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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements OMB No 1545-0047 Open to Public

A F	For the	2011 calendar year, or tax year beginning JUL 1, 2011 and ending	JUN 30, 2012	
	Check if	C Name of organization		
D (applicable	WISCONSIN ASSOCIATION OF INDEPENDENT	D Employer identific	cation number
	∏Addres		1	
<u> </u>	chang	COLLEGES AND UNIVERSITIES INC.		
L	Name change	Doing Business As	39-1	039417
	Initial return	Number and street (or P 0. box if mail is not delivered to street address) Room/su	ite E Telephone numbe	r
	Termin ated	122 W WASHINGTON AVENUE NO 700)256-7761
X	Ameno	City or town, state or country, and ZIP + 4	G Gross receipts \$	5,330,915.
	Applic		H(a) Is this a group re	
_	pendin			Yes X No
		SAME AS C ABOVE	for affiliates?	
_			H(b) Are all affiliates inc	
		<u> </u>		list. (see instructions)
		e:▶ WWW.WAICU.ORG	H(c) Group exemptio	
			ear of formation: 1962 N	🛮 State of legal domicile: 🛛 🗓
Pa	art I	Summary		
a	1	Briefly describe the organization's mission or most significant activities: PROMOTE	AND FACILITAT	E SERVICES
Governance	1	TO WISCONSIN'S PRIVATE NONPROFIT COLLEGES AN	D UNIVERSITIE	S.
ı,	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of m	ore than 25% of its net as	ssets.
Š		Number of voting members of the governing body (Part VI, line 1a)	3	23
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
•ජ ග		Total number of individuals employed in calendar year 2011 (Part V, line 2a)	 	61
ţį	I		5	0
Activities &	1	Total number of volunteers (estimate if necessary)	, <u>6</u>	
Ą		Total unrelated business revenue from Part VIII, column (C), line 12.	\ 7a	0.
	ь	Net unrelated business taxable income from Form 990-T, line 34	<u>п</u> 7b	0.
		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	Prior Year	Current Year
<u>e</u>	8	Contributions and grants (Part VIII, line 1h)	462,133.	2,209,689.
en	9	Program service revenue (Part VIII, line 2g)	-12,215,131.	2,331,529.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d).	272,386.	351,686.
-	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1(e)	0.	0.
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,949,650.	4,892,904.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	399,895.	1,082,253.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ģ	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,950,238.	1,805,365.
Expenses	I	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ē	I	Fotal fundraising expenses (Part IX, column (D), line 25)	* # * 3*	** * * * * * * * * * * * * * * * * * * *
ŭ	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,162,167.	1,140,180.
	l .	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,512,300.	4,027,798.
	1	The state of the s	-562,650.	865,106.
<u> </u>	19	Revenue less expenses Subtract line 18 from line 12		
Net Assets or Fund Balances			Beginning of Current Year	End of Year
SSS	20	Total assets (Part X, line 16)	13,085,607.	14,057,829.
agt of	21	Total liabilities (Part X, line 26)	480,927.	675,906.
혽	22	Net assets or fund balances. Subtract line 21 from line 20	12,604,680.	13,381,923.
	art II	Signature Block		<u> </u>
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	·	y knowledge and belief, it is
true,	, correc	, and complete. Declaration of preparer (other than officer) is based on all information of which prepare		-
		Manke_		<u>-20/3</u>
Sig	n	Signatule of office	Date	
Her	e	ROLF WEGENKE, PRESIDENT	, ,	
		Type or print name and title		
		Print/Type preparer's name Preparer's signature y 2 Morec		PTIN
Paid	1	TROY E. MARINE, CPA TROY E. MARÍNE, CPA	09/04/13 self-employe	
Prep	oarer [Firm's name BAKER TILLY VIRCHOW KRAUSE, LLP	Firm's EIN	39-0859910
Use	Only	Firm's address PO BOX 7398		
		MADISON, WI 53707-7398	Phone no. (608)249-6622
May	the IF	S discuss this return with the preparer shown above? (see instructions)		X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

COLLEGES AND UNIVERSITIES INC.

Pạ	till Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response to any question in this Part III	<u></u>
1	Briefly describe the organization's mission: PROMOTE AND FACILITATE SERVICES TO WISCONSIN'S PRIVATE NONPROFIT	
	COLLEGES AND UNIVERSITIES.	_
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	0
	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? If "Yes," describe these changes on Schedule O.	O
4	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	
4a	others, the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ 1,032,605 • including grants of \$) (Revenue \$ 962,254 •	_
- †a	THE WAICU COLLABORATION PROJECT IS A COMPREHENSIVE INITIATIVE TO	- '
	PERFORM ADMINISTRATIVE SUPPORT FUNCTIONS OF WISCONSIN'S TWENTY-THREE	_
	PRIVATE NONPROFIT COLLEGES AND UNIVERSITIES ON A COLLABORATIVE BASIS.	
	THE OBJECTIVES ARE TO SAVE MONEY, TO IMPROVE THE QUALITY OF SERVICES TO)
	STUDENTS, FACULTY, AND STAFF, AND TO SERVE AS A NATIONAL MODEL FOR	
	CONTROLLING COLLEGE COSTS.	
4b	(Code) (Expenses \$ 690,608 · including grants of \$) (Revenue \$ 690,608 ·	١
	STUDENT ACCESS - WAICU HAS ORGANIZED JOINT ADMISSION PROGRAMS SINCE	- '
	1978, CURRENTLY LOGGING MORE THAN 300,000 CONTACTS WITH POTENTIAL	_
	STUDENTS AND THEIR PARENTS AND COUNSELORS EACH YEAR. WAICU'S ADMISSION	
	PROGRAMS ARE SPECIFICALLY DESIGNED TO REINFORCE THE STUDENT RECRUITMENT	<u>'</u>
	EFFORTS OF MEMBERS. WAICU'S ROLE IS TO HIGHLIGHT THE AFFORDABILITY AND	_
	OPPORTUNITIES QUALITY OF WISCONSIN'S PRIVATE NONPROFIT COLLEGES AND TO	
	CREATE OPPORTUNITIES FOR STUDENTS AND COUNSELORS TO CONSIDER PRIVATE NONPROFIT COLLEGES.	_
	MONFROTTI CODDEGED:	_
		_
4c	(Code) (Expenses \$1, 116, 371. including grants of \$1, 046, 403.) (Revenue \$69, 969.	_)
	SCHOLARSHIPS - THE ORGANIZATION AWARDS ON AN ANNUAL BASIS MORE THAN	
	\$750,000 TO ALMOST 200 PRIVATE COLLEGE STUDENTS. IN ADDITION THEY	
	MANAGE A TOTAL OF FIVE ENDOWED SCHOLARSHIP PROGRAMS VALUED AT APPROXIMATELY \$9.8 MILLION. THESE SCHOLARSHIPS ALLOW MANY STUDENTS TO	
	CONTINUE THEIR COLLEGE EDUCATION.	
	CONTINUE INDIA COURTON.	
		_
		_
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 608,698 · including grants of \$) (Revenue \$ 608,698 ·)	
<u>4e</u>	Total program service expenses ► 3,448,282.	

WISCONSIN ASSOCIATION OF INDEPENDENT

Form 990 (2011)

COLLEGES AND UNIVERSITIES INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		х
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		х
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		X
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		_ <u>X</u> _
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		Х
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		
	Schedule D, Part III	8		Х
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			37
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_ <u>X</u> _
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	х	
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		. 4	, 5° 5°
	as applicable	*****	السيشم	ــــا
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	Λ	
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	444		
e	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	Х	
	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	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Χ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	, , , , , , , , , , , , , , , , , , , ,	14a		
D	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, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
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? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
19	1c and 8a? If "Yes," complete Schedule G, Part II	18	\vdash	<u> </u>
.5	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2011)

Form 990 (2011) COLLEGES AND UNIVE
Part IV Checklist of Required Schedules (continued) COLLEGES AND UNIVERSITIES INC. 39-1039417 Page 4

<u> </u>				
04	Did the exposuration was at the CC 000 of expets and other appropriate to any appropriate as a respective to the		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 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	Х	
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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a	l ,	х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c				_
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	054		Х
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		Λ.
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	Х
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	200		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Х
34	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		A
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	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b				
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	y	

39-1039417 COLLEGES AND UNIVERSITIES INC. Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 29 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a O Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 61 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). X 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? 7a 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 X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g 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 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. Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 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 10b Section 501(c)(12) organizations. Enter-11a a 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.) 11b 12a 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. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the 13b organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c

Form **990** (2011)

14a

X

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

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Form 990 (2011) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI					X				
Sec	tion A. Governing Body and Management									
					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	2	3] , ,	8.					
	If there are material differences in voting rights among members of the governing body, or if the governing			*	,	′ .				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 23									
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?									
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		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	as filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5	ļ	X				
6	Did the organization have members or stockholders?			6_		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately appr	point	one or							
	more members of the governing body?			7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or		1					
	persons other than the governing body?			7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	ne following:							
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the		1					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	!	Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Code.)		 					
				<u> </u>	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a	-	Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napte	rs, affiliates,	1						
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	x	<u> </u>				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	у рето	ore filing the form?	11a		3 5				
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	to oor	officate O	12a	$\frac{X}{X}$	ļ				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	^					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Your School to Orbital to Orbital the Use done	es, u	escribe	40-	x					
12	in Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			14	X					
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approva	al by u	ndanandant	14	19.19	& Cat of				
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ai by i	ndependent	* 7.		gr is				
9	The organization's CEO, Executive Director, or top management official			15a	X	- Lan-				
h	Other officers or key employees of the organization			15b	X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			100						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	with a		Š					
	taxable entity during the year?			16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its	participation	100						
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization		•	,						
	exempt status with respect to such arrangements?		•	16b	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
Sec	tion C. Disclosure			1.0.0						
17	List the states with which a copy of this Form 990 is required to be filed ►WI									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sec	tion 501(c)(3)s only	availat	ole					
-	for public inspection. Indicate how you made these available. Check all that apply.	•	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	Own website Another's website X Upon request									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	nflict	of interest policy, a	nd finai	ncial					
	statements available to the public during the tax year.		,	-						
20	State the name, physical address, and telephone number of the person who possesses the books at	nd red	ords of the organiz	ation:	>					
	LIZA SIMON - 608-256-7761									
	122 W WASHINGTON AVENUE NO 700, MADISON, WI 53703									
T3200					000	0044				

Form 990 (2011) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average	Position				(D) Reportable	(E) Reportable	(F) Estimated		
Name and Title	hours per	(do	not c	heck	more	than	one h an	compensation	compensation	amount of
	week		cer ar					from	from related	other
	(describe	ector			1			the	organizations	compensation
	hours for	ndividual trustee or director	, a			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	nstitutional trustee		8	ubeus		(W-2/1099-MISC)	·	organization and related
	in Schedule	draft t	fonal		nploy	st con yee	Ļ			organizations
	0)	Individ	nstrtu	Officer	Key employee	Highest compensated employee	Former			3
(1) MARY J. MEEHAN		T	† <u> </u>			<u> </u>	T			
DIRECTOR	1.00	X			l			0.	0.	0
(2) CONNIE BOERST										~
DIRECTOR	1.00	X						0.	0.	0
(3) H. SCOTT BIERMAN										
DIRECTOR	1.00	X			<u> </u>	<u> </u>		0.	0.	0
(4) JAMES LOFTUS									_	_
DIRECTOR	1.00	X						0.	0.	0
(5) DOUGLAS N. HASTAD		l						_	_	
DIRECTOR	1.00	X	<u> </u>				<u> </u>	0.	0.	0
(6) F. GREGORY CAMPBELL										_
DIRECTOR	1.00	X	<u> </u>		_	_	_	0.	0.	0
(7) JILL WINTERS	1 00									
DIRECTOR	1.00	X	<u> </u>		╙			0.	0.	0
(8) PATRICK T. FERRY	1 1 00	\ .			ŀ			0.	0.	0
DIRECTOR (9) DANIEL J. CAREY	1.00	X	<u> </u>		<u> </u>	L	<u> </u>	0.	0.	U
DIRECTOR	1.00	x						0.	0.	0
(10) STEPHEN A. GOULD	1.00	1	-	-	┡		ļ	0.	- 0.	-
DIRECTOR	1.00	x						0.	0.	0
(11) JILL BECK	1.00	1	-	\vdash	\vdash					
DIRECTOR	1.00	x						0.	0.	0
(12) STEVEN R. DISALVO		+	\vdash		┢					-
DIRECTOR	1.00	X			İ			0.	٥.	0
(13) ROBERT A. WILD S.J.		Ť						· · · · · · · · · · · · · · · · · · ·	-	
DIRECTOR	1.00	X			ŀ			0.	0.	0
(14) JOHN R. RAYMOND						T				
DIRECTOR	1.00	X			ŀ			0.	0.	0
(15) NEIL HOFFMAN		T						,		
DIRECTOR	1.00	X	L		L	L		0.	0.	0
(16) HERMANN VIETS										
DIRECTOR	1.00	Х	L		L		L	0.	0.	0
(17) EILEEN SCHWALBACH										
DIRECTOR	1.00	X			L			0.	0.	0

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Form 990 (2011)

COLLEGES AND UNIVERSITIES INC. Form 990 (2011) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (C) (D) (E) (F) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per box, unless person is both ar compensation compensation amount of officer and a director/trustee) week from from related other (describe compensation organizations the individual trustee or director hours for organization (W-2/1099-MISC) from the related institutional trustee (W-2/1099-MISC) organization organizations Key employee and related in Schedule organizations O) (18) MICHAEL MILLER 0. DIRECTOR 1.00 | X 0. 0. (19) GERALD SEAMAN DIRECTOR 1.00 X 0 0. 0. (20) THOMAS KUNKEL 1.00 X 0. 0. 0. DIRECTOR (21) GEORGE F. ARNOLD 0. DIRECTOR 1.00 X 0. 0. (22) RICHARD ARTMAN 0. 1.00 X 0. DIRECTOR 0. (23) DANIEL W. JOHNSON 0. 0. DIRECTOR 1.00 X 0. (24) ROLF WEGENKE 43,913. PRESIDENT 40.00 Х 293,342 0. (25) LIZA SIMON 40.00 X 66,022. 0 12,475. SR. VP FOR FINANCE AND OPERATIONS (26) RODNEY L. OPSAL X 146,623. SR. VP FOR COLLABORATIVE SERVICES 12.00 0. 35,554. 505,987. 0. 91,942. 1b Sub-total 210,791. 0. 42,615. c Total from continuation sheets to Part VII, Section A 716,778. 134,557. d Total (add lines 1b and 1c)

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No 3 Х 4

- 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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
- 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

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	
UNITY HEALTH 840 CAROLINA STREET, SAUK CITY, WI 53583	HEALTH INSURANCE	277,177
HOVDE PROPERTIES 122 W WASHINGTON AVENUE, MADISON, WI 53703	PROPERTY MANAGEMENT	190,958
MARSH USA, 96460 COLLECTION CENTER DRIVE, CHICAGO, IL 60693	RISK MANAGEMENT	108,808
Total number of independent contractors (including but not limited to those lists)	ed above) who received more than	ns * ,

\$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2011)

Part VII Section A. Officers, Directors, Tr (A)	ustees, Key E (B)	nple	oyee	s, a	<u>nd I</u> C)	ligh	est	Compensated Employ (D)	(F)	
Name and title	Average hours	(c	heck	Pos	ition		ly)	Reportable compensation	(E) Reportable compensation from related	Estimated amount of
	per week	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) WENDY L. WINK	40.00							104 206		0 1 6 0
EXECUTIVE VICE PRESIDENT 28) WILLIAM J. SCHULTZ	40.00	<u> </u>		Х	<u> </u>		_	104,386.	0.	9,168
EXECUTIVE DIRECTOR, WAICU ETC	10.00					х		106,405.	0.	33,447
		-				<u>.</u>				
	,									
							-			
		_							<u> </u>	
		-	<u> </u>							
						_				
		_								
	<u> </u>									
otal to Part VII, Section A, line 1c	<u> </u>		<u> </u>		L			210,791.		42,615

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Pa	rt VII	Statement of Rever	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines	ts, and ve 1f 1,	447,097. 762,592.				
<u>8</u>	h	Total. Add lines 1a-1f		<u> </u>	2,209,689.			
Program Service Revenue	2 a b c d	MEMBER SERVICES PRIVATE COLLEGE MISCELLANEOUS F	WEEK A	Business Code 611710 611710 611710 611710	1,279,973. 980,972. 64,617. 5,967.	980,972.		
-	f		enue	<u> </u>	0 001 500			
	3 4 5	Total. Add lines 2a-2f Investment income (including other similar amounts) Income from investment of ta Royalties		est, and	2,331,529.			241,872.
	6 a b c	Gross rents Less: rental expenses Rental income or (loss)	(ı) Real	(II) Personal	\$ 150 TE		五 / 孝 家 / /	\$ \$4
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities 547,825. 438,011.	(II) Other			> \	, , , , , , , , , , , , , , , , , , ,
ł		Gain or (loss)	109,814.	<u> </u>		***************************************		478 6 578 4
Other Revenue		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of	•	109,814.	y 'e , e	· y b	109,814.
Othe	С	Less: direct expenses Net income or (loss) from fund Gross income from gaming ad Part IV, line 19	b draising events	>	\$. 8 ~			
ı	С	Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances	-	•				
	с	Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu		Business Code				
	11 a b c d e	Total. Add lines 11a-11d		•				
13200	12 9	Total revenue. See instructions.			4,892,904.	2,331,529.	0.	351,686.

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).

	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	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				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	1,082,253.	1,082,253.	*	*
3	Grants and other assistance to governments,			\$	· · · ·
	organizations, and individuals outside the				* * *
	United States See Part IV, lines 15 and 16			\$ & ₹ →	. , 4 %
4	Benefits paid to or for members				/ % & \$~ \ &
5	Compensation of current officers, directors,				
	trustees, and key employees	408,747.	208,436.	122,624.	77,687
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	1,019,278.	817,188.	154,743.	47,347
8	Pension plan accruals and contributions (include	41 160	22 100	6 001	
	section 401(k) and section 403(b) employer contributions)	41,160.	33,198.	6,821. 31,833.	1,141 9,966
9	Other employee benefits	242,108.	200,309.	31,833.	9,966
10	Payroll taxes	94,072.	71,243.	16,032.	6,797
11	Fees for services (non-employees):				
а	Management	27 266	07 157	1 - 1	
b	Legal	27,366. 28,410.	27,157. 26,691.	151.	58 479
C	Accounting	20,410.	20,091.	1,240.	4/9
ď	Lobbying	-	- 4 5 7 7		
e -	Professional fundraising services. See Part IV, line 17	39,363.	, y , , ,	39,363.	
f	Investment management fees	130,328.	123,975.	4,584.	1,769
. g	Other	130,320.	123,313.	4,304.	1,703
12 13	Advertising and promotion	277,110.	264,740.	8,925.	3,445
13 14	Office expenses Information technology	10,264.	9,373.	643.	248
14 15	Royalties	10,201	3,3131	013.	210
16	Occupancy	266,054.	250,545.	11,190.	4,319
17	Travel	61,801.	55,536.	4,520.	1,745
 18	Payments of travel or entertainment expenses	02,0020			
	for any federal, state, or local public officials	1			
19	Conferences, conventions, and meetings	24,635.	24,635.		
20	Interest	316.	254.	45.	17
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	39,708.	31,866.	5,658.	2,184
23	Insurance	36,755.	34,561.	1,583.	611
24	Other expenses. Itemize expenses not covered	1 ×	*	\$	
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	* ,*		. , , 4 () , .	
	amount, list line 24e expenses on Schedule 0.)		*	* c, w * 3 0 >	
а	LDS DISBURSEMENTS TO ME	92,000.	92,000.		
b	DUES & SUBSCRIPTIONS	54,190.	44,266.	7,160.	2,764
С	MEMBER SERVICES	24,232.	23,443.	567.	222
d	DATA CENTER	19,271.	19,271.		
е	All other expenses	8,377.	7,342.	747.	288
25	Total functional expenses. Add lines 1 through 24e	4,027,798.	3,448,282.	418,429.	161,087
26	Joint costs. Complete this line only if the organization		-		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form **990** (2011)

Pai	rt X	Balance Sheet				_	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			381,423.	1	873,733.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			358,603.	3	184,282.
	4	Accounts receivable, net		91,556.	4	68,319.	
	5	Receivables from current and former officers, di	roctore truetone	kov	72,0000	 	00,023.
	"	employees, and highest compensated employee		•			
			. 11		5		
	_	of Schedule L	,	-			
	6	Receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)			\$		
		*******		-			* ,
		employers and sponsoring organizations of sect	, ,, ,	ntary			
ţ	_	employees' beneficiary organizations (see instru	ctions)			6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use			46,984.	8	59,654.
	9	Prepaid expenses and deferred charges	1 1		40,304.	9	39,034.
	10a	Land, buildings, and equipment, cost or other		319,657.	1 11	*	, ,
	١.	basis. Complete Part VI of Schedule D		201,693.	150,578.		117,964.
	l	Less: accumulated depreciation	10b 4	201,693.	12,056,463.	10c	12,499,627.
	11	Investments - publicly traded securities			12,030,403.	11	12,433,027.
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments · program-related. See Part IV, line			13		
	14	Intangible assets		0.	14	254,250.	
	15	Other assets See Part IV, line 11			13,085,607.	15	14,057,829.
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)		180,560.	16	126,666.
	17	Accounts payable and accrued expenses		100,300.	17	120,000.	
	18	Grants payable			202,033.	18 19	188,072.
	19	Deferred revenue			202,033.	20	100,072.
	20	Tax-exempt bond liabilities		I- D		21	
Liabilities	21	Escrow or custodial account liability. Complete F			. , , , , , , , , , , , , , , , , , , ,	" "	3 4 8 "
bili	22	Payables to current and former officers, director	· ·			, * 4	
Lia		highest compensated employees, and disqualific	ea persons. Com	piete Part II	<u> </u>		
		of Schedule L			98,334.	22	113,265.
	23	Secured mortgages and notes payable to unrela			70,334.		113,203.
	24	Unsecured notes and loans payable to unrelated	•	Nb		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24). Complete	e Part X OI	0.	25	247,903.
	26	Schedule D Total liabilities. Add lines 17 through 25			480,927.	26	675,906.
	20	Organizations that follow SFAS 117, check he	Y On	d complete	× ′ · · ·	20	073,300.
"		_	re P (21) and	a complete	• •		· **;
ce	27	lines 27 through 29, and lines 33 and 34.			829,938.	27	718,528.
ılan	27	Unrestricted net assets			2,744,409.	28	2,497,340.
l Ba	28 29	Temporarily restricted net assets			9,030,333.	29	10,166,055.
un l	29	Permanently restricted net assets	and have	and		29	10,100,033.
Ē		Organizations that do not follow SFAS 117, ch complete lines 30 through 34.	* * * * * ,	,			
ts o	30	•				30	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	unmont find		· · -	31	
ľ As	31	Paid-in or capital surplus, or land, building, or eq	•	ada		32	
Ne	32	Retained earnings, endowment, accumulated in	come, or other ful	ius	12,604,680.	33	13,381,923.
	33	Total net assets or fund balances			13,085,607.	34	14,057,829.
	34	Total liabilities and net assets/fund balances			13,003,007.	34	Form 990 (2011)

Form **990** (2011)

	Head (2011) CODDECED 1210 CHIVENDIII D 114C:		T037	<u> </u>	Pag	ge 🛂
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		, 89.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	,02		
3	Revenue less expenses Subtract line 2 from line 1	3			5,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12	,60	4,6	80.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-8	7,8	63.
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	13	, 38	1,9	23.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			ça	و الله الله	4.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.		;	1,7	2.3
2 a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
b	Were the organization's financial statements audited by an independent accountant?		[2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	ı , [
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule (o [133		3. 8
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a		\$ }	4 2.	
	separate basis, consolidated basis, or both			· .	* *	` - · · ·
	X Separate basis Consolidated basis Both consolidated and separate basis			£.11.00.0		,
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Au				
,	Act and OMB Circular A-133?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red au	ıdıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2011

Open to Public Inspection

Name of the organization WISCONSIN ASSOCIATION OF INDEPENDENT **Employer identification number** COLLEGES AND UNIVERSITIES INC. 39-1039417 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 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, 4 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). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 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. d Type III · Other b Type II c Type III · Functionally integrated 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? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(iı) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s) (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organizátion in col organization in col. (i) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9) governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes No

132021 01-24-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

LHA For Paperwork Reduction Act Notice, see the Instructions for

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and		·				
	membership fees received (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to	ļ					
	the organization without charge						
4	Total. Add lines 1 through 3			-,			
5	The portion of total contributions	,					
	by each person (other than a]				*, ^ × *	
	governmental unit or publicly			₹ 1	≱رد; پدس ۾ي		
	supported organization) included		4		* * *		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,	1 6 4 1	1 1/4 1/4 .	*		*	
	column (f)		- "			379 21	
	Public support. Subtract line 5 from line 4						
	ction B. Total Support				1		
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4			-			
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the				:		
10	business is regularly carned on						
10	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)				İ		
11	Total support. Add lines 7 through 10	*	,			* * * * *	
	Gross receipts from related activities.	etc (see instruction	ons)		l .	12	····
	First five years. If the Form 990 is for	•	•	d fourth or fifth to	ا ax vear as a sectio	<u> </u>	
	organization, check this box and stop	•	, o., ooooa,	2, 102, 07			ightharpoons
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (line 6, column (f) d	ivided by line 11, o	column (f))	<u>-</u>	14	%
	Public support percentage from 2010					15	%
16a	33 1/3% support test - 2011. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons
b	33 1/3% support test - 2010. If the	organization did no	ot check a box on l	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation			>
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	his box and stop h	nere. Explain in Par	t IV how the organ	ızatıon
	meets the "facts-and-circumstances"	test The organiza	ition qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances tes	t - 2010. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, c	heck this box and	stop here. Explain	ın Part IV how the	
	organization meets the "facts-and-cire		-				▶Щ
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17l			
					Sche	dule A (Form 990	or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 COLLEGES AND UNIVERSITIES INC.

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	elow, please comp	olete r art ii)				
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and	(=, = = = =	(=,====	(=/====	(-,	(9/==++	χ-γ
	membership fees received. (Do not						
	include any "unusual grants.")		548,630.	512,250.	462,133.	2209689.	3732702.
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	1728671.	1946567.	2026919.	2215131.	2331529.	10248817.
3	Gross receipts from activities that						
•	are not an unrelated trade or bus-						
	iness under section 513	ĺ					
4	Tax revenues levied for the organ-			· · · · · ·			
•	ization's benefit and either paid to	[
	or expended on its behalf			,			
5	The value of services or facilities						
J	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	1728671.	2495197.	2539169.	2677264.	4541218.	13981519.
	_	1/200/1.	2473177.	2333103.	2077204.	4341210.	13301313.
18	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
	Amounts included on lines 2 and 3 received			· · · · · · · · · · · · · · · · · · ·			
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the			512,250.	450,103.	1796789.	2759142.
_	amount on line 13 for the year			512,250.	450,103.	1796789.	2759142.
	Add lines 7a and 7b	1.38/32	, ,	312,230.			11222377.
8	Public support (Subtract line 7c from line 6)	<u> </u>	L		' * · · · ·		11222311.
_	endar year (or fiscal year beginning in)	(-) 0007	(F) 0000	(=) 2000	(4) 2010	(a) 2011	/f) Total
		(a) 2007 1728671.	(b) 2008 2495197.	(c) 2009 2539169.	(d) 2010 2677264.	(e) 2011 4541218.	(f) Total 13981519 •
-	Amounts from line 6 Gross income from interest.	1/200/1.	2473171	23331034	2077204.	3331210.	13701317.
102	dividends, payments received on						
	securities loans, rents, royalties	25,444.	14,696.	7,895.	110,128.	241,872.	400,035.
L	and income from similar sources Unrelated business taxable income	23,333.	14,000.	7,055.	110,120.	241,072.	400,033.
L	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
		25,444.	14,696.	7,895.	110,128.	241,872.	400,035.
	Add lines 10a and 10b Net income from unrelated business	23,444.	14,030.	1,093.	110,120.	241,072.	400,033.
''	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital	ĺ					•
	assets (Explain in Part IV.)	1754115.	2509893.	2547064.	2787392.	4702000	14381554.
	Total support (Add lines 9, 10c, 11, and 12)			·	<u> </u>		
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiz	ration,
<u></u>	check this box and stop here	io Support Do	roontogo				
_	ction C. Computation of Publ			. (0)		las I	78.03 %
	Public support percentage for 2011 (. , , ,	•	column (f))		15	22 11
16	11 2			-		16	98.41 %
	ction D. Computation of Inves					T4= T	2.78 %
17	, ,	,	``	ne 13, column (t))		17	4 = 6 6
	Investment income percentage from					18	
19a	33 1/3% support tests - 2011. If the	-					
	more than 33 1/3%, check this box a	•	•	• •			▶ [X]
b	33 1/3% support tests - 2010. If the	•					. —
	line 18 is not more than 33 1/3%, che		,	•	, , , , ,	=	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 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, Part V, line 35c (Proxy Tax), then

	(U)(T), (U), Or (U) Organiza	tions Complete Part III.			
Name of organiz		IN ASSOCIATION (OF INDEPENDE	ENT	Employer identification number
		S AND UNIVERSIT			39-1039417
Part I-A (Complete if the org	janization is exempt un	der section 501(c	or is a section 5	27 organization.
 Provide a c Political ex Volunteer h 	penditures	zation's direct and indirect politi	cal campaign activities	ın Part IV	> \$
3 volunteer r	nours				
Part I-B (Complete if the ord	ganization is exempt un	der section 501(c)(3).	
<u> </u>		incurred by the organization un		<u>/(u).</u>	> \$
	•	incurred by organization manage		5	> \$
		n 4955 tax, did it file Form 4720	•		Yes No
4a Was a corr	ection made?		-		Yes No
	escribe in Part IV.				
Part I-C (Complete if the org	janization is exempt un	der section 501(c), except section	501(c)(3).
1 Enter the a	mount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities	> \$
		ization's funds contributed to o	ther organizations for s	section 527	_
•	nction activities				S
	pt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L ,	. .
line 17b					> \$
		1120-POL for this year?			└ Yes
		nployer identification number (E			which the filing organization
	nenta i di each diganiza			ization's funds. Also ai	star the amount of political
CONTIDUUIO	ns received that were pr				nter the amount of political enarate segregated fund or a
		omptly and directly delivered to additional space is needed, pro	a separate political or	ganization, such as a s	
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV	eparate segregated fund or a
political act		omptly and directly delivered to	a separate political or	ganization, such as a s	rom (e) Amount of political contributions received and
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f	rom (e) Amount of political contributions received and promptly and directly
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's contributions received and promptly and directly delivered to a separate
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom (e) Amount of political contributions received and promptly and directly
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization
political act	tion committee (PAC). If	omptly and directly delivered to additional space is needed, pro	a separate political or vide information in Par	ganization, such as a s t IV (d) Amount paid f filing organizatio	rom n's promptly and directly delivered to a separate political organization

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

132041 01-27-12

		SSUCTATION			020445
Schedule C (Form 990 or 990-EZ) 2011 Part II-A Complete if the organization	COLLEGES AN	D UNIVERSIT	TES INC.	39-1	039417 Page 2
(election under sec		inpi unuer section	n sor(c)(s) and m	ea Form 5/00	
			D-+0/		
		liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
	re of excess lobbying	,			
B Check ► L If the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply	(a) Educa	(la) A#d-a
	ts on Lobbying Expe			(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amou	ınts paid or incurred.)		totals	
1a Total lobbying expenditures to infli	uence public opinion (grass roots lobbying)			
b Total lobbying expenditures to infli		, ,,		41,230.	
c Total lobbying expenditures (add l	nes 1a and 1b)	, , , , , , , , , , , , , , , , , , , ,		41,230.	
d Other exempt purpose expenditure	•			3,947,205.	-
e Total exempt purpose expenditure	es (add lines 1c and 1c	i)		3,988,435.	
f Lobbying nontaxable amount. Ent	er the amount from the	e following table in boti	h columns.	349,422.	
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		,
Not over \$500,000	20% of	the amount on line 1e.		*	
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000	e de sin	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.	, ,,	\$ CA.2.
Over \$17,000,000	\$1,000,0	000			
				₹	
g Grassroots nontaxable amount (er	nter 25% of line 1f)			87,356.	
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	· ·			0.	
J If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	ation file Form 4720	_	
reporting section 4911 tax for this	•			L	Yes No
		eraging Period Under	` '		
		ection 501(h) electior e instructions for line			
		nditures During 4-Yea		19c 4.)	·
		land of Daning 1 100	ii Aroruging i onou		
Calendar year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
(or fiscal year beginning in)	, ,	, ,	, ,	, , ,	(-)

2a Lobbying nontaxable amount	262,700.	267,462.	325,615.	349,422.	1,205,199.
b Lobbying ceiling amount		*	\$ \(\)	.x	
(150% of line 2a, column(e))		× } ~		*	1,807,799.
c Total lobbying expenditures	58,144.	29,811.	65,995.	41,230.	195,180.

66,866.

3

65,675.

Schedule C (Form 990 or 990-EZ) 2011

301,301.

451,952.

87,356.

d Grassroots nontaxable amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

e Grassroots ceiling amount

81,404.

WISCONSIN ASSOCIATION OF INDEPENDENT

Schedule C (Form 990 or 990-EZ) 2011 COLLEGES AND UNIVERSITIES INC. 39-1039417 Page 3

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(b)
of th	e lobbying activity	Yes	No	Amo	ount
1 a	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 Volunteers?				,
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?	<u> </u>			
	Grants to other organizations for lobbying purposes?	<u> </u>			
,	Direct contact with legislators, their staffs, government officials, or a legislative body?				
9		-			
i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
J	Total Add lines 1c through 1i	. 25	,}		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				<u>.</u>
	If "Yes," enter the amount of any tax incurred under section 4912		i k		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		11.8- 3		7
Da	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			·	, <i>i</i>
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), sect				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No" OF	≀ (b) Part	III-A, lin	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	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 ex	cess	1 1 3		
	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		
Par					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; F	art II-A; and	Part II-B, III	ne 1. Also, d	omplete
this p	part for any additional information.				
			_		
		· .			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization WISCONSIN ASSOCIATION OF INDEPENDENT

Employer identification number

Par	t I Organizations Maintaining Donor Advise		Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		Troodantor complete it the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		·
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised t	funde
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
·	for chantable purposes and not for the benefit of the donor of		
	impermissible private benefit?	or deficit advisor, or for any other purpose con	Yes No
Pai		ganization answered "Yes" to Form 990. Part	
1	Purpose(s) of conservation easements held by the organization		14, 1110 7.
•	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certified	• •
	Preservation of open space	Treservation of a certified	Thistoric structure
2	Complete lines 2a through 2d if the organization held a quality	fied conseniation contribution in the form of a	consequation easement on the last
_	day of the tax year	ned conservation contribution in the form of a	Conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	aucture included in (a)	2c
	Number of conservation easements included in (c) acquired	• •	20
٠	listed in the National Register	arter 6/17/00, and not on a historic structure	2d
3	Number of conservation easements modified, transferred, re	leased extinguished or terminated by the or	المراجع المراج
Ŭ	year	neased, extinguished, or terminated by the ort	garlization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
·	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	_	<u> </u>
8	Does each conservation easement reported on line 2(d) above		
_	and section 170(h)(4)(B)(ii)?	ve samely the requirements of section 17 o(1)(-	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense sta	
	include, if applicable, the text of the footnote to the organiza		
	conservation easements		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statemen	t and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial da	
_	the following amounts required to be reported under SFAS 1		, p. 01100
а	Revenues included in Form 990, Part VIII, line 1	. Te to be of rotating to those items	▶ \$
	Assets included in Form 990, Part X		\$
_			> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. $^{132051}_{01\text{-}23\text{-}12}$

Schedule D (Form 990) 2011

WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES INC.

		S AND UNIV					39417	
Pa	rt III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, or	Other S	Similar Asse	ts (contin	Jed)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that ai	re a signi	ficant use of its	collection	tems
	(check all that apply):							
а	Public exhibition	d	_	hange programs	3			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co						t XIV.	
5	During the year, did the organization solicit of			•	sımılar as	sets	_	
Das	to be sold to raise funds rather than to be m						_ Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the organization	on answered "Ye	es" to For	m 990, Part IV,	line 9, or	
	reported an amount on Form 990, Pa							
па	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribution	is or other asset	ts not inc	luded	٦.,	┌
L	on Form 990, Part X?					L	J Yes	∟ No
В	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:		1			
С	Beginning balance					4-	Amount	
	Additions during the year					1c 1d		
	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on F	orm 990 Part X line	212		ı	··· 1	Yes	□ No
	If "Yes," explain the arrangement in Part XIV					<u></u>	_ 100	
Par			swered "Yes" to Fo	rm 990, Part IV,	line 10.		-	
	-	(a) Current year	(b) Pnor year	(c) Two years b		Three years back	(e) Four y	ears back
1a	Beginning of year balance	9,797,721.		1			*., .	44 1
b	Contributions	1,135,751.	9,867,724.				,	*
С	Net investment earnings, gains, and losses	170,989.	408,061.					ii.
d	Grants or scholarships		478,064.					, (8 ,)
е	Other expenditures for facilities						<u>.</u>	
	and programs	875,569.			j		2 . J. T. J. C.	<i>i</i>
f	Administrative expenses	-			_	· · · · · · · · · · · · · · · · · · ·		3
g	End of year balance	10,228,892.	9,797,721.	1			,	~ -(1)
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment		_%					
	Permanent endowment ► 99.39	 %						
С	Temporanly restricted endowment	<u>.61</u> %						
•	The percentages in lines 2a, 2b, and 2c shou	•				_		
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held a	ind administered	for the d	organization	[
	by:							es No X
	(i) unrelated organizations						3a(i)	$\frac{\lambda}{X}$
h	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	n hotod oe raguurad a	n Cabadula D2				3a(ii)	
4	Describe in Part XIV the intended uses of the						3b	
_	t VI [₹] Land, Buildings, and Equipm							
	Description of property	(a) Cost or o	1	or other	(c) Accu	mulated	(d) Book	value.
	Becomplian of property	basis (investr		(other)	depred		(d) Dook	raide
1a	Land	,	,		.,			
	Buildings					+		
	Leasehold improvements		13	8,238.	6	9,446.	68	,792.
d	Equipment			6,994.		1,056.		,938.
е	Other			4,425.	7	1,191.	23	,234.
	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part						,964.

Schedule D (Form 990) 2011

COLLEGES	AND	UNIVER	RSITIES	INC.

*	Part VII Investments - Other Securities. Se	ee Form 990, Part X, Iin	e 12.	
		(b) Book value		
	(1) Financial denvatives			
(A) (B) (C) (C) (D) (E) (F) (G) (G) (H) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(2) Closely-held equity interests			
(A) (B) (C) (C) (D) (E) (F) (G) (G) (H) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(3) Other			
(C) (D) (E) (F) (G) (H) (D) (G) (F) (G) (H) (D) (G) (H) (D) (G) (H) (D) (D) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E	·			
(D) (E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(B)			
(E) (F) (G) (F) (G) (F) (G) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(C)			
(F) (G) (G) (P) (G) (P) (D) (G) (P) (D) (G) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E	(D)			
(G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	(E)			
(P) (1)	(F)			
Total. (Col. (b) must equal Form 990, Part X, col. (6) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation Cost or end-of-year market value	(G)			
Total, (Col (b) must equal Form 990, Part X, col (B) line 12.)	(H)			
(a) Description of investment type (b) Book value (c) Method of valuation (cs) to rend of year market value (t) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25 (1) Federal income taxes (2) SCHOLARSHIP OBLIGATION - CURRENT 107, 500. (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (11) (11) (11) (11				
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(a) Description of investment type (b) Book Value (c) Cost or end of year market value (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	Part VIII Investments - Program Related. S	ee Form 990, Part X, II		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col.(b) must equal Form 990, Part X, col (8) line 13.) ▶ [Part IX.] Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (8) line 15) Part X Other Liabilities. See Form 990, Part X, line 25 1. (a) Description of liability (1) Federal income taxes (2) SCHOLARSHIP OBLIGATION — CURRENT — 107, 500. (3) SCHOLARSHIP OBLIGATION — 140, 403. (4) (5) (6) (7) (8) (9) (10) (9) (10) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (8) line 25) ▶ 247, 903.	(a) Description of investment type	(b) Book value		
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Part X Other Liabilities. See Form 990, Part X, line 25	(10)			
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(8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ 247,903.			13	*
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FINANCIAST ZATILE PARTICLE AND ALCOHOLD THE TOUR PARTICLE AND		e 25)	247.903.	**
	2. FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the rootnote	to the organization's financial s	statements that reports the organization's liability for	uncertain tax positions under

Schedule D (Form 990) 2011

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

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.

2011
Open to Public Inspection

of Individuals in the United States

Name of the organization WISCONSIN	WISCONSIN ASSOCIATION COLLEGES AND INTVERSITY	OF TTES	INDEPENDENT				Employer identification number 39-1039417
	and Assistance						
1 Does the organization maintain records to substantiate the amount	to substantiate the a	mount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance? 2. Decembe in Bod IV the corresponding to proceedings for manifering the use of grant funds in the United States.	istance?	the set of prop	finds in the Unite	C States			X Yes No
art II	Governments and C	rganizations in the	e United States.	complete if the org	anization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000 Check this b	ox if no one recipier	t received more th	ian \$5,000 Part l	can be duplicated if a	dditional space is nee	ı
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(1) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	and government orga	nizations listed in th	ns listed in the line 1 table				
_	is listed in the line 1 to	able			1		A
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruction	is for Form 990.					Schedule I (Form 990) (2011)

WISCONSIN ASSOCIATION OF INDEPENDENT

COLLEGES AND UNIVERSITIES INC.

Schedule I (Form 990) (2011)

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. Part III can be duplicated if additional space is needed

Page 2

39-1039417

(f) Description of non-cash assistance. (e) Method of valuation (book, FMV, appraisal, other) WAICU REQUIRES THAT THE NECESSARY -PartiIV. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information LINE 2: RECIPIENTS MUST MEET ELIGIBILITY REQUIREMENTS THE DOCUMENTATION IS THE APPROPRIATE WAICU PERSONNEL AND APPROVED FOR DISBURSEMENT (d) Amount of non-cash assistance ٥. o. 850. 1,046,403, (c) Amount of cash grant DOCUMENTATION BE SUBMITTED PRIOR TO ISSUING CHECKS. 35, (b) Number of recipients 204 34 TO RECEIVE GRANTS ADMINISTERED BY WAICU. (a) Type of grant or assistance Η PART H REVIEWED BY INTERN STIPENDS SCHEDULE SCHOLARSHIPS OF FUNDS Schedule I (Form 990) (2011)

SCHEDULE J (Form 990)

Part I

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

Inspection
Employer identification number

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Questions Regarding Compensation

WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES INC.

INC. | Employer identification number

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			, ,
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			. ~
	Travel for companions Payments for business use of personal residence		r L	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	ø		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
			*	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	*:	,	. `
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	\$, , , .	* : 3	,
	establish compensation of the CEO/Executive Director. Explain in Part III.	, ii * ;		. i
	Compensation committee Written employment contract		, `	* \$
	Independent compensation consultant X Compensation survey or study			* 1
	Form 990 of other organizations Approval by the board or compensation committee		÷ ,	
		, «		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	1		, X
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		% % 44	
				200
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	,	6	,,
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	*	, , ,	(
	contingent on the revenues of:		<u> </u>	X
	The organization?	5a		X
Þ	Any related organization?	5b		
_	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 organization pay or accrue any compensation			SI, s
	contingent on the net earnings of:			X
	The organization?	6a		X
D	Any related organization?	6b		Α.
_	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 the organization provide any non-fixed payments	_		v
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
^	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2011

WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES INC.

Schedule J (Form 990) 2011

39-1039417

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

Page 2

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, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E) Total of columns	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(i)-(D)	reported as deferred In prior Form 990
	ε	293,34	0.	0	15,759.	28,154.	337,255.	
1 ROLF WEGENKE		146	0	0 0	7.400	28.154.	182.177.	000
2 RODNEY L. OPSAL	€ €		0	0	<u> </u>	~ I	0	
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Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

WISCONSIN ASSOCIATION OF INDEPENDENT

Employer identification number

COLLEGES AND UNIVERSITIES INC.	39-1039417
FORM 990, LINE B	-
THE RETURN WAS AMENDED FOR THE FOLLOWING REASONS:	
PART I LINES 10 AND 17 ALONG WITH PART VIII LINES 7A-C,	PART IX LINE
11E AND PART XI LINE 5: RESTATED TO MORE ACCURATELY PORT	RAY INVESTMENT
INCOME AND EXPENSES FOR THE YEAR. THIS ALSO INCLUDES CH	ANGES TO
SCHEDULE D, PARTS XII AND PART XIII TO REFLECT INVESTMEN	T FEES.
PART IV LINE 10 AND SCHEDULE D, PART V: CHANGED TO INCLU	DE ENDOWMENT
INFORMATION INADVERTENTLY OMITTED ON ORIGINALLY FILED RE	TURN.
PART IV LINE 11B AND PART X LINE 11-12: ADJUSTED INVESTM	ENTS TO
PUBLICLY TRADED SECURITIES LINE TO PROPERLY REFLECT THE	NATURE OF THE
INVESTMENTS. THIS ALSO INCLUDES INFORMATION REMOVED FROM	SCHEDULE D,
PART VII.	
PART VII, SECTION A AND SCHEDULE J, PART II: PROVIDED AD	DITIONAL
COMPENSATION INFORMATION AND CHANGED CLASSIFICATION OF I	NDIVIDUALS TO
OFFICERS.	
SCHEDULE A, PART III, LINE 7B: INCLUDED CONTRIBUTIONS FR	OM OTHER THAN
DISQUALIFIED PERSONS THAT EXCEEDED 1%.	
SCHEDULE C, PART II-A: CHANGED TO PROPERLY REPORT LOBBYI	NG EXPENSES
INCURRED UNDER A SECTION 501(H) ELECTION. THE LOBBYING E	XPENSES WERE
MOVED FROM SCHEDULE C, PART II-B TO SCHEDULE C, PART II-	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Scho	edule O (Form 990 or 990-EZ) (2011)

132211 01-23-12

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMMITTEE CONDUCTS AN ANNUAL PERFORMANCE REVIEW OF THE PRESIDENT. THE COMMITTEE REVIEWS A STUDY PREPARED BY THE CALIFORNIA PRIVATE COLLEGE ASSOCIATION ON BEHALF OF THE NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES STATE 132212 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

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

Related Organizations and Unrelated Partnerships

2011 Open to Publication to Publication

OMB No 1545-0047

► 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.

WISCONSIN ASSOCIATION OF INDEPENDENT

COLLEGES AND UNIVERSITIES INC. Name of the organization

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

Part I

Employer identification number 39-1039417

(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
*Part II** Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year)	ations (Complete if the organization a	nswered "Yes" to Form 990	Part IV, line 34 beca	tuse it had one o	r more related tax-exer	npt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section st	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity?
WAICU EDUCATIONAL TECHNOLOGY CONSORTIUM INC 20-3202578, 122 W WASHINGTON AVENUE SUITE 700, MADISON, WI 53703	PURCHASE/IMPLEMENT IT FOR MEMBERS	WISCONSIN	501(C)(3) LI	LINE 11A, I	WAICU	×

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

Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 COLLEGES AND UNIVERSITIES INC.

| Part | Ill | Identification of Related Organizations Treated as a partnership during the tax year)

| Schedule R (Form 990) 2011 | Identification of Related Organizations treated as a partnership during the tax year)

Page 2

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	income elated, tax under 2-514)	(f) Share of total income	(9) Share of cond-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or F managing partner?	General or Percentage managing ownership
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	janizations Taxable as poration or trust during	s a Corpo g the tax y	ration or Trust (Corear)	mplete if the c	organizatio	n answered "Yes"	to Form 990, Parl	IV, line 34	because it had or	ne or more	e related
(a) Name, address, and EIN of related organization	Z c		(b) Primary activity		(c) Legal domicite (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) total Share of end-of-year assets		(h) Percentage ownership
		!									
									-		
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WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES INC.

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Schedule R (Form 990) 2011

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)	wered "Yes" to Form	990, Part IV, line 34, 35, 3	35a, or 36)			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	8
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1	-	×
b Gift, grant, or capital contribution to related organization(s)				₽		×
c Gift, grant, or capital contribution from related organization(s)				2		×
				₽		×
				9		×
				:		
f Sale of assets to related organization(s)				=	<u>.</u> !	×
g Purchase of assets from related organization(s)				1g		×
h Exchange of assets with related organization(s)				두		×
i Lease of facilities, equipment, or other assets to related organization(s)				ij		×
						, ,
J. Lease of Jacillities, equipment, or other assets from related organization(s)	(0)			= ;	T	4 >
N FELICITIENTICE OF SELVICES OF HER HOUSING SOFT AND SOFT	inization(s)			¥ 7		4 >
m Chairm of facilities of memoral mailing lists or other condensation (s)	inization(s)			= ‡		: ×
iii Stiainiig Ot iacinites, equipinent, mainiig lists, or other assets with related organizat	(8)			E +	1	
				=	T	آ ا
o Reimhirsement paid to related organization(s) for expenses				5		_ ×
a Deimburgement hand by related argumentality for expenses				2 4	×	
p nemiousement paid by related organization(s) for expenses				2	4	[
 Other transfer of cash or property to related organization(s) 					-	×
r Other transfer of cash or property from related organization(s)				+	T	×
2 If the answer to any of the above is "Yes," see the instructions for information on w	vho must complete th	is line, including covered	information on who must complete this line, including covered relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction	(c) Amount involved	(d) Method of determining			
	type (a-r)		amount involved			
WAICU EDUCATIONAL TECHNOLOGY CONSORTIUM (1) INC.	Д	232,012.	FMV			
(2)						
(3)						
(4)						
(5)						
(9)						
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WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES INC.

Schedule R (Form 990) 2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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)

(k)	Percentage ownership					
()	General or managing partner?					
_	Gene part Yes	_		_	 _	
Ξ	Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065) Yes No					
(£)	Disproportionate allocations?					
_	Disp trong Yes	-	 <u> </u>			
(6)	Share of end-of-year assets					
(j)	Share of total income					
(e)	partners sec 501(c)(3) orgs /					
(Q)	Predominant income parties (related, unrelated, 501(c)(3) excluded from tax ongs?					
	Legal domicile (state or foreign country)					
(q)	Primary activity					
(a)	Name, address, and EIN of entrty					

WISCONSIN ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES INC. 39-1039417 Page 5 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).

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