83				an	d relat	ed
		in Schedule	Individual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	Former			orga	anızatı	ons
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	Sub-total								104,929.	0.	<u> </u>	8,3	
	Total from continuation sheets to Part VII, Section A								0 0	0.			
	Total (add lines 1b and 1c)						<u> </u>		104,929.	0.		8,3	94.
	Total number of individuals (including but	not limited to th	ose	liste	ed al	bov	e) wl	no r	eceived more than \$100	,000 in reportable			1
	compensation from the organization						-					Yes	No
•	Did the eventuation lest any fewer and	drastar as to	ata-	. ke		nnla		a. L		anlava a an		162	140
	Did the organization list any former office		siee	, ке	у еп	ıрю	yee,	or r	iignest compensated er	iipioyee oii			y
	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s		ء ما	me	ener	ation	1 an	1 0+1	her compensation from	the organization	3_	 	X
	and related organizations greater than \$15	•		-						ine organization	4	1	Х
	Did any person listed on line 1a receive or									dual for services	-		- 21
	rendered to the organization? If "Yes." cor							Jial	ou organization of indivi	GUGI IOI GOI VIOGO	5		х

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Eagle Capital Management, LLC	Investment	
	Management	347,539.
Fund Evaluation Group, 201 E. 5th Street,	ranagement.	32773331
Suite 1600, Cincinnati, OH 45208	Investment Advisory	181,960.
Brandywine Global Investment Management, In	Investment	
2929 Arch Street, 8th Floor, Philadelphia,	Management	159,374.
Wilmington Trust Company, 1100 North	Investment Custody	
Market Street, Wilmington, DE 19801	and Transaction Proc	150,523.
BNY Mellon, 30195 Chagrin Blvd., Suite	Investment	
350W, Pepper Pike, OH 44124	Management	111,806.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 in compensation from the organization > 5		

Form **990** (2010)

Pa	rt VII	Statement of Rever	nue		-			
		•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts Its	1 a	Federated campaigns	1a					
g a	b	Membership dues	1b					
Contributions, gifts, grants and other similar amounts	С	Fundraising events	1c					
	d	Related organizations	1d					
S.E	е	Government grants (contribut	tions) 1e					
윤의	f	All other contributions, gifts, gran	nts, and			1		
년 된		sımılar amounts not ıncluded abo	ove 1f	·				
da	g	Noncash contributions included in lines	s 1a-1f \$					
Q <u>g</u>	h	Total, Add lines 1a-1f		<u> </u>				
				Business Code				
8	2 a							
Program Service Revenue	b							
e S	С							
e a	d							
5	е							
<u>-</u>		All other program service reve	enue					
\rightarrow	g	Total. Add lines 2a-2f						
	3	Investment income (including	ı dıvıdends, ınte	rest, and				
		other similar amounts)		.	4940589.			4,940,589.
	4	Income from investment of ta	x-exempt bond	proceeds				ļ
	5	Royalties		<u> </u>				ļ
			(ı) Real	(II) Personal				
	6 a							
	b							
		, ,	<u> </u>					
		Net rental income or (loss)	[05]	_				1
	7 a	Gross amount from sales of	(ı) Securities	- · · · · · · · · · · · · · · · · · · ·	-			
		assets other than inventory	68,928,105	5.				
	D	Less cost or other basis		.		11		
	_	and sales expenses	60,254,797		-			
		Gain or (loss)	8,673,308		8673308.			
		Net gain or (loss) Gross income from fundraising	a avanta (nat	>	8073308.			8,673,308.
Other Revenue	Оа	including \$						
§		contributions reported on line						
œ		Part IV, line 18	•	a l				
ᆴ	h	Less direct expenses		b				
ŏ		Net income or (loss) from fund		-				1
		Gross income from gaming a	•					
		Part IV, line 19		a				
	b	Less direct expenses		b	1			
		Net income or (loss) from gan		•	1			1
		Gross sales of inventory, less	-		7,			
		and allowances		a				
	b	Less. cost of goods sold		ь				
		Net income or (loss) from sale	es of inventory	•				
		Miscellaneous Revenu		Business Code				
	11 a	Litigation Prod	ceeds	900099	17,704.			17,704.
	b							-
	С							
	d	All other revenue						
Ì	е	Total. Add lines 11a-11d		>	17,704.			
	12	Total revenue See instructions.		>	13,631,601.	0.	0.	13,631,601.
03200 12-21	9 - 10							Form 990 (2010)

Form 990 (2010) UNIDEL FOUNDATION, INC. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	Section 501(c)(3 All other organizations must comp	3) and 501(c)(4) organiza	•		
		(A)	(B)	(C)	
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	7,000,000.	7,000,000.		·····
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	112 222		112 222	
_	trustees, and key employees	113,323.		113,323.	<u></u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	l			
_	persons described in section 4958(c)(3)(B)	38,867.	· · · · · · · · · · · · · · · · · · ·	38,867.	
7	Other salaries and wages	30,001.		30,007.	·
8	Pension plan contributions (include section 401(k)	2,712.		2 712	
_	and section 403(b) employer contributions)	4,114.		2,712.	
9	Other employee benefits	10,886.		10,886.	
10	Payroll taxes	10,000.		10,000.	
11	Fees for services (non-employees)				
_	Management	19,409.		19,409.	
b	Legal Legal Accounting	20,522.		20,522.	
c	Lobbying	20,322.		20,322.	
a	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	769,242.		769,242.	
g	Other	181,960.		181,960.	
12	Advertising and promotion	101/300.		101,500.	
13	Office expenses	6,094.		6,094.	
14	Information technology			0,002	
15	Royalties				
16	Occupancy	29,455.		29,455.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,365.		1,365.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)				
	amount, list line 24f expenses on Schedule O.)				
а	Parking	2,148.		2,148.	
b	Payroll preparation fee	1,287.		1,287.	
С	Taxes and Licenses	745.		745.	
d					
е					
f	All other expenses	0 100 015	7 000 000	1 100 015	
<u>25</u>	Total functional expenses Add lines 1 through 24f	8,198,015.	7,000,000.	1,198,015.	0.
26	Joint costs Check here I if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising				
	solicitation				5 000 (0040)

Pai	<u>T 🔨 </u>	balance Sneet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	80,714.	1	40,826.
	2	Savings and temporary cash investments	3,795,667.	2	22,085,360.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees	s, key		
		employees, and highest compensated employees. Complete Pa	art II		
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under s	section		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and conf	tributing		
		employers and sponsoring organizations of section 501(c)(9) vo	luntary		
		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	164,244,795.	11	168,202,062.
	12	Investments - other securities. See Part IV, line 11	37,818,328.	12	39, <u>085,970.</u>
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	307,189.	15	866,785.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	206,246,693.	16	230,281,003.
	17	Accounts payable and accrued expenses	169,620.	17	173,830.
	18	Grants payable	9,000,000.	18	11,000,000.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Sched		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	· ·		
Lial		highest compensated employees, and disqualified persons. Co of Schedule L.	mpiete Part II	22	
	23	Secured mortgages and notes payable to unrelated third partie	s	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	126,506.	25	1,150,170.
	26	Total liabilities. Add lines 17 through 25	9,296,126.	26	12,324,000.
		Organizations that follow SFAS 117, check here	and complete		
S		lines 27 through 29, and lines 33 and 34.	•		
ğ	27	Unrestricted net assets	687,444.	27	628,033.
lala	28	Temporarily restricted net assets		28	
Ā	29	Permanently restricted net assets	196,263,123.	29	217,328,970.
Ē		Organizations that do not follow SFAS 117, check here	and		
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other		32	
Z	33	Total net assets or fund balances	196,950,567.	33	217,957,003.
	34	Total liabilities and net assets/fund balances	206,246,693.	34	230,281,003.

Form **990** (2010)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

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Form **990** (2010)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization **Employer identification number** UNIDEL FOUNDATION, 51-6015046 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III · Functionally integrated d X Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? Х 11g(i) (ii) A family member of a person described in (i) above? Х 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organizátion in col. in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes UNIVERSITY OF DELAWARE 51-6000297 X 7000000. 7,000,000.

032021 12-21-10

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010						Page 2
Part II Support Schedule for C						<u>'i) — — — — — — — — — — — — — — — — — — —</u>
(Complete only if you checked				n failed to qualify	under Part III If the	organization
fails to qualify under the tests I	isted below, plea	se complete Part	····			
Section A. Public Support				1	ī	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ")			_			
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
		·-	_			
4 Total. Add lines 1 through 3 5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included					•	
on line 1 that exceeds 2% of the				ŀ		
amount shown on line 11,						
column (f)						
6 Public support. Subtract line 5 from line 4						
Section B. Total Support					·	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on				1		
securities loans, rents, royalties						
and income from similar sources						
Net income from unrelated business						
activities, whether or not the						
business is regularly carried on						
10 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV)				1		
11 Total support. Add lines 7 through 10	<u> </u>					
12 Gross receipts from related activities, e	•	•			12	
13 First five years. If the Form 990 is for t	-	first, second, thii	rd, fourth, or fifth to	ax year as a section	on 501(c)(3)	. \square
organization, check this box and stop Section C. Computation of Public		rcentage				▶∟_
<u>-</u>		<u>_</u>	- 1 (0)		T	
14 Public support percentage for 2010 (lin	• • •	-	column (t))		14	<u>%</u>
15 Public support percentage from 2009 \$		•	a line 12 and line 1	14 10 22 1/20/	15	<u>%</u>
16a 33 1/3% support test - 2010. If the org stop here. The organization qualifies a				14 IS 33 1/3% OF IT	iore, check this bo	х ало
b 33 1/3% support test - 2009. If the org		-		line 15 is 32 1/20/	or more chack th	us box
and stop here. The organization qualifi				mic 13 13 33 1/3%	i oi more, check th	P L
17a 10% -facts-and-circumstances test	• •			e 13, 16a, or 16h	and line 14 is 10%	or more.

Schedule A (Form 990 or 990-EZ) 2010

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Schedule A (Form 990 or 990 EZ) 2010 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

ection A. Public Support						
alendar year (or fiscal year beginning in) ► 📗	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization'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 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5 000 or 1% of the amount on line 13 for the year				_		
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6) ection B. Total Support						
alendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6 0a 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 June 30, 1975						
c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3 Total support (Add lines 9, 10c, 11, and 12)					<u></u>	
4 First five years. If the Form 990 is for the	ne organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organız	ation,
check this box and stop here						
ection C. Computation of Public					·	
5 Public support percentage for 2010 (lin		•	column (f))		15	
6 Public support percentage from 2009 S					16	
ection D. Computation of Invest			-		T T	
7 Investment income percentage for 201	•	•	ne 13, column (f))		17	•
8 Investment income percentage from 20					18	
9a 33 1/3% support tests - 2010. If the o more than 33 1/3%, check this box and						7 is not ⊾
b 33 1/3% support tests - 2009. If the o line 18 is not more than 33 1/3%, check	rganization did i	not check a box o	n line 14 or line 19a	a, and line 16 is m	nore than 33 1/3%,	
						_ '

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2010
Open to Public Inspection

Name of the organization

UNIDEL FOUNDATION, INC.

		Employer identification number						
ON,	INC.	51-6015046						
dvice	wined Funds or Other Cimiler Funds on Assounts							

Pai			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iir		(h) Funda and other accounts
	Takal according to the color	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	-	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's	<u> </u>	L Yes No
6	Did the organization inform all grantees, donors, and donor		•
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	
—	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	Yes No
Pai	rt II Conservation Easements. Complete if the or		Part IV, line 7
1	Purpose(s) of conservation easements held by the organiza		
	Preservation of land for public use (e g , recreation or		torically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year		· · · · · · · · · · · · · · · · · · ·
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	, ,	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structi	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
_	year >		
4	Number of states where property subject to conservation ea	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and	_	
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170	
0	and section 170(h)(4)(B)(ii)?	tion accoments in its review and even	Yes No
9	In Part XIV, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organizations conservation easements	ation's illiancial statements that describes	the organization's accounting for
Pai	rt III Organizations Maintaining Collections	of Art. Historical Treasures, or O	ther Similar Assets
	Complete if the organization answered "Yes" to Form		ino. Ommai Abboto.
1a	If the organization elected, as permitted under SFAS 116 (A		nent and balance sheet works of art
	historical treasures, or other similar assets held for public ex	·	· · · · · · · · · · · · · · · · · · ·
	the text of the footnote to its financial statements that desc		noe of public service, provide, in rail XIV,
b	If the organization elected, as permitted under SFAS 116 (A		and balance sheet works of art, historical
~	treasures, or other similar assets held for public exhibition, e		
	relating to these items	paddation, or resourch in farther and or par	blic service, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		▶ ¢
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	Loain provide
_	the following amounts required to be reported under SFAS		a gam, provide
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		► \$ ► \$
_	The second secon		
			

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Schedule D (Form 990) 2010

		FOUNDATION				<u>51-60</u>			
Par	t III Organizations Maintaining C	collections of Ar	t, Historical Tre	easures, or Oth	er Simil	ar Asset	S (conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant	use of its o	collection	ı items	ŝ
	(check all that apply)								
а	Public exhibition	d	Loan or excl	hange programs					
b	Scholarly research	е	Other						
C	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's exe	empt purpo	ose in Part	XIV		
5	During the year, did the organization solicit o				ar assets	_	1		
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes" to	o Form 990	i, Part IV, li	ne 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other assets no	t included		ר		,
	on Form 990, Part X?					L	Yes	<u> </u>	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:						
							Amount	<u>:</u>	
	Beginning balance				1c				
	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				. —
	Did the organization include an amount on Fe	orm 990, Part X, line	217			L.,	Yes		No
	If "Yes," explain the arrangement in Part XIV								
Par	t V Endowment Funds. Complete r	1			1				
	_	(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four	years	back_
1a	Beginning of year balance	205,732,284.	175,156,876.	278,129,108.					
b	Contributions								
C	Net investment earnings, gains, and losses	28,315,807.	38,577,895.	-93,969,655.	 ,				
d	Grants or scholarships	5,000,000.	7,620,000.	9,555,301.	 				
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses	384,675.	382,487.	280,460.					
g	End of year balance	228,663,416.	205,732,284.	175,156,876.					
2	Provide the estimated percentage of the yea								
a	Board designated or quasi-endowment	4.96	_%						
b	Permanent endowment ► 95.04	%							
С	·	%							
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiz	zation	Г		
	by						r	Yes	No
	(i) unrelated organizations						3a(i)	∤	X
_	(ii) related organizations		.				3a(ıi)		<u> </u>
b	If "Yes" to 3a(II), are the related organizations	<u>-</u>					3b		
4 Dar	Describe in Part XIV the intended uses of the								
Par	t VI Land, Buildings, and Equipm								
	Description of investment	(a) Cost or o basis (investin	, ,		Accumulate epreciation		(d) Book	< value	9
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment								
е	Other								
Total	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line 1	O(c))					0.

Schedule D (Form 990) 2010

18

Total expenses (Form 990, Part IX, column (A), line 25) Excess or (deficit) for the year Subtract line 2 from line 1 Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments 2 8,1 3 5,4 4 15,5 5 6 7	31,60 98,01 33,58 72,85
2 Total expenses (Form 990, Part IX, column (A), line 25) 2 8,1 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 5,4 4 Net unrealized gains (losses) on investments 4 15,5 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 7	98,01 33,58
3 5,4 4 Net unrealized gains (losses) on investments 4 15,5 5 Donated services and use of facilities 6 Investment expenses 6 Prior period adjustments 7	33,58
4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 6 Prior period adjustments 7	
5 Donated services and use of facilities 6 Investment expenses 6 Prior period adjustments 7	14,00
6 Investment expenses 6 7 Prior period adjustments 7	
7 Prior period adjustments 7	
· · · · · · · · · · · · · · · · · · ·	
8 Other (Describe in Part XIV) 8	72,85
	06,43
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 21, 0 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	00,43
	35,20
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	00/10
a Net unrealized gains on investments 2a 15,572,850.	
b Donated services and use of facilities 2b	
	72 05
	72,85 62,35
	04,33
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIV) 4b 769,242.	
	69,24
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 13,6 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	31,60
	28,77
	20,11
a Donated services and use of facilities 2a	
b Prior year adjustments 2b	
c Other losses 2c	
d Other (Describe in Part XIV)	
d Other (Describe in Part XIV) e Add lines 2a through 2d 2e	20 77
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 2d 2e 3 7,4	28,77
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1	28,77
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b	28,77
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d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b	69,24
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 2e 7, 4 4a 4c 7 5 8, 1	•
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information	69,2 <u>4</u> 98,01
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V	769,24 .98,01 /, line 4, Pa
d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information	769,24 .98,01 /, line 4, Pa
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d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional informative Part V, 1 ine 4: Unidel's endowment funds generate the income used for grants to the University of Delaware in accordance with the terms of Unidel's founding documents. Part X, Line 2: The Foundation has adopted the provisions of FASB Interpretation No. 48 "Accounting for Uncertainty in Income Taxes" (ASC 740-10-50). Management continually evaluates uncertain tax positions and expiring statutes of limitations, audits, proposed settlements, Schedule D (Fo	769,24 98,01 7, line 4, Pa lion or FASB

SCHEDULE I (Form 990) Department of the Treasury

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2010 Open to Public

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

2 Employer identification number accordance with Unidel's 51-6015046 education in Delaware in Inspection (h) Purpose of grant or assistance Support of higher X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any mission, recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance faculty Chair Multi-year Pledge for Endowment_ (f) Method of valuation (book, FMV, appraisal, other) air Market Value ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. (d) Amount of 7,000,000 cash grant (c) IRC section if applicable 501(c)(3) Enter total number of section 501(c)(3) and government organizations INC UNIDEL FOUNDATION, 51-6000297 Part I General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government University of Delaware Name of the organization 116 Hullihen Hall Newark, DE 19716 Internal Revenue Service Part II

Schedule I (Form 990) (2010)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

of Delaware as to the use of the funds and the accomplishment of the stated

objectives by project.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

UNIDEL FOUNDATION, INC.

Employer identification number 51-6015046

Form 990, Part VI, Section B, line 11: Draft versions of the Form 990 are distributed to all board members for approval prior to filing.

Form 990, Part VI, Section B, Line 12c: Unidel has no connections or ties with organizations in which its Trustees or employees have a financial interest. The University of Delaware has been the only beneficiary of Unidel's grants.

independent of both the Secretary / Treasurer and the Office Manager

(Unidel's only paid employees). Annually, the Trustees will make

compensation decisions for Unidel employees by approving the annual budget.

The Secretary / Treasurer recommends the compensation of the Office

Manager. Employees are not present when votes on compensation decisions

are taken, and those votes are formally documented in the meeting minutes

within one week of the meeting. The Trustees' decisions are based on their

assessment of employee performance and knowledge and experience with

compensation practices of other comparable organizations.

Form 990, Part VI, Section C, Line 19: While it is Unidel's understanding that there currently exists no legal requirement to make governing documents, conflict of interest policies or audited financial statements publicly available, the matter has not been considered, because Unidel has not received a request for information of this type. If such requests should be received, they will be evaluated by the Trustees on a

Case-by-case basis. In general, the Trustees believe that the information

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2010)

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Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization UNIDEL FOUNDATION, INC.	Employer identification number 51 – 6015046
contained in Form 990 is sufficient to meet the interests	of transparency,
and therefore sufficient to respond to most legitimate in	quiries.
Form 990, Part XI, line 5, Changes in Net Assets:	
Net unrealized gains on investments:	15,572,850.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990.

2010 Open to Public Inspection

OMB No 1545-0047

Employer identification number 51-6015046Direct controlling entity End-of-year assets <u>e</u> Total income € Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) Primary activity 9 INC. UNIDEL FOUNDATION, Name, address, and EIN of disregarded entity Name of the organization Part

Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) Part

(b)	Direct controlling entity				•
(e)	Public charity status (if section	501(c)(3))		509(a)(1) -	School N/A
(g)	Exempt Code section				501(c)(3)
(0)	Legal domicile (state or foreign country)				Delaware
(2)	Primary activity			Accredited University -	_
(a)	Name, address, and EIN of related organization		University of Delaware - 51-6000297	116 Hullihen Hall	Newark, DE 19716

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

032161 12-21-10 LHA

Schedule R (Form 990) 2010

51-6015046 Page 2

Schedule R (Form 990) 2010 UNIDEL FOUNDATION, INC.

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	nt income nrelated, m tax under	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V·UBI amount in box 20 of Schedule K·1 (Form 1065)	General or managing partner?	(j) (k) General or Percentage managing ownership Yes No
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	anizations Taxable a poration or trust durin	s a Corpo	oration or Trust (Co /ear)	omplete if the	organizatio	in answered "Yes"	to Form 990, Par	t IV, line 34	because it had o	ne or mor	e related
(a) Name, address, and EIN of related organization	Z -		(b) Primary activity		(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership
					-						
032162 12-21-10				26	:				Schedul	e R (Form	Schedule R (Form 990) 2010

Page 3

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Yes

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INC. Schedule R (Form 990) 2010 UNIDEL FOUNDATION,

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule
Part V Transac	Note. Complete lin
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	Sont
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L	grar
	Gift, grant, or capital contribution to other organization(s)

- c Gift, grant, or capital contribution from other organization(s)
 - - d Loans or loan guarantees to or for other organization(s)
- e Loans or loan guarantees by other organization(s)
- Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
 - h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)

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- k Performance of services or membership or fundraising solicitations for other organization(s)
- 1 Performance of services or membership or fundraising solicitations by other organization(s)
 - Sharing of facilities, equipment, mailing lists, or other assets
- Sharing of paid employees
- Reimbursement paid to other organization for expenses
- Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

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(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) University of Delaware - cash grant	В	5,000,000.5	
(2) University of Delaware - multi-year pledge	Д	11,000,000.	
(3)			
(4)			
(5)			
(9)			

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Schedule R (Form 990) 2010

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Schedule R (Form 990) 2010 UNIDEL FOUNDATION, INC.

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37) Part VI

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.

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(a)	(b)	(0)	Ð	(e)	€	(6)	Ē
Name, address, and EIN of entity	Primary activity	Legal domicile	Are all partners section 501(c)(3)	Share of end-of-		Code V-UBI amount in box 20	General or managing
family 10			Yes No		Yes No	of Schedule K-1 (Form 1065)	-
	1						
					-		
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Schedule R (Form 990) 2010

Schedule R	(Form 990) 2010	UNIDEL	FOUNDATION,	INC.	51-601504	6 Page 5
Part VII	(Form 990) 2010 Supplemental Info	rmation	1001		02 002002	<u> </u>
		mation				
	Complete this part to pro	ovide additional	information for response	es to questions on Schedule R (see instru	ctions)	
						
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Unidel Foundation, Inc. EIN #51-6015046 Summary of Realized Gains (Losses) Detail for Statement 1 - Part I, Line 7C Year Ended December 31, 2010

	Proceeds	Cost	Realized G/(L)
Eagle Capital Management	14,424,723	10,490,637	3,934,086
Friess Associates Small Cap	24,471	-	24,471
Brandywine High Yıeld	16,832,380	13,838,672	2,993,708
BNY Mellon	23,646,531	23,832,824	(186,293)
Gateway	2,000,000	1,783,571	216,429
PIMCO	5,487,887	5,218,446	269,441
Cohen & Steers Realty	-	· · · · · · -	, -
EuroPacific	5,512,113	4,209,837	1,302,276
Cramer-Rosenthal	1,000,000	880,810	119,190
=	68,928,105	60,254,797	8,673,308
	Part I, Line 7a	Part I, Line 7b	Part I, Line 7c