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Form **990**

Department of the Treasury Internal Revenue Service Return of Organization Exempt From Income Tax

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

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

2011

Open to Public Inspection

A Fo	r the 201		alendar year, or tax year beginning 07-01-2011 and ending 06-30-2012				
B Ch	eck if applic	cable	C Name of organization WISCONSIN ALUMNI RESEARCH FOUNDATION	D Emplo	yer ider	ntification number	
☐ Add	lress chang	je		39-08 E Tele ph	333612		
┌ Na	me change		Doing Business As	E Terepn	ione nui	mber	
┌ Init	ial return	ŀ	Number and street (or P O box if mail is not delivered to street address) Room/suite	(608)	263-2	500	
┌ _{Ter}	mınated		614 WALNUT STREET 13TH FLOOR	G Gross r	eceipts \$	316,462,024	
_	ended retu	ım .	City or town, state or country, and ZIP + 4				
_			MADISON, WI 53726				
j App	olication pe	naing					
				his a group iates?	return	for	
			614 WALNUT STREET 13TH FLOOR	iates		i res it no	
			MADISON, WI 53726 H(b) Are	all affiliates	include	ed?	
				No," attach	ı a lıst	(see instructions)	
I Ta	x-exempt :	status	F 501(c)(3)	oup exempt	ion nur	nber 🟲	
J W	ebsite: 🕨	- ww	VW WARF ORG				
K For	n of organi	zation	Corporation Trust Association Other L	formation 19	925 M	State of legal domicile WI	
			nmary				
			lescribe the organization's mission or most significant activities				
Governance	AS AN MO RES AN IN	A TWI D AID RGRII SEARC D USE /ESTI	OVIDE THE MARGIN OF EXCELLENCE THE UNIVERSITY OF WISCONSIN - MAD WENTY-FIRST CENTURY LEADER IN RESEARCH, DISCOVERY AND INNOVATION DISCOVERY AND INVERSITY OF WISCOMMERCIALIZE THE TEXT OF THE BENEFIT OF HUMANKIND-INVESTING THE PROCEEDS OF THE COSE THE ADDED VALUE FROM OUR INVESTMENTS TO PROMOTE, ENCOURAGE, TIGATION AND RESEARCH AT AND WITHIN THE UNIVERSITY OF WISCONSINUTE FOR RESEARCH	N ALSO P SCONSIN - CHNOLOG COMMERC , AND AID	ROMO - MADI Y ARIS IALIZA FURTH	TE, ENCOURAGE, SON AND THE SING FROM THAT ATION EFFORTS IER SCIENTIFIC	
2 6	_						
Activities &	2 Che	eck th	his box 🔰 if the organization discontinued its operations or disposed of more than	25% of its	net as	sets	
Ħ	3 Nur	mber o	of voting members of the governing body (Part VI, line 1a)		3	15	
र्			of independent voting members of the governing body (Part VI, line 1b)		4	14	
			ımber of ındıvıduals employed ın calendar year 2011 (Part V, lıne 2a)		5	119	
			imber of volunteers (estimate if necessary)		6	0	
	I		related business revenue from Part VIII, column (C), line 12		7a	95,705	
	b Net	unrei	elated business taxable income from Form 990-T, line 34		7b	-668,722	
				ior Year		Current Year	
<u>o</u>			ibutions and grants (Part VIII, line 1h)	50,978,		540,215	
ē		_	am service revenue (Part VIII, line 2g)	56,126,		40,119,675	
Revenue			tment income (Part VIII, column (A), lines 3, 4, and 7d)	266,202,		269,861,940	
_			revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	5,076,808		5,940,194	
				378,383,	880	316,462,024	
			s and similar amounts paid (Part IX, column (A), lines 1-3)	67,754,	998	56,194,313	
	14 B	enefit	its paid to or for members (Part IX, column (A), line 4)			0	
			es, other compensation, employee benefits (Part IX, column (A), lines				
8		-10)		11,323,760 1			
Expenses	16a P	rofess	ssional fundraising fees (Part IX, column (A), line 11e)	0			
.ਜ਼ੌ	b ⊤	otal fun	undraising expenses (Part IX, column (D), line 25) ▶0				
	17 C	there	expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	39,681,	851	41,103,242	
	18 T	otal e	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	118,760,	609	110,054,725	
	19 R	levenu	nue less expenses Subtract line 18 from line 12	259,623,	271	206,407,299	
<u>ෂ છ</u>			Beginni	ng of Curre	nt	End of Year	
Not Assets or Fund Balances				Year			
ASS Ba				,516,480,		2,586,641,488	
<u> </u>			liabilities (Part X, line 26)	481,777,		464,463,473	
				,034,703,	010	2,122,178,015	
			nature Block				
know know	ledge and ledge.	****					
Here			VEN MIXTACKI CFO/COO e or print name and title				
	 	-ype	·				
		eparer		Preparer (see inst		er identification number	
Paid		gnature	employed •	P000061			
-			name (or yours MCGLADREY LLP	EIN Þ			
Use (mployed),	- - 11/1			
	1	,	, and ZIP + 4 📍 8040 EXCELSIOR DR STE 300				
			s, and ZIP + 4 • 8040 EXCELSIOR DR STE 300 MADISON, WI 53717	Phone no	o 🕨 (60	08) 833-3361	

Forn	990 (2011) Page
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
_	Briefly describe the organization's mission
SEE	PART I, LINE 1
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O
7	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 94,311,402 including grants of \$ 55,343,632) (Revenue \$ 40,298,728)
	DIRECT FISCAL 2011-12 GRANTS OF \$55,343,632 WERE MADE TO THE UNIVERSITY OF WISCONSIN - MADISON THE DIRECT GRANTS SUPPORTED 60 NAMED PROFESSORSHIPS, 8 NEW KELLETT MID-CAREER FELLOWSHIPS AND 11 NEW ROMNES FACULTY FELLOWSHIPS BRINGING THE TOTAL OF SUCH FELLOWSHIPS TO 176 DURING THE YEAR IN ADDITION, 145 WARF GRADUATE FELLOWSHIPS WERE WHOLLY OR PARTIALLY FUNDED BY THE FOUNDATION DURING 2011-12 THE FOUNDATION THROUGH THE ENDOWMENT FOR EXCELLENCE FUNDED 46 INTERDISCIPLINARY FACULTY MEMBERS IN THE FOLLOWING AREAS, AGROECOLOGY, AFRICAN DISPORA, CHEMICAL BIOLOGY, CHEMISTRY, COGNITIVE SCIENCE, COMPUTATIONAL SCIENCES, COMPUTER ENGINEERING, COSMOLOGY, DISABILITY STUDIES, ENERGY SOURCES/POLICY, FOOD SAFETY, FUNCTIONAL ORGANIC MATERIALS, LAND USE, MATERIALS DESIGN, MATHEMATICAL PHYSICS, MINIMALLY INVASIVE MEDICAL TECHNIQUES, MOLECULAR BIOMETRY, NATIVE AMERICAN INDIAN STUDIES NEURODEGENERATIVE DISEASES, STEM CELL AND REGENERATIVE MEDICINE, STRUCTURAL BIOLOGY, SYMBIOSIS, SYSTEMS BIOLOGY, VITAMIN D AND WOMEN'S HEALTH THE PATENT AND LICENSING FUNCTION PRODUCED THE FOLLOWING RESULTS DURING THE YEAR THE UNIVERSITY OF MADISON DISCLOSED 372 INVENTIONS TO THE WISCONSIN ALUMNI RESEARCH FOUNDATION THE FOUNDATION FILED 247 U S PATENTS AND 257 FOREIGN PATENT APPLICATIONS ON BEHALF OF THE UNIVERSITY OF WISCONSIN DURING THE 2011-12 FISCAL YEAR 151 U S PATENTS AND 194 FOREIGN PATENTS WERE GRANTED TO THE FOUNDATION BY THE RESPECTIVE PATENT OFFICES UNDER FEDERAL LAW (I E THE BAYH DOLE ACT) UNIVERSITIES OR THEIR 501(C)(3) PATENT MANAGEMENT ORGANIZATIONS HAVE THE RIGHT TO TAKE TITLE TO INVENTIONS MADE IN THE COURSE OF UNIVERSITY RESEARCH FUNDED IN WHOLE OR IN PART BY AN AGENCY OF THE FEDERAL GOVERNMENT THE UNIVERSITY OF WISCONSIN - MADISON HAS DELEGATED THIS RIGHT TO WARF WARF IS THE DESIGNATED PATENT MANAGEMENT ORGANIZATION FOR THE UNIVERSITY OF WISCONSIN - MADISON OPTIONS AGREEMENTS AND 3 EQUITY AGREEMENTS WERE CONCLUDED WITH INDUSTRIAL FIRMS
4b	(Code) (Expenses \$ 450,681 including grants of \$ 450,681) (Revenue \$)
	THE MORGRIDGE INSTITUTE FOR RESEARCH WAS ESTABLISHED ON NOVEMBER 24, 2006 TO SUPPORT MEDICAL RESEARCH AND EDUCATION AT THE UNIVERSITY OF WISCONSIN-MADISON IN CONJUNCTION WITH THE UNIVERSITY OF WISCONSIN HOSPITALS AND CLINICS AUTHORITY. THE PRIMARY PURPOSES FOR THE INSTITUTE ARE AS FOLLOWS 1) COLLABORATION. SPARK RESEARCH COLLABORATIONS ACROSS THE SCIENCES AND THE UW-HOSPITAL THAT ACCELERATE BREAKTHROUGH DISCOVERIES TO IMPROVE HUMAN HEALTH 2) INTERACTION - FOSTER INTERACTION BETWEEN PUBLIC AND PRIVATE RESEARCH THAT BREAKS DOWN BARRIERS BETWEEN RESEARCHERS, LABS AND SCIENTIFIC DISCIPLINES 3) COMMUNITY - DEVELOP VIBRANT PUBLIC SPACE ON THE CAMPUS OF THE UNIVERSITY OF WISCONSIN-MADISON THAT BUILDS COMMUNITY AND ENGAGES THE PUBLIC IN THE SCIENCES AND HUMANITIES DURING FISCAL 2011-12, THE MORGRIDGE INSTITUTE FOR RESEARCH MAINTAINED THE FOLLOWING PROGRAMS REGENERATIVE BIOLOGY - TO UNDERSTAND AND IDENTIFY THE GENOMICS OF THE HUMAN EMBRYONIC STEM CELL- TO CREATE PHYSIOLOGICALLY STABLE, SAFE, AND FUNCTIONAL CELLS TO REPAIR OR REPLACE DISEASED CELLS IN HUMANSEDUCATION RESEARCH - SEEK TO IMPROVE PUBLIC UNDERSTANDING OF KEY CONCEPTS IN SCIENCE, BIOMEDICINE, AND HEALTHCARE BY BECOMING A "GO-TO" PLACE FOR GAMES AND SIMULATION-BASED LEARNING RESOURCES IN THE BIOMEDICAL AND HEALTH SCIENCESMEDICAL DEVICE - DEVELOP AN UNDERSTANDING OF MEDICAL PROBLEMS THAT CAN POTENTIALLY BE HELPED WITH MEDICAL DEVICES: INVENT, DESIGN, BUILD, ENHANCE, AND TEST MEDICAL DEVICES - MAKE THE TRANSLATION OF MEDICAL DEVICES TO THE CLINIC MORE EFFICIENT, EFFECTIVE, AND SAFEVIROLOGY - ADVANCE PRACTICAL UNDERSTANDING, PREVENTION, AND TREATMENT OF VIRUSES AND THEIR DISEASES-ENHANCE UNDERSTANDING OF THE BIOLOGY OF HEALTHY CELLS AND TISSUES- DEVELOP NEW TOOLS DERIVED FROM VIRUSES FOR USE IN BIOTECHNOLOGY, NANOTECHNOLOGY, AND MEDICINE PHARMACEUTICAL INFORMATICS - DEVELOP NEW TOOLS DERIVED FROM VIRUSES FOR USE IN BIOTECHNOLOGY, NANOTECHNOLOGY, AND MEDICINE PHARMACEUTICAL INFORMATICS - DEVELOP NEW TOOLS DERIVED FROM VIRUSES FOR USE IN BIOTECHNOLOGY, NANOTECHNOLO
4c	(Code) (Expenses \$ 400,000 including grants of \$ 400,000) (Revenue \$)
	WICELL'S PRIMARY PURPOSE IS TO SUPPORT HUMAN EMBRYONIC STEM CELL RESEARCH AT THE UNIVERSITY OF WISCONSIN - MADISON, PROVIDE SCIENTIFIC RESEARCH AND INVESTIGATION INTO THE CULTURE, DEVELOPMENT AND DIFFERENTIATION OF HUMAN AND ANIMAL EMBRYONIC STEM CELLS, DISTRIBUTE CELLS TEACH SCIENTISTS HOW TO SUCCESSFULLY CULTURE THE CELLS, EDUCATE THE GENERAL PUBLIC ABOUT THE SCIENCE, LICENSE THE TECHNOLOGY TO OTHER QUALIFIED RESEARCH ORGANIZATIONS TO PROMOTE ADDITIONAL SCIENTIFIC RESEARCH IN THIS AREA WICELL DISTRIBUTES HUMAN AND ANIMAL EMBRYONIC STEM CELLS AND LICENSES THE RELATED TECHNOLOGY ONLY TO QUALIFIED RESEARCH ORGANIZATIONS WHICH COMMIT TO CARRY ON SUCH RESEARCH IN AN ETHICAL MANNER THE SCIENTIFIC RESEARCH CARRIED OUT BY WICELL AND OTHERS WHO ACQUIRE CELLS AND THE RIGHT TO USE THE RELATED TECHNOLOGY HAVE AS THEIR OBJECTIVE THE EVENTUAL, USE OF CELLS TO TREAT OR PREVENT DISEASE AND TO ENABLE DEFECTIVE OR INJURED BODY PARTS OR SYSTEMS TO BE REPAIRED OR REPLACED, AS WELL AS TO UNDERSTAND EARLY HUMAN DEVELOPMENT WICELL LABORATORY OPERATIONS ARE LOCATED IN THREE SEPARATE FACILITIES 1) THE WICELL LABORATORY LOCATED AT 501 RESEARCH PARK BLVD IS USED FOR CYTOGENETIC TESTING 2) A LABORATORY LOCATED AT 505 ROS ROAD IN THE UW RESEARCH PARK IN MADISON, WISCONSIN IS USED FOR CELL DISTRIBUTION AND CORE SCIENTIFIC SUPPORT FOR STEM CELL ACTIVITIES AT THE UNIVERSITY OF WISCONSIN-MADISON 3) ANOTHER LABORATORY, ALSO LOCATED AT 505 ROSA ROAD, IS USED TO DERIVE AND CHARACTERIZE NEW, NON-FEDERALLY APPROVED, CELL LINES DURING FISCAL YEAR 2011-12 WICELL DISTRIBUTED 290 HUMAN CELL LINES TO COMMERCIAL AND ACADEMIC RESEARCH LABORATORIES BRINGING THE TOTAL CELL LINES DISTRIBUTED TO DATE TO 2,485 WICELL OPERATES ITS RESEARCH FACILITIES WITH 22 SCIENTISTS AND RESEARCH TECHNICIANS
	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	THE WISYS TECHNOLOGY FOUNDATION WAS ESTABLISHED IN MARCH 2000 TO PROVIDE TECHNOLOGY TRANSFER SERVICES FOR THE UNIVERSITY OF WISCONSIN CAMPUSES EXCLUDING THE UNIVERSITY OF WISCONSIN-MADISON THE MISSION OF WISYS IS TO PROVIDE PROTECTION FOR TECHNOLOGY THROUGH PATENTS OR OTHER METHODS, FOR UW SYSTEMS FACULTYS DISCOVERIES AND TO NEGOTIATE LICENSE AGREEMENTS THAT ENABLE INDUSTRY TO COMMERCIALIZE INVENTIONS FROM UW-SYSTEMS INSTITUTIONS DURING FISCAL 2011-12, WISYS REVIEWED 38 NEW INVENTION DISCLOSURES RECEIVED FROM UW-SYSTEM FACULTY AND ACCEPTED 14 OF THE DISCLOSURES FOR FURTHER STUDY AND PATENTING DURING FISCAL 2011-12, WISYS APPLIED FOR 21 U S PATENTS AND DERIVATIVES IN ADDITION WISYS RECEIVED 5 U S ISSUED PATENTS AND 4 FOREIGN ISSUED PATENTS WISYS COMPLETE 3 NEW LICENSE AND OPTIONS AGREEMENTS AND 4 NEW MATERIAL TRANSFER AGREEMENTS WISYS OPERATES ITS OFFICES LOCATED AT 614 WALNUT STREET, MADISON, WISCONSIN WITH 5 EMPLOYEES
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)

95,162,083

Total program service expenses►\$

Form **990** (2011)

Part TV	Checklist	of Required	Schedules
	CHECKHISE	JI REUUIIEU	Scileudies

			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 (see instructions)? 🕏	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		No
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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
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	Yes	
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		No
d	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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 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	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 line 25	24a	Yes	
b	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		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
b	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-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	_	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments 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 on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
la	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	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 or securities account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
ia	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
Pa	organization solicit any contributions that were not tax deductible?	0a		NO
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
_	Organizations that may receive deductible contributions under section 170(c).	7a		No
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	/a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	-		NI -
4	file Form 8282?	7c		<u> No</u>
a	11 Yes, indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
_	contract?	7e		No_
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No_
y	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
5	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	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			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
.2a	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 [12b]			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		
h	allocated to each state Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
				Νo
A-	Did the organization receive any payments for indoor tanning services during the tax year?	14a		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
4_				
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	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?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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	
Ь	Other officers or key employees of the organization	15b	Yes	
	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?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17				
4.0	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 990, and 990, T (501/c)			

- 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 made 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 made 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 FSTEVEN MIXTACKI

614 WALNUT STREET 13TH FLOOR

MADISON, WI 53726 (608) 261-1954

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 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, and **current** key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ 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

(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (d e thai	n one son er ar	e boo is bo nd a stee)	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organizations
(1) ERNEST A MICEK TRUSTEE/TREASURER	10 00	Х		х				15,000	25,000	0
(2) JOHN P MORGRIDGE TRUSTEE	10 00	х						0	0	0
(3) CAROLYN MARTIN TRUSTEE	10 00	х						10,000	0	0
(4) DORIS MEISSNER TRUSTEE	10 00	х						20,000	0	0
(5) THOMAS F PYLE TRUSTEE	10 00	х						20,000	1,500	0
(6) CAROL N SKORNICKA TRUSTEE	10 00	х						20,000	0	0
(7) JOAN E SPERO TRUSTEE	10 00	х						20,000	20,000	0
(8) JAN K VER HAGEN TRUSTEE	10 00	х						15,000	16,500	0
(9) GORDON F BRUNNER TRUSTEE	10 00	х						16,000	0	0
(10) CARL E GULBRANDSEN TRUSTEE/MANAGING DIRECTOR	40 00	х		х				593,216	20,000	211,356
(11) PATRICIA LIPTON TRUSTEE/SECRETARY	10 00	х		х				20,000	20,000	0
(12) KEITH R LOBO TRUSTEE	10 00	х						25,000	0	0
(13) PETER P TONG TRUSTEE	10 00	х						18,000	0	0
(14) NORMAN BOBINS TRUSTEE	10 00	х						15,000	0	0
(15) JOHN ROWE TRUSTEE/PRESIDENT	10 00	х		х				15,000	21,500	0
(16) DAVID WARD TRUSTEE	10 00	х						10,000	0	0
(17) STEVE MIXTACKI CHIEF FINANCIAL OFFICER	40 00			х				311,206	0	115,304

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (d e tha	n on son er a	e bo is b nd a stee	x, oth)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F Estim amount o compen from organizat relat	ated of other sation the tion and
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		,	organiza	
(18) LEIGH CAGAN DIR OF LICENSING	40 00				х			273,357	0		106,120
(19) MICHAEL FALK GENERAL COUNSEL/CHIEF OF STAFF	40 00				х			295,789	0		174,754
(20) CARRIE THOME DIRECTOR OF INVESTMENTS	40 00				х			463,760	0		156,226
(21) ALAIN HUNG ASSOC DIR OF INVESTMENTS	40 00					х		416,773	0		122,537
(22) KENNETH LUTZ CONTROLLER WARF	40 00					х		225,923	0		301,317
(23) STEPHANIE ADAMANY ASSOC GENERAL COUNSEL	40 00					х		194,016	0		76,942
(24) LAURA HEISLER DIRECT PROG DEVELOP'T	40 00					х		160,533	0		102,145
(25) KATHI STANEK CONTROLLER MIR	40 00					х		213,859	0		89,874
(26) HOWARD BREMER PATENT CONSULTANT-FORMER	10 00						х	118,741	0		6,207
1b Sub-Total							•				
c Total from continuation sheets to				•	•		•				
d Total (add lines 1b and 1c)							<u> </u>	3,506,173	124,500		1,462,782
Total number of individuals (inclu \$100,000 of reportable compens					ted a	ibove)) who	o received more tha	n		
										Yes	No
3 Did the organization list any form on line 1a? <i>If</i> "Yes," complete Sche										3 Yes	

			1 63	140
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3	Yes	
4	For any individual listed on line 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 or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
	Description of services	Compensation
QUARLES & BRADY LLP 411 E WISCONSIN AVE 2550 MILWAUKEE, WI 53202	LEGAL SERVICES	2,690,224
CPA GLOBAL LTD CASTLE ST ST HEILER, CHANNEL ISLANDS JE	PATENT LEGAL/ANNUITY SERVICE	1,325,901
ANDRUS SCEALES STARKE & SAWALL 100 E WISCONSIN AVE SUITE 1100 MILWAUKEE, WI 532024178	LEGAL SERVICES	766,345
JH FINDORFF & SON INC 300 S BEDFORD ST MADISON, WI 53703	BUILDING CONSTRUCTION	726,674
BOYLE FREDERICKSON 840 N PLANKINTON AVE MILWAUKEE, WI 53203	LEGAL SERVICES	723,781
3. Total number of independent contractors (including but not limited to these listed above)	who recoved more than	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►23

Part v		Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
ts ts	1a	Federated campaigns 1	a				
Contributions, gifts, grants and other similar amounts	b	Membership dues 1	,				
₽5		·					
ો સું	С	Fundraising events 10					
<u>#5,≒</u>	d	Related organizations 10	<u> </u>				
હ [°] E	е	Government grants (contributions) 16	e				
등장	f	All other contributions, gifts, grants, and	540,215		i		
更更	-	similar amounts not included above					
운동	g	Noncash contributions included in					
독교		lines 1a-1f \$	_				
ာပ	h	Total. Add lines 1a-1f	• • •	540,215			
a)			Business Code				
Ž	2a	ROYALTIES	900099	38,881,287	38,881,287		
ewe.	ь	LICENSING	900099				
<u>2</u> 2			900099	1,238,388	1,238,388		
<u> </u>	С						
erv	d		T				
S =	e						
Š.	f	All other program service revenue					
Program Serwce Revenue	_						
Δ	g	Total. Add lines 2a-2f	▶	40,119,675			
	3	Investment income (including divide	nds, interest				
		and other similar amounts)	▶ [28,625,142			28,625,142
	4	Income from investment of tax-exempt bond	l proceeds 🕒 🕨				
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents 2,621,084	(,				
	b	Less rental 0					
		expenses					
	С	Rental income 2,621,084 or (loss)					
	d	Net rental income or (loss)		2,621,084			2,621,084
		(ı) Securities	(II) O ther				
	7a	Gross amount 241,236,798					
		from sales of assets other					
		than inventory					
	b	Less cost or 0 other basis and					
		sales expenses					
	С	Gain or (loss) 241,236,798					
	d	Net gain or (loss)	[241,236,798			241,236,798
Other Revenue	8a	Gross income from fundraising events (not including \$					
उ >		of contributions reported on line 1c)					
å		See Part IV, line 18					
		a	'				
Ě	b	Less direct expenses b					
0	С	Net income or (loss) from fundraising	, F				
	9a	Gross income from gaming activities See Part IV, line 19					
	b	Less direct expenses b	,				
	С	Net income or (loss) from gaming act					
	10a	Gross sales of inventory, less returns and allowances					
	b c	Less cost of goods sold b Net income or (loss) from sales of in-	ventory •				
		Miscellaneous Revenue	Business Code				
	11a		900099	1,991,352			1,991,352
	_	MIR BLDG COSTS REIMBUR					
	b	MIR ADMIN REIMBURSEMEN	900099	1,053,000			1,053,000
	С	OTHERINCOME	900099	179,053	179,053		
	d	All other revenue		95,705		95,705	
	e	Total. Add lines 11a-11d		3,319,110			
	12	Total revenue. See Instructions .	•	316,462,024	40,298,728	95,705	275,527,376

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	heck if Schedule O contains a response to any question in this Part IX		(B)) (c)	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	56,194,313	56,194,313		_
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,615,982	713,794	1,902,188	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	7,338,851	3,613,569	3,725,282	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,096,937	519,699	577,238	
9	Other employee benefits	1,182,194	653,945	528,249	
10	Payroll taxes	523,206	260,240	262,966	
11	Fees for services (non-employees)				
а	Management	8,138		8,138	
b	Legal	957,952	957,952		
C	Accounting	199,078	5,748	193,330	
d	Lobbying	262,997		262,997	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	5,196,089		5,196,089	
g	Other	1,209,638	1,004,960	204,678	
12	Advertising and promotion	171,447	544	170,903	
13	Office expenses	302,477	192,666	109,811	
14	Information technology	533,090	107,290	425,800	
15	Royalties	8,335,854	8,335,854		
16	Occupancy	1,039,072	712,919	326,153	
17	Travel	155,458	80,653	74,805	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	4,928		4,928	
19	Conferences, conventions, and meetings	-28,669	-69,113	40,444	
20	Interest	6,766,519	6,694,978	71,541	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,899,454	5,700,344	199,110	
23	Insurance	334,374	181,668	152,706	
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	DOMESTIC LEGAL/PATENTS	3,319,998	3,319,998		
b	FOREIGN LEGAL/PATENTS	2,739,397	2,739,397		
c	TECH COMMERCIAL ACCEL	1,487,815	1,487,815		
d	FOREIGN PATENT MTC FEES	1,253,468	1,253,468		
e					
f	All other expenses	954,668	499,382	455,286	
25	Total functional expenses. Add lines 1 through 24f	110,054,725	95,162,083	14,892,642	0
26	Joint costs. Check here ► ☐ 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				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 9,229,781 11,815,079 1 1 732.583 131.544 2 2 3 50,989,417 3 29,879,960 2.763.067 210.153 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 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 6 Schedule L 7 8 9 225,177 9 431,244 Prepaid expenses and deferred charges 182.820.179 Land, buildings, and equipment cost or other basis *Complete* 10a Part VI of Schedule D 10a 10b 11,946,302 b Less accumulated depreciation 183,551,433 **10c** 170,873,877 322,047,292 289,449,230 11 11 1,847,638,058 12 Investments—other securities See Part IV, line 11 12 1,962,275,103 13 13 Investments—program-related See Part IV, line 11 . . 14 Intangible assets 14 96,718,504 15 124, 160, 596 15 2,516,480,610 2,586,641,488 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 5,452,485 17 7,942,623 17 Accounts payable and accrued expenses . 18 245,272,446 18 219.501.100 19 19 20 160.301.655 20 159,725,748 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 77,294,002 70,751,014 25 D 26 481,777,600 26 464, 463, 473 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,887,069,010 27 Unrestricted net assets 1,967,786,779 147,634,000 28 154,391,236 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 Total net assets or fund balances 2.034.703.010 33 2,122,178,015 34 Total liabilities and net assets/fund balances 2.516.480.610 2.586.641.488 34

Ра	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)			316,4	162,024
2	Total expenses (must equal Part IX, column (A), line 25)	2			54,725
3	Revenue less expenses Subtract line 2 from line 1	3		206,4	107,299
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	1		2,034,7	03,010
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-118,9	32,294
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6	5		2,122,1	.78,015
Par	t XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response to any question in this Part XII	•			
		г		Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	. [2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	!	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued in a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	ued			
За	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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	uired	3b		

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

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.

Inspection

WISCONSIN ALUMNI RESEARCH FOUNDATION 39-0833612 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) 1 A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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 331/3% 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 331/3% 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 Seesection 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 Type III - Other Type I 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) 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? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) Νo 11g(ii) (ii) a family member of a person described in (i) above? Νo

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		Is the organization in col (i) listed in your governing		organızatı col (ı) of	(v) you notify the ganization in col (i) of your support? (vi) Is the organization in col (i) organized in the U S ?		on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No			
(A) UNIVERSITY OF WISCONSIN- MADISON	396006492	2	Yes		Yes		Yes		55,343,632		
Total									55,343,632		

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

11g(iii)

Νo

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 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) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

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

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493319045142

OMB No 1545-0047

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 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

f the organization answered "	Yes," to Form 990, Part IV,	Line 3, or Form	990-EZ, Part V, line	e 46 (Political Campa	ign Activities),
then					
Section 501(c)(3) organizations	Complete Parts I-A and B Do	not complete Part l	-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 990-EZ, Part VI, line 47 (Lobbying Activities), then

- 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) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of t	he organization	
WISCONSIN	ALUMNI RESEARCH FOUNDATION	NC

Employer identification number

WIS	CONSIN	ALUMNI RESEARCH FOUNDATION	z mpro y cr rac		icion namb	
			39-0833612	<u> </u>		
Par	t I-A	Complete if the organization is exempt under section 501(c) or is a	section 52	7 org	janizatio	n.
1		de a description of the organization's direct and indirect political campaign activities on be position to candidates for public office in Part IV	half of or			
2	Politi	cal expenditures	F	\$		
3	Volur	nteer hours		_		
Par	t I-B	Complete if the organization is exempt under section 501(c)(3).				
1	Enter	the amount of any excise tax incurred by the organization under section 4955	▶	\$		
2	Enter	the amount of any excise tax incurred by organization managers under section 4955	▶	\$		
3	Ifthe	organization incurred a section 4955 tax, did it file Form 4720 for this year?			┌ Yes	┌ No
4a	Wasa	a correction made?			☐ Yes	┌ No
b	If"Y∈	es," describe in Part IV				
Par	t I-C	Complete if the organization is exempt under section 501(c) except	section 50	1(c)	(3).	

Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were 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 funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

	······································	ı agı
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 576	8 (election
	under section 501(h)).	

Α	Check	Γ	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
			expenses, and share of excess lobbying expenditures)

B Check
✓ If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	262,997	
c	Total lobbying expenditures (add lines 1a and 1b	o)	262,997	
d	Other exempt purpose expenditures		95,066,378	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	95,329,375	
f	Lobbying nontaxable amount Enter the amount f	1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 4720) reporting	□ Vas □ Na

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 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 Lobbying non-taxable amount 1,000,000 4,000,000 Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 340,584 235,428 351,485 262,997 Total lobbying expenditures 1,190,494 Grassroots non-taxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		((a)		b)
		Yes	No	Am	ount
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?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion
			_	Y	es 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?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
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 (see instructions)	5			

Part IV Supplemental Information

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 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319045142

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** WISCONSIN ALUMNI RESEARCH FOUNDATION 39-083<u>3612</u> Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ✓ Yes conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space

	1 reservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conservation contribution in the easement on the last day of the tax year	form of a co	nservation
			Held at the End of the Yea
а	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
С	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	
3	Number of conservation easements modified, transferred, released, extinguished, or termithe taxable year ►	nated by the	e organization during

3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year -				
4	Number of states where property subject to conservation easement is located ▶				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	┌ Yes	┌ No		
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year				
	▶ \$				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	┌ Yes	┌ No		
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, are balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describe organization's accounting for conservation easements.				

the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1
 - (ii) Assets included in Form 990, Part X

 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the
- following amounts required to be reported under SFAS 116 relating to these items
- a Revenues included in Form 990, Part VIII, line 1
- **b** Assets included in Form 990, Part X

the organization's accession and othe check all that apply) blic exhibition holarly research eservation for future generations e a description of the organization's control to be sold to raise funds rather than the secretary and Custodial Arrang Part IV, line 9, or reported an anion organization an agent, trustee, custodial on Form 990, Part X? "explain the arrangement in Part XIV sing balance to organization include an amount on Form organization	or receive donations to be maintained as ements. Compless out on Form 990 and complete the orm 990, Part X, ling	d e sin how s of ar part o ete if 90, Pa ediary follow e 21? n ans	w they t, hist of the the cart X for co	Loan of Other of further organizorganiz, line 2 ontributable	r the treasization zation tions	organization ures or othe n's collection on answere or other ass	rams r's ex r sim n? d "You ets r 1c 1d 1e 1f	empt purpo ular es" to For	Tm 990 Amou	Yes Yes Yes	No No No ears Back
holarly research eservation for future generations e a description of the organization's converted the year, did the organization solicition to be sold to raise funds rather than the solicition of the year and Custodial Arrangement IV, line 9, or reported an anorganization an agent, trustee, custoded on Form 990, Part X? "explain the arrangement in Part XIV arrangement in the year outlons during the year palance organization include an amount on Form "explain the arrangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds. Complete in the servangement in Part XIV Endowment Funds.	er receive donations to be maintained as ements. Complete out on Form 990 and complete the error of the organization organiza	e sof ar part of the part of t	t, history the control of the contro	Other further torical torica	r the streasization Zation Z1.	organization ures or othe 's collection n answere or other ass	rsim 1? d "You ets r 1c 1d 1e 1f	es" to For	Г тм 990 А мо ц	Yes unt Yes	┌ No
eservation for future generations e a description of the organization's converted to be sold to raise funds rather than the secretary and Custodial Arrang Part IV, line 9, or reported an anorganization an agent, trustee, custodial on Form 990, Part X? "explain the arrangement in Part XIV and balance on during the year putions during the year organization include an amount on Form," explain the arrangement in Part XIV and balance organization include an amount on Form," explain the arrangement in Part XIV Endowment Funds. Complete in Endowment Funds.	er receive donations to be maintained as ements. Complete out on Form 990 and complete the error of the organization organiza	s of ar part of the part of th	t, history the control of the contro	organiz organiz organiz organiz ontribut able	r the treasization zation zations	ures or othen's collection on answered or other ass	r sim n? d "Ye ets r 1c 1d 1e 1f	es" to For	Г тм 990 А мо ц	Yes unt Yes	┌ No
the year, did the organization's control to be sold to raise funds rather than the sold and an arrangement in Part XIV and balance to the sold that the sold t	er receive donations to be maintained as ements. Complete out on Form 990 and complete the error of the organization organiza	s of ar part of the part of th	t, history the control of the contro	torical torica	treasi zation zatio 21. tions	ures or othen's collection on answered or other ass	r sim n? d "Ye ets r 1c 1d 1e 1f	es" to For	Г тм 990 А мо ц	Yes unt Yes	┌ No
the year, did the organization solicit of to be sold to raise funds rather than to be sold to raise funds an analog and the sold on Form 990, Part X? "explain the arrangement in Part XIV and be sold on sold the year outlons during the year of balance to organization include an amount on Form organization include an amount on Form organization the arrangement in Part XIV between the part of th	er receive donations to be maintained as ements. Complete out on Form 990 and complete the error of the organization organiza	s of ar part of the part of th	t, history the control of the contro	torical torica	treasi zation zatio 21. tions	ures or othen's collection on answered or other ass	r sim n? d "Ye ets r 1c 1d 1e 1f	es" to For	Г тм 990 А мо ц	Yes unt Yes	┌ No
Escrow and Custodial Arrang Part IV, line 9, or reported an an organization an agent, trustee, custod ed on Form 990, Part X? " explain the arrangement in Part XIV ning balance ons during the year outions during the year obtains during the year organization include an amount on Form " explain the arrangement in Part XIV Endowment Funds. Complete	ements. Complements on Form 99 lian or other intermed and complete the organization of the organization	part of ete if 90, Pare ediary follow	the cart X for co	organiz organiz , line 2 ontribut able	zation zatio 21. tions	or other ass	ets r 1c 1d 1e 1f	es" to For	Amou 10.	Yes unt Yes	┌ No
Part IV, line 9, or reported an an organization an agent, trustee, custod of on Form 990, Part X? "explain the arrangement in Part XIV along balance on during the year obtains during the year obtains during the year organization include an amount on Formatting," explain the arrangement in Part XIV Endowment Funds. Complete in	nount on Form 99 Ilian or other intermoder I and complete the orm 990, Part X, lin If the organization	ediary follow e 21?	ert X	, line 2 ontribut able	21. tions	or other ass	1c 1d 1e 1f	t IV, line	Amou	Yes unt Yes	┌ No
ed on Form 990, Part X? "explain the arrangement in Part XIV ning balance outions during the year balance corganization include an amount on Form "explain the arrangement in Part XIV Endowment Funds. Complete	orm 990, Part X, ling	follow e 21? n ans	wing ta	able	s" to	Form 990,	1c 1d 1e 1f	t IV, line	Amou	unt Yes	┌ No
ning balance ons during the year outions during the year or balance or organization include an amount on Form of explain the arrangement in Part XIV Endowment Funds. Complete	orm 990, Part X, lin / if the organizatio	e 21? n ans	swere	ed "Yes			1d 1e 1f		Г 10.	Yes	
ons during the year putions during the year palance organization include an amount on Fo ," explain the arrangement in Part XIV Endowment Funds. Complete	f the organizatio	n ans	were				1d 1e 1f		Г 10.	Yes	
ons during the year putions during the year palance organization include an amount on Fo ," explain the arrangement in Part XIV Endowment Funds. Complete	f the organizatio	n ans	were				1d 1e 1f		10.		
outions during the year y balance e organization include an amount on Fo ," explain the arrangement in Part XIV Endowment Funds. Complete	f the organizatio	n ans	were				1e 1f		10.		
p balance e organization include an amount on Fo ," explain the arrangement in Part XIV Endowment Funds. Complete i	f the organizatio	n ans	were				1f		10.		
e organization include an amount on Fo ," explain the arrangement in Part XIV Endowment Funds. Complete i	f the organizatio	n ans	were				Par		10.		
," explain the arrangement in Part XIV Endowment Funds. Complete	f the organizatio	n ans	were						10.		
Endowment Funds. Complete	f the organizatio									:)Four Ye	ears Back
•										:)Four Ye	ars Back
ing of year balance	(a)carrent rear	(5	<i>y</i> i iioi i	Cui							Jaio Dack
				1	(-):-		-		Jack (C	,	
							+				
_											
expenditures for facilities											
istrative expenses											
year balance											
e the estimated percentage of the yea	r end balance held	as		<u> </u>			•		<u> </u>		
designated or quasi-endowment 🕨											
nent endowment 🕨											
ndowment 🕨											
ere endowment funds not in the posse: zation by	ssion of the organiz	ation	that a	re held	landa	admınıstered	d for	the		Yes	No
elated organizations									3a(i)		
									3a(ii)		
	•				•		•		3b		
					0						
Land, Buildings, and Equipme	ent. See Form 99	1U, Pa							<u>. T</u>		
Description of property								` '		(d) Boo	ok value
						15,340	,740			1	5,340,740
s		•				142,371	,139	5,43	9,229	13	6,931,910
ld improvements						924	,429	73	1,233		193,196
ent						24,183	,871	5,77	5,840	14	8,408,031
											
nes 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B)), line	10(c).)				▶		17	0,873,877
	ment earnings or losses or scholarships expenditures for facilities ograms extrative expenses year balance ethe estimated percentage of the year designated or quasi-endowment endowment endowment ere endowment funds not in the posses tation by elated organizations " to 3a(ii), are the related organization be in Part XIV the intended uses of the Land, Buildings, and Equipme Description of property Seld improvements International Control of the posses Seld improvements Description of property	ment earnings or losses	ment earnings or losses	ment earnings or losses	ment earnings or losses	ment earnings or losses	positions	ment earnings or losses	ment earnings or losses	ment earnings or losses	ment earnings or losses or scholarships or sch

Part VII Investments—Other Securities. See F (a) Description of security or category	Form 990, Part X, line 12		d of
(including name of security)	(b) Book value		d of valuation - year market value
(1)Financial derivatives			
(2)Closely-held equity interests (3)Other			
(A) MONEY MARKET FUNDS	439,445,604		F
(B) HEDGE FUNDS	709,621,377		F
(C) INVESTMENT IN WICELL	2,474,006		F_
(D) INVESTMENT IN WISYS	980,928		F_
(E) FIXED INCOME	538,684,730		F_
(F) PRIVATE EQUITY - LTD PS	231,627,435		F_
(G) INVESTMENT IN MORGRIDGE	16,878,412		F
(H) INVESTMENT IN WARF STARTUP COMPANIES	16,430,012		F
(I) VENTURE CAPITAL PARTNERSHIPS	6,132,599		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,962,275,103	_	
Part VIII Investments—Program Related. See			d of valuation
(a) Description of investment type	(b) Book value		year market value
			_
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			_
Part IX Other Assets. See Form 990, Part X, line	e 15		
(a) Description			(b) Book value
7.1. (0)	- ,		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15			
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
ROYALTIES PAYABLE	252,162		
DUE TO BROKER	10,869,104		
SECURITIES LENDING CASH COLLATERAL			
OBLIGATION	62,445,851		
LIABILITY FOR PENSION BENEFITS	3,726,885		
			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) 🕨	77,294,002		

Par	It XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	316,462,024
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	110,054,725
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	206,407,299
4	Net unrealized gains (losses) on investments	4	-89,811,449
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-29,120,845
9	Total adjustments (net) Add lines 4 - 8	9	-118,932,294
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	87,475,005
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	oer R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	212,553,581
2	A mounts 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) 2d		
e	Add lines 2a through 2d	2e	-89,811,449
3	Subtract line 2e from line 1	3	302,365,030
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) 4b 14,096,994		
c	Add lines 4a and 4b	4c	14,096,994
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	316,462,024
Part	XIIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial	1	95,957,731
2	statements	<u> </u>	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	95,957,731
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ا ا	33,337,731
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	1	
c	Add lines 4a and 4b	4c	14,096,994
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	110,054,725
	rt XIV Supplemental Information		1 0,55 1,7 25
	• •		

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 4, Part X, 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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE FOUNDATION, WICELL, WISYS, PROPERTIES, AND MORGRIDGE HAVE BEEN GRANTED AN EXEMPTION FROM FEDERAL INCOME TAX UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE UNDER THIS EXEMPTION, INCOME TAX IS PAID ONLY ON NET UNRELATED BUSINESS INCOME THE ORGANIZATIONS ARE ALSO EXEMPT FROM WISCONSIN INCOME AND REAL ESTATE TAX THE ORGANIZATION FOLLOWS THE GUIDANCE RELATIVE TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE ORGANIZATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE ORGANIZATION AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME (UBIT) ANY TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE ORGANIZATION FILES FORMS 990 IN THE US FEDERAL JURISDICTION AND THE STATE OF WISCONSIN WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2009
PART XI, LINE 8 - OTHER ADJUSTMENTS		ALLOCATION OF INVEST APPREC TO DEPT ROYALTY TRUSTS,UNIVERSITY & DONOR FUNDS -8,274,314 EQUITY GAIN IN SUBSIDIARIES -20,425,999 APPRECIATION IN DONOR DIRECTED FUNDS 6,714,417 CHANGE IN MINIMUM PENSION OBLIGATION -7,134,949 TOTAL TO SCHEDULE D, PART XI, LINE 8 -29,120,845
PART XII, LINE 4B - OTHER ADJUSTMENTS		SHARED ROYALTIES NETTED AGAINST INCOME IN AUDIT 8,335,853 REIMBURSED EXPENSES FROM AFFILIATE NETTED AGAINST EXPENSES IN AUDIT 5,665,436 UBIT REVENUE RECORDED IN EXPENSES IN AUDIT 95,705
PART XIII, LINE 4B - OTHER ADJUSTMENTS		SHARED ROYALTIES NETTED AGAINST EXPENSES IN AUDIT 8,335,853 REIMBURSED EXPENSES FROM AFFILIATE NETTED AGAINST EXPENSES IN AUDIT 5,665,436 UBIT REVENUE RECORDED IN EXPENSES IN AUDIT 95,705

Additional Data

Software ID: Software Version:

EIN: 39-0833612

Name: WISCONSIN ALUMNI RESEARCH FOUNDATION

Form 990, Schedule D, Part VII - Investments— Other Securities

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
MONEY MARKET FUNDS	439,445,604	F
HEDGE FUNDS	709,621,377	F
INVESTMENT IN WICELL	2,474,006	F
INVESTMENT IN WISYS	980,928	F
FIXED INCOME	538,684,730	F
PRIVATE EQUITY - LTD PS	231,627,435	F
INVESTMENT IN MORGRIDGE	16,878,412	F
INVESTMENT IN WARF STARTUP COMPANIES	16,430,012	F
VENTURE CAPITAL PARTNERSHIPS	6,132,599	F

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Part I General Information on Grants and Assistance

Schedule I (Form 990)

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

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

► Attach to Form 990

OMBNo 1545-0047

2011

DLN: 93493319045142

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization
WISCONSIN ALUMNI RESEARCH FOUNDATION

Employer identification number

39-0833612

Form 990, Part I	V, line 21 for any	o Governments and recipient that receive 90) if additional space	d more than \$5,000	. Check this box if no	o one recipient re	ceived more than \$5,	000. Use
a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
) UNIVERSITY OF SCONSIN - MADISON 25 W JOHNSON ST ADISON, WI 53706	39-6006492	501(C)(3)	55,343,632				SEE PROGRAM SERVICE ACCOMPLISHMENT: FORM 990, PART III LINE 4A
) MORGRIDGE STITUTE FOR SSEARCH330 N RCHARD ST ADISON,WI 537151119	20-8325570	501(C)(3)	450,681				SEE PROGRAM SERVICE ACCOMPLISHMENT: FORM 990, PART III LINE 4B
) WICELL RESEARCH STITUTE INC614 ALNUT ST 13TH FLOOR ADISON,WI 53726	39-1972235	501(C)(3)	400,000				SEE PROGRAM SERVICE ACCOMPLISHMENT: FORM 990, PART III LINE 4C

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.									
(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 1) UW - THE UNIVERSITY PROVIDES WARF WITH AN ANNUAL SUMMARY OF GRANT EXPENDITURES THAT DETAILS HOW THE GRANT FUNDS WERE SPENT FROM THE PREVIOUS YEAR 2) MIR & WICELL - WARF HAS ACCESS TO THE FINANCIAL STATEMENTS OF THESE ORGANIZATIONS ALSO, THE WARF MANAGING DIRECTOR CARL GULBRANDSEN SITS ON THE BOARD OF MIR AND WICELL

DLN: 93493319045142

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

VVIS	SCONSIN ALUMNI RESEARCH FOUNDALION	39-0833612			
Pa	art I Questions Regarding Compensation	1			
				Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of t 990, Part VII, Section A, line 1a Complete Part III to provide an				
	First-class or charter travel Hous	ing allowance or residence for personal use			
		nents for business use of personal residence			
	<u> </u>	th or social club dues or initiation fees			
	Discretionary spending account Person	onal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain				
2	Did the organization require substantiation prior to reimbursing or officers, directors, trustees, and the CEO/Executive Director, reg		2		
3	Indicate which, if any, of the following the organization uses to est organization's CEO/Executive Director Check all that apply	·			
		en employment contract			
	·	pensation survey or study oval by the board or compensation committee			
	p Total 990 of other organizations p. Appr	ovar by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Sector a related organization $% \left(1,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0$	tion A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		No
b	Participate in, or receive payment from, a supplemental nonqualifi	ed retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compens	sation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the appl	icable amounts for each item in Part III			
_	Only 501(c)(3) and 501(c)(4) organizations only must complete li				
5	For persons listed in form 990, Part VII, Section A, line 1a, did the compensation contingent on the revenues of	e organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line 1a, did the compensation contingent on the net earnings of	e organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did to payments not described in lines 5 and 6? If "Yes," describe in Pa		7		No
8	Were any amounts reported in Form 990, Part VII, paid or accure subject to the initial contract exception described in Regs section in Part III				N
9	If "Yes" to line 8, did the organization also follow the rebuttable pi	resumption procedure described in Regulations	8		No

section 53 4958-6(c)?

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) CARL E GULBRANDSEN	(ı) (ıı)	476,216 20,000	117,000 0	0	181,362 0	29,994 0	804,572 20,000		
(2) STEVE MIXTACKI	(ı) (ıı)	265,206 0	46,000 0	0 0	90,430	24,874 0	426,510 0		
(3) LEIGH CAGAN	(ı) (ıı)	238,857 0	34,500 0	0	80,763 0	25,357 0	379,477 0		
(4) MICHAEL FALK	(ı) (ıı)	258,221 0	37,568 0	0	149,071	25,683 0	470,543 0		
(5) CARRIE THOME	(ı) (ıı)	303,760 0	160,000 0	0	128,108	28,118 0	619,986 0		
(6) ALAIN HUNG	(ı) (ıı)	271,773 0	145,000 0	0	95,100 0	27,437 0	539,310 0		
(7) KENNETH LUTZ	(ı) (ıı)	200,933	24,990 0	0	276,648 0	24,669 0	527,240 0		
(8) STEPHANIE ADAMANY	(ı) (ıı)	170,761 0	23,255 0	0	53,275 0	23,667 0	270,958 0		
(9) LAURA HEISLER	(ı) (ıı)	142,459 0	18,074 0	0	78,424 0	23,721 0	262,678 0		
(10) KATHI STANEK	(ı) (ıı)	186,259 0	27,600 0	0	65,379 0	24,495 0	303,733 0		
(11) HO WARD BREMER	(ı) (ıı)	117,741	1,000 0		0	6,207 0	124,948 0		
	'								
	_ '								

Schedule J (Form 990) 2011 Page **3**

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493319045142

2011

Open to Public Inspection

Internal Revenue Service

Department of the Treasury

	Name of the organization WISCONSIN ALUMNI RESEARCH FOUNDATION													
WIS	CONSIN ALUMNI RESEARCH FO	OUNDATION							3	9-083	3612			
Pa	art I Bond Issues	-							,					
	!								(a) De	feased		On alf of		Pool
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pr	ce ((f) Descriptio	escription of Purpose		Iss			financin	
										No	Yes	No	Yes	No
	COMMUNITY DEVELOPMENT AUTHORITY - CITY OF					loca	FOR CONSTRUCTING A RESEARCH FACILITY							1 1
Α	MADISON	39-6006968		12-17-2009	161,453,	⁴⁷⁰ LOC	CATED ON T	HE CAMPUS	X		X		X	
	Proceeds					OF	UW-MADISO	V-MADISON						
Fa	rt II Proceeds							В		С			D	
1	A mount of bonds retired				-	<u> </u>								
2 A mount of bonds defeased														
3	Total proceeds of issue				16	51,453,4	70							
4	4 Gross proceeds in reserve funds					• •								
5	Capitalized interest from proce	- eeds												
6	Proceeds in refunding escrow													
7	Issuance costs from proceeds					2,569,756								
8	Credit enhancement from proce	eeds												
9	Working capital expenditures fi	rom proceeds												
10	Capital expenditures from proc	ceeds			15	151,462,411								
11	Other spent proceeds													
12	O ther unspent proceeds				7,421,303									
13	Year of substantial completion	ı			2010						•			
					Yes	No	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part of a current refunding issue?				X									
15	15 Were the bonds issued as part of an advance refunding issue?				Х									
16	16 Has the final allocation of proceeds been made?				Х									
Does the organization maintain adequate books and records to support the final allocation of proceeds?				x										
Par	t IIII Private Business Us	se												
							B		C	NI.		D		
	Was the organization a partner	r in a nartherchin oi	ra member of an I	I C which owned	Yes	No	Yes	No	Yes		No	Yes	+	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?				X							\perp		

financed property?

Are there any lease arrangements that may result in private business use of bond-

Χ

	edule K (Form 990) 2011									Page 2
Par	Private Business Use (Continued)			A		В	I	C		D
			Yes	No	Yes	No No	Yes	No	Yes	No No
3a	Are there any management or service contracts that may result in private use?	business	1.00	X		110	105		100	
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business use financed property?	e of bond-	Х							
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper		Х							
4	Enter the percentage of financed property used in a private business use b other than a section 501(c)(3) organization or a state or local government			0 %						
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government			0 %						
6 Total of lines 4 and 5				0 %						
7	Has the organization adopted management practices and procedures to en post-issuance compliance of its tax-exempt bond liabilities?	sure the	Х							
Par	rt IV Arbitrage	T								
		A Year			В		С	N1-	D	NI -
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	X	Yes	No	Y	es	No	Yes	No No
2	Is the bond issue a variable rate issue?		Х							
	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X							
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
 4a	Were gross proceeds invested in a GIC?		X							
b	Name of provider		1		ı					
С	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									

Part V Procedures To Undertake Corrective Action

Did the bond issue qualify for an exception to rebate?

Were any gross proceeds invested beyond an available temporary

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary

Χ

Χ

Part VI Supplemental Information

5

period?

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Return Reference	Explanation
SCH K, PART	PRIVATE	ALTHOUGH THERE IS PRESENTLY NO PRIVATE BUSINESS USE OF THE BOND-FINANCED PROPERTY, A SIGNIFICANT PORTION OF THE PROPERTY IS
III, #2	BUSINESS	CURRENTLY OCCUPIED BY THE MORGRIDGE INSTITUTE FOR RESEARCH, INC , A 501(C)(3) ORGANIZATION ("MORGRIDGE") AS A MEDICAL
	USE	RESEARCH ORGANIZATION THAT COLLABORATES WITH PRIVATE INDUSTRY IT IS POSSIBLE THAT SOME OF THE ACTIVITY ON THE PROPERTY
		COULD RESULT IN PRIVATE BUSINESS USE HOWEVER, MORGRIDGE IS AWARE OF THE LIMITATIONS ON PRIVATE USE, AND PROCEDURES HAVE
		BEEN PUT IN PLACE FOR WARF AND MORGRIDGE TO TRACK PRIVATE USE TO ENSURE COMPLIANCE WITH BOND REQUIREMENTS

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NonCash Contributions

DLN: 93493319045142

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Department of the Treasury ► Attach to Form 990. Internal Revenue Service

Name of the organization WISCONSIN ALUMNI RESEARCH FOUNDATION

Employer identification number

39-0833612

Pa	rt I Types of Property				33 0033012			
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(d Method of d contribution	etermı	_	
1	Art—Works of art			- 9				
	Art—Historical treasures .							
	Art—Fractional Interests							
4	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	Х	2	0	FMV			
	Securities—Closely held stock $oldsymbol{.}$							
11	Securities—Partnership, LLC,							
12	or trust interests							
	Qualified conservation							
13	contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ ()							
26	Other ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization compl				29			
	Tor winer the organization compr	ctca i oiiii (5205,1 alt IV, Dollee Acki	iowicagement			Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I. lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
h	If "Yes," describe the arrangement					30a		
31	Does the organization have a gif			review of any non-standard	contributions?	31		No
322	Does the organization hire or us							
JZd	contributions?		· · · · · · · ·	· · · · · · · · · · · ·		32a		No
b	If "Yes," describe in Part II							_
33	If the organization did not report	revenues	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II							

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.

Identifier	Return Reference	Explanation
NON REPORTING OF REVENUE	, , -	THE ORGANIZATION RECEIVED SHARES OF STOCK VALUED AT \$16,744,036 TO OFFSET A PLEDGE RECEIVABLE THAT WAS RECORDED AS REVENUE IN THE PRIOR YEAR

Schedule M (Form 990) 2011

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As Filed Data -

DLN: 93493319045142

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization WISCONSIN ALUMNI RESEARCH FOUNDATION	Employer identifi	cation number
	39-0833612	

Identifier	Return Reference	Explanation
	SECTION B, LINE 11	THE FORM 990 IS INITIALLY REVIEWED AND APPROVED BY THE CFO, CONTROLLER AND OTHER MEMBERS OF THE MANAGEMENT TEAM AN ELECTRONIC COPY OF THE FINAL VERSION OF THE FORM 990 IS SUBSEQUENTLY PROVIDED TO THE BOARD OF TRUSTEES FOR REVIEW PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE WARF MANAGING DIRECTOR REQUIRES THAT THE TRUSTEES REVIEW THE CONFLICT OF INTEREST POLICY AND COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY WARF REVIEWS CONFLICT MATTERS AS DISCLOSED THROUGH THE ANNUAL DISCLOSURE AND ON A ROLLING BASIS AND CONSIDERS THEM IN THE MATTER PROSCRIBED IN ITS CONFLICT POLICY A CONFLICT OF INTEREST COMMITTEE OF THE BOARD OF TRUSTEES ALSO MEETS AS APPROPRIATE TO CONSIDER CONFLICT SITUATIONS ALL WARF EMPLOYEES SIGN A CONFLICT OF INTEREST AGREEMENT THE AGREEMENT REQUIREMENTS ARE REVIEWED ANNUALLY AT AN EMPLOYEE MEETING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	A) WARF RETAINS A MADISON, WISCONSIN-BASED INDEPENDENT HUMAN RESOURCES CONSULTING FIRM SPECIALIZING IN COMPENSATION ACTIVITIES TO REVIEW COMPENSATION FOR THE CEO, TOP MANAGEMENT, OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION THE CONSULTANT IS RETAINED BY AND REPORTS TO THE CHAIR OF THE SALARY AND FRINGE BENEFIT COMMITTEE AND TO THE TRUSTEE PRESIDENT B) EACH YEAR IN MID AUGUST THE CONSULTANT PROVIDES COMPARATIVE COMPENSATION DATA TO THE TRUSTEE PRESIDENT AND THE SALARY AND FRINGE BENEFITS COMMITTEE. C) THE TRUSTEE PRESIDENT REVIEWS A WRITTEN SUMMARY OF EXECUTIVE ACCOMPLISHMENTS FOR THE FISCAL YEAR THIS INFORMATION IS SHARED WITH THE SALARY AND FRINGE BENEFITS COMMITTEE AND WITH THE BOARD'S EXECUTIVE COMMITTEE. D) IN LATE AUGUST OR EARLY SEPTEMBER THE SALARY AND FRINGE BENEFITS COMMITTEE HOLDS A TELECONFERENCE TO DISCUSS THE GENERAL DIRECTION AND SCOPE/RANGE OF EXECUTIVE COMPENSATION THE OUTSIDE CONSULTANT PARTICIPATES IN THE DISCUSSION E) IN MID SEPTEMBER THE BOARD PRESIDENT AND THE CHAIR OF THE SALARY AND FRINGE BENEFIT COMMITTEE DISCUSS THE EXECUTIVE EVALUATION AND DETERMINE THE COMPENSATION ADJUSTMENT F) THE SALARY AND FRINGE BENEFITS COMMITTEE REVIEWS THE RECOMMENDATION IN (E) ABOVE AND APPROVES FINAL COMPENSATION ADJUSTMENTS G) THE CHAIRMAN OF THE SALARY AND FRINGE BENEFITS COMMITTEE REVIEWS THE COMPENSATION ADJUSTMENTS WITH THE FULL BOARD AT THE FALL TRUSTEE MEETING H) THE OUTSIDE CONSULTANT PROVIDES A LETTER TO THE CHAIR OF THE SALARY AND FRINGE BENEFIT COMMITTEE DESCRIBING THE CONSULTANT'S ROLE IN ESTABLISHING THE REBUTTABLE PRESUMPTION OF REASONABLENESS STANDARD UNDER THE INTERMEDIATE SANCTIONS REGULATIONS AND HOW THE CONSULTANT PROVIDED THE ANALYSIS TO DETERMINE THE REASONABLENESS OF THE EXECUTIVE COMPENSATION PACKAGE.

	ldentifier	Return Reference	Explanation
I		FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE NOT MADE AVAILABLE

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -89,811,449 ALLOCATION OF INVEST APPREC TO DEPT ROYALTY TRUSTS, UNIVERSITY & DONOR FUNDS -8,274,314 EQUITY GAIN IN SUBSIDIARIES -20,425,999 APPRECIATION IN DONOR DIRECTED FUNDS 6,714,417 CHANGE IN MINIMUM PENSION OBLIGATION -7,134,949 TOTAL TO FORM 990, PART XI, LINE 5 -118,932,294

Identifier	Return Reference	Explanation					
	FORM 990, PART XII, LINE 2C	THERE WERE NO CHANGES FROM THE PRIOR YEAR					

ldentifier	Return Reference	Explanation
FILING OF FORM 8621 ON BEHALF OF WISCONSIN ALUMNI RESEARCH ORGANIZATION	FORM 8621	WISCONSIN ALUMNI RESEARCH FOUNDATION OWNS A STAKE IN THE FOLLOWING PARTNERSHIPS WHICH HAVE INDIRECT INVESTMENTS IN PASSIVE FOREIGN INVESTMENT COMPANIES (PFICS), AND HAVE FILED FORM 8621 ON BEHALF OF WISCONSIN ALUMNI RESEARCH FOUNDATION SIGULER GUFF BRIC OPPORTUNITIES FUND, LP SIGULER GUFF BRIC OPPORTUNITIES FUND II, LP

ldentifier	Return Reference	Explanation
DISCLOSURE OF REPORTABLE TRANSACTIONS	FORM 8886	THE FOLLOWING INVESTMENTS OF WISCONSIN ALUMNI RESEARCH FOUNDATION HAVE FILED FORM 8886 DISCLOSING REPORTABLE TRANSACTIONS AS A LIMITED PARTNER IN THESE INVESTMENTS, WISCONSIN ALUMNI RESEARCH FOUNDATION'S ALLOCABLE SHARE FROM THE RESPECTIVE PASSTHROUGH ENTITIES DOES NOT EXCEED THE THRESHOLD AMOUNTS THEREFORE, WISCONSIN ALUMNI RESEARCH FOUNDATION HAS NOT PARTICIPATED IN A LOSS TRANSACTION REPORTABLE ON FORM 8886 COMMONFUND CAPITAL INTERNATIONAL PARTNERS V, LP COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP COMMONFUND CAPITAL VENTURE PARTNERS VII, LP OAK HILL CAPITAL PARTNERS II (CAYMAN) LP WIND POINT PARTNERS V, LP

DLN: 93493319045142

OMB No 1545-0047

Open to Public Inspection

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. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization WISCONSIN ALUMNI RESEARCH FOUNDATION 39-0833612

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) WARF PROPERTIES LLC 614 WALNUT STREET 13TH FLOOR MADISON, WI 53726 20-3521556	HOLDING REAL ESTATE	WI			WISCONSIN ALUMNI RESEARCH FOUNDATION
(2) TOWN CENTER DINING LLC 614 WALNUT STREET 13TH FLOOR MADISON, WI 53726 27-2845458	EVENT COORDINATOR	WI			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 51 Ing contr organi	
						Yes	No
(1) MORGRIDGE INSTITUTE FOR RESEARCH							
330 N ORCHARD ST	RESEARCH	WI	501(C)(3)	LINE 4	WISCONSIN ALUMNI RESEARCH FOUNDATION	Yes	
MADISON, WI 537151119 20-8325570							
(2) WICELL RESEARCH INSTITUTE INC							
614 WALNUT STREET 13TH FLOOR	RESEARCH	WI	501(C)(3)	LINE 7	WISCONSIN ALUMNI RESEARCH FOUNDATION	Yes	
MADISON, WI 53726 39-1972235							
(3) UNIVERSITY OF WISCONSIN-MADISON							
1025 W JOHNSON ST	EDUCATION	WI	501(C)(3)	LINE 2			No
MADISON, WI 53706 39-6006492							
For Privacy Act and Panenwork Reduction Act Notice see the Instruc	tions for Form 990	Cat No F	0135V		Schedule R (F)))	2011

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	, ·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No					

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

(a) Name, address, and EIN of related organization	(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

(6)

Pal	Transactions With Related Organizations (Complete if the organization answered "Yes Note. Complete line 1 if any entity is listed in Parts II, III or IV	on Form 990, Par	11v, line 34, 35, 3	<u> </u>	Yes	No		
1 Di	iring the tax year, did the orgranization engage in any of the following transactions with one or more related organ	ızatıons lısted ın Parts	s II-IV?					
	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No		
	b Gift, grant, or capital contribution to related organization(s)							
	Gift, grant, or capital contribution from related organization(s)			1c		No		
	Loans or loan guarantees to or for related organization(s)			1d		No		
	Loans or loan guarantees by related organization(s)			1e		No		
f	Sale of assets to related organization(s)			1f		No		
g	Purchase of assets from related organization(s)			1 g		No		
h	Exchange of assets with related organization(s)			1h		No		
i	Lease of facilities, equipment, or other assets to related organization(s)			1i		No		
j	Lease of facilities, equipment, or other assets from related organization(s)			1 j		No		
k	Performance of services or membership or fundraising solicitations for related organization(s)			1k		No		
ı	Performance of services or membership or fundraising solicitations by related organization(s)			11		No		
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1m	Yes			
n	Sharing of paid employees with related organization(s)			1n	Yes			
0	Reimbursement paid to related organization(s) for expenses			10		No		
р	Reimbursement paid by related organization(s) for expenses			1р	Yes			
q	Other transfer of cash or property to related organization(s)			1 q		No		
r	Other transfer of cash or property from related organization(s)			1r		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	cluding covered relati	onships and transact	ion thresholds				
	(a)	(b) Transaction	(c)	(d) Method of determin	nına əm	ount		
	Name of other organization	type(a-r)	Amount involved	involved		June		
(1) Se 2)	e Addıtıonal Data Table							
2)								
3)								
-,								
4)								
-								
5)								
				1				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) organizations?		(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 39-0833612

Name: WISCONSIN ALUMNI RESEARCH FOUNDATION

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount I nvolved (\$)	(d) Method of determining amount involved
(1)	WICELL RESEARCH INSTITUTE INC	N	278,631	PERCENT ALLOCATION
(2)	MORGRIDGE INSTITUTE FOR RESEARCH INC	N	1,142,385	PERCENT ALLOCATION
(3)	MORGRIDGE INSTITUTE FOR RESEARCH INC	М	353,934	PERCENT ALLOCATION
(4)	MORGRIDGE INSTITUTE FOR RESEARCH INC	В	450,681	CASH
(5)	WICELL RESEARCH INSTITUTE INC	В	400,000	CASH
(6)	WICELL RESEARCH INSTITUTE INC	М	86,325	PERCENT ALLOCATION
(7)	MORGRIDGE INSTITUTE FOR RESEARCH INC	Р	5,665,436	CASH

Additional Data

Software ID: Software Version:

EIN: 39-0833612

Name: WISCONSIN ALUMNI RESEARCH FOUNDATION

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

) (Expenses \$ including grants of \$) (Revenue \$ (Code

THE WISYS TECHNOLOGY FOUNDATION WAS ESTABLISHED IN MARCH 2000 TO PROVIDE TECHNOLOGY TRANSFER SERVICES FOR THE UNIVERSITY OF WISCONSIN CAMPUSES EXCLUDING THE UNIVERSITY OF WISCONSIN-MADISON THE MISSION OF WISYS IS TO PROVIDE PROTECTION FOR TECHNOLOGY THROUGH PATENTS OR OTHER METHODS, FOR UW SYSTEMS FACULTYS DISCOVERIES AND TO NEGOTIATE LICENSE AGREEMENTS THAT ENABLE INDUSTRY TO COMMERCIALIZE INVENTIONS FROM UW-SYSTEMS INSTITUTIONS DURING FISCAL 2011-12, WISYS REVIEWED 38 NEW INVENTION DISCLOSURES RECEIVED FROM UW-SYSTEM FACULTY AND ACCEPTED 14 OF THE DISCLOSURES FOR FURTHER STUDY AND PATENTING DURING FISCAL 2011-12 , WISYS APPLIED FOR 21 U S PATENTS AND DERIVATIVES. IN ADDITION WISYS RECEIVED 5 U.S. ISSUED PATENTS AND 4FOREIGN ISSUED PATENTS WISYS COMPLETE 3 NEW LICENSE AND OPTIONS AGREEMENTS AND 4 NEW MATERIAL TRANSFER AGREEMENTS WISYS OPERATES ITS OFFICES LOCATED AT 614 WALNUT STREET, MADISON, WISCONSIN WITH 5 EMPLOYEES