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DLN: 93493105000234

Department of the Treasury

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

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

OMB No 1545-0047

2012

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 06-01-2012 , 2012, and ending 05-31-2013 D Employer identification number B Check if applicable WILLAMETTE UNIVERSITY Address change 93-0386972 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Terminated (503) 370-6985 City or town, state or country, and ZIP + 4 Salem, OR 97301 Amended return Application pending G Gross receipts \$ 240,751,414 Name and address of principal officer **H(a)** Is this a group return for Stephen E Thorsett ┌ Yes 🗸 No affiliates? 900 State Street Salem, OR 97301 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **▼** 501(c)(3) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status 501(c) ( ) ◀ (insert no ) H(c) Group exemption number ▶ Website: ► www willamette edu K Form of organization 
✓ Corporation 
☐ Trust 
☐ Association 
☐ Other ► L Year of formation 1842 M State of legal domicile OR Part I Summary Briefly describe the organization's mission or most significant activities Willamette University provides rigorous education in the liberal arts and selected professional fields. Teaching and learning, strengthened by scholarship and service, flourish in a vibrant campus community. A Willamette education prepares graduates to transform knowledge into action and lead lives of achievement, contribution and meaning Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . Number of independent voting members of the governing body (Part VI, line 1b) 31 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 2,754 400 Total number of volunteers (estimate if necessary) . . . . 6 -93.344 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a **b** Net unrelated business taxable income from Form 990-T, line 34 -95,066 **7**b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 12,838,622 12,079,301 Program service revenue (Part VIII, line 2g) . 9 117,246,102 122,234,655 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 5,485,914 9,502,257 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 682,236 2,391,349 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 146,207,562 136,252,874 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 42,835,237 44,729,872 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 57,338,308 59,919,740 Expenses 5 - 10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 b Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright 2,052,517$ 37,258,129 17 38,333,844 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 138,507,389 141,907,741 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -2,254,515 4,299,821 (Assets or defined despes) **Beginning of Current End of Year** Year 20 430,164,245 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . . . . . . 100,097,675 100,805,623 22 Net assets or fund balances Subtract line 21 from line 20 314,552,240 329,358,622 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2014-04-15 Signature of officer Sign Here nold Yasınskı VP for Fınancıal Affairs Type or print name and title Print/Type preparer's name Preparer's signature Date Check

May the IRS discuss this return with the preparer shown above? (see instructions) .

Firm's name

Firm's address 🕨

Paid

Preparer

**Use Only** 

self-employed

Firm's EIN 🕨

Par	Stateme Check if So	nt of Program Service chedule O contains a respo	e Accomplishments  nse to any question in this Part 1	ш	
1	Briefly describe t	he organization's mission			
schol	arship and service		us community A Willamette edu	rofessional fields Teaching and location prepares graduates to tran	
2	the prior Form 99	0 or 990-EZ?	nt program services during the ye	ear which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on Sch	iedule O		
3	services?	<del></del>	ake significant changes in how it	conducts, any program · · · · · · · · · · ·	┌ Yes ┌ No
4	expenses Section	n 501(c)(3) and 501(c)(4)		three largest program services, a ort the amount of grants and alloc	
4a	(Code Higher Education Ir of Education (2,655		122,331,870 including grants of \$ he College of Liberal Arts, 373 in the Co	44,729,872 ) (Revenue \$ llege of Law, 276 in the MBA programs ai	106,024,439 ) nd 105 in the Graduate School
4b	(Code Higher Education Ai	) (Expenses \$ uxiliary Functions - Includes room	13,202,838 including grants of \$ a & board (for 1,350 students), bookston	0 ) (Revenue \$ re, and summer conferences	16,210,216 )
<b>4</b> c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
44	Others were seen	amusaa (Daaamha in Caha	lula O )		
4d	Other program s (Expenses \$	ervices (Describe in Sched 0 inclu	lule O ) Iding grants of \$	0 )(Revenue \$	0 )
4e			.35,534,708	1	,

# 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10	Yes	
l1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
<b>L</b> 5	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		No
L6	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	Yes	
L7	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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
L8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
L9	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2012)

	Check if Schedule O contains a response to any question in this Part V	•	Yes	 N
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   3,687		165	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country  SP			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		N
ט	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			١
	file Form 8282?	7c		N
a	If "Yes," indicate the number of Forms 8282 filed during the year	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		
9	Sponsoring organizations maintaining donor advised funds.	<b> </b>		
_	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter	95		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
<b>-</b>		]		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
	year	1		
3	Is the organization licensed to issue qualified health plans in more than one state?			
	· · · · · · · · · · · · · · · · · · ·	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O			-
а	Enter the amount of reserves the organization is required to maintain by the states			
a b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	_		
a b	Enter the amount of reserves the organization is required to maintain by the states			

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

Check if Schedule O contains a response to any question in this Part VI .															ে
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Se	ection 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			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CO , OR , WA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Kenneth L Pifer 900 State Street Salem, OR (503) 370-6974

Form 990	(2012	•
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# 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										
	•	•	•							Form <b>990</b> (2012)

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

	(A) Name and Title	(B) A verage hours per	Posi more t				heck			<b>D)</b> rtable nsation	<b>(E)</b> Reportable compensation		ited f other	
		week (list	perso	n is	both	an	officer	'	from	the	from related		compens	sation
		any hours for related					stee) I <u>o</u> エ	Ιπ	organıza 2/1099	-MISC)	organizations (W 2/1099-MISC)		from t rganızatı	on and
		organizations below	Individual trustee or director	Institutional	Office	天 (9) ( <u>0</u> )	Highest compensat employee	Former					relate organiza	
		dotted line)	2 2 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3	100		employe	88	¥						
			trust	원		900	흙							
			g;	Trustee			l ŝ							
				L"			2							
												+		
												+		
												+		
												+		
												-		
												4		
1b	Sub-Total				•			•						
c d	Total from continuation sheet Total (add lines 1b and 1c) .	•			٠.	•	•	•		2,607,954		0		563,614
2	Total number of individuals (in \$100,000 of reportable compa	cluding but not	lımıted	to the			d abov	e) w	ho receive					<u> </u>
													Yes	No
3	Did the organization list any <b>f</b> o	<b>ormer</b> officer, dii	ector o	r trus	stee,	, key	emplo	yee,	, or highes	t compen	sated employee		103	140
	on line 1a? If "Yes," complete S	Schedule J for suc	ch indivi	dual	•	•		•				3	Yes	
4	For any individual listed on lin organization and related organ													
	individual			• •	•	•	• •	•	• •	• • •		4	Yes	
5	Did any person listed on line 1										or individual for			
	services rendered to the organ	nization <i>? It "Ye</i> s	," compi	ete S	cnea	iuie J	itorsu	cn pe	erson .			5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fire compensation from the organization												tax vear	
		(A) Name and business	<u> </u>					, -	<u></u>		(B) cription of services	T	(C	)
FXG C	onstruction LLC 1235 19th Street NES		auuless							Constructio	•		Comper	896,750
Comn	nonfund 15 Old Danbury Road PO Box	812 Wilton CT 0689	7							Endowmen manageme	t investment nt			249,933
	nt Energy Partners I LP 4 High Ridge P Joynt 14300 West Bell Rd Unit 37 Surp		d CT 069	05						Investment Electrical Co	management	$\blacksquare$		138,961 129,849
	LLP 1300 SW 5th Ste 3800 Portland O									Auditors	ontractor			107,135
2	Total number of independent co	ntractors (inclu	dına but	not	lımıt	ed t	o thos	e list	ed above	who rece	ived more than			

\$100,000 of compensation from the organization **>**5

Form 99								Page <b>9</b>
Part V	/##1	Statement o Check if Schedi	o <b>f Revenue</b> ule O contains a respon	se to any question i	n this Part VIII .			
	_				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
ω£	1a	Federated cam	paigns 1a					
ant	b	Membership du	es <b>1b</b>	0				
بة ق	С	Fundraising eve	ents <b>1c</b>	51,210				
ifts, ar A	d	Related organiz	zations 1d	0				
nii.G	e	Government grant	s (contributions) <b>1e</b>	1,779,281				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above	10,248,810				
ntrib d Oth	g	1a-1f \$	ons included in lines	1,447,492	42.070.004	į		
<u>೦ ೯</u>	h	Total. Add lines	s 1 a - 1 f		12,079,301			
an		_		Business Code				
ven	2a	Tuition and fees		611310	106,024,439	106,024,439	0	0
<u>æ</u>	b	Room and Board fo	ees	721310	13,918,800	13,918,800	0	0
MCA	C	Auxiliary income		611710	2,291,416	2,291,416	0	0
Program Serwoe Revenue	d							
ran	e f	All other progra	am service revenue		0	0	0	
Tog.	'	All other progra	anii service revenue		0	٩	<u> </u>	U
<u> </u>	g		s 2a – 2f		122,234,655			
	3		ome (including dividenc ar amounts)		1,745,995	О	0	1,745,995
	4	Income from inves	stment of tax-exempt bond p	proceeds 🕨	1,746	0	0	1,746
	5	Royalties			20,214	0	0	20,214
		C	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
		expenses Rental income	0	0				
	C	or (loss)	_					
	d	Net rental inco	me or (loss)  (ı) Securities	<b>►</b> (II) O ther				
	7a	Gross amount from sales of assets other	102,266,431	0				
	b	than inventory Less cost or other basis and sales expenses	94,511,915	0				
	С	Gain or (loss)	7,754,516	0				
	d	Net gain or (los	ss)		7,754,516	0	0	7,754,516
Other Revenue	8a	of contributions	luding ,210 s reported on line 1c)					
Б.		See Part IV, lin	ne 18 <b>a</b>	52,535				
je.	ь	Less direct ex	penses <b>b</b>	31,937				
₹	С		(loss) from fundraising e		20,598		0	20,598
	9a	Gross income f See Part IV, lir	rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	С		(loss) from gaming activ	rities				
	10a	Gross sales of returns and allo						
		Net income or i	oods sold <b>b</b> (loss) from sales of inve					
	4.	Miscellaneous	s Revenue	Business Code	1 207 741		_	4 207 744
		O ther income		900099	1,307,744 1,136,137	0	0	1,307,744
	b		rusts & annuities	900099	-93,344	0	-93,344	1,136,137
	C	Loss Other End Investment	owment		-93,344		- 93,344	
	d	All other reven	L		0	0	0	0
	e	Total. Add lines	s 11a-11d	🕨	2,350,537			

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) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 11,500 11,500 Grants and other assistance to individuals in the United States See Part IV, line 22 43,253,086 43,253,086 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 1,465,286 1,465,286 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 1,157,287 602,011 555,276 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 533,470 533,470 0 Other salaries and wages 43,953,063 41,529,244 1,166,161 1,257,658 Pension plan accruals and contributions (include section 401(k) 3,966,954 3,768,045 84,685 and 403(b) employer contributions) . . . . 114,224 7,038,680 6,663,985 174,522 Other employee benefits . . . . 200,173 10 3,270,286 145,136 90,752 3,034,398 11 Fees for services (non-employees) O 0 n 0 Management . . . . 111,116 0 105,623 5,493 Legal . . . . . . . . Accounting . . . . . . . . . . . . . 140,728 0 140,728 0 0 0 0 0 0 Professional fundraising services See Part IV, line 17 Investment management fees . . . . . 434,920 0 434,920 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 1,139,026 977,850 93,861 67,315 Schedule O) . . . . . . . Advertising and promotion . . 483,403 471,575 0 12 11,828 13 Office expenses . . . . . 2,451,215 2,163,644 90,774 196,797 5,708 14 Information technology . . . 1,229,447 1,211,810 11,929 15 0 0 0 0 Royalties . . 134,304 134,304 0 0 16 Occupancy . . . . . . **17** 2,511,942 2,383,037 34,335 94,570 18 Payments of travel or entertainment expenses for any federal, 0 0 state, or local public officials . . . . . 0 0 19 Conferences, conventions, and meetings . . . 78,209 78,209 0 20 2,716,696 2,716,696 0 0 Payments to affiliates . . . . . . 0 0 21 O 0 0 0 22 Depreciation, depletion, and amortization . 5,284,524 5,284,524 23 689,894 655,443 0 34,451 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 5,360,792 a Designated and restricted expenses 5,360,792 0 0 Programming and Study Abroad Program 4,953,691 4,953,691 0 0 0 0 Food Service 3,375,570 3,375,570 d Utilities 0 2,372,948 2,372,948 0 e All other expenses 3,789,704 3,766,261 15,444 7,999 Total functional expenses. Add lines 1 through 24e 25 141,907,741 135,534,708 4,320,516 2,052,517 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)

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X		• •	·
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	beginning or year	1	Life of year
	2	Savings and temporary cash investments	23,801,031	2	29,213,706
	3	Pledges and grants receivable, net	8,985,833	3	8,120,147
	4	Accounts receivable, net	1,923,910	4	1,574,961
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
88	7	Notes and loans receivable, net	9,664,454	7	8,033,662
⋖	8	Inventories for sale or use	510,550	8	507,707
	9	Prepaid expenses and deferred charges	365,069	9	468,880
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a  227,192,170			
	Ь	Less accumulated depreciation 10b 86,392,400	141,108,500	10c	140,799,765
	11	Investments—publicly traded securities	118,103,175	11	129,367,898
	12	Investments—other securities See Part IV, line 11	109,281,294	12	109,638,880
	13	Investments—program-related See Part IV, line 11		13	_
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	906,099	15	2,438,639
	16	Total assets. Add lines 1 through 15 (must equal line 34)	414,649,915	16	430,164,245
	17	Accounts payable and accrued expenses	18,581,506	17	19,489,291
	18	Grants payable	0	18	0
	19	Deferred revenue	2,516,591	19	2,073,951
	20	Tax-exempt bond liabilities	63,480,603	20	62,385,618
ر م	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
<u>, a</u>	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	67,624	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	45 454 054		10.050.700
		D	15,451,351	25	16,856,763
	26	Total liabilities. Add lines 17 through 25	100,097,675	26	100,805,623
ě		Organizations that follow SFAS 117 (ASC 958), check here ▶   and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	40,638,014	27	46,437,479
<u> </u>	28	Temporarily restricted net assets	142,888,429	28	147,733,056
Ξ	29	Permanently restricted net assets	131,025,797	29	135,188,087
r Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	314,552,240	33	329,358,622
Ź	34	Total liabilities and net assets/fund balances	414,649,915	34	430,164,245
	T .		1,5-15,515	<i></i>	.55, 15-1,2-16

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		146,2	07,562
2	Total expenses (must equal Part IX, column (A), line 25)	2			07,741
3	Revenue less expenses Subtract line 2 from line 1			171,3	07,741
		3		4,2	99,821
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		314,5	52,240
5	Net unrealized gains (losses) on investments	5			06,561
6	Donated services and use of facilities	_			
7	Investment expenses	6			0
,	Trivestifient expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	•			
		9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		329,3	58,622
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	ate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	quired	3b	Yes	

**Software ID:** 12000197 **Software Version:** v1.00

**EIN:** 93-0386972

Name: WILLAMETTE UNIVERSITY

Form 990, Part VII - Compensation of Compensated Employees, and Indeper	Officers, Dir าdent Contra	ectors actors	Trı,	ıste	es,	, Key	Em	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	Positio more unless an o	than	not one on is er an	box s bot d a tee)	th		(D)  Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
James Albaugh Board Member	1	х						0	0	0
Julie Branford Board Member	1 0	х						0	0	0
Truman Collins Board Member	1 0	х						0	0	0
James Cuno Board Member	1 0	х						0	0	0
Heather Dempsey Board Member	1 0	х						0	0	0
Paul DeMuniz - See Schedule O Board Member	5 0	х						11,500	0	0
James Fitzhenry Board Member	1 0	х						0	0	0
Eric Friedenwald-Fishman Board Member	0	х						0	0	0
A Brian Gard Board Member	1 0	х						0	0	0
William R Haden Board Member	1 0	х						0	0	0
Grant Hagıya Board Member	1 0	х						0	0	0
Melvin Henderson-Rubio Board Member	1 0	х						0	0	0
Dale Hermann Board Member	1 0	х						0	0	0
Joseph Hoffman Board Member	1 0	х						0	0	0
Brian Hufft Board Member	1 0	х						0	0	0
Mary Hughes Board Member	1 0	х						0	0	0
Ronald J Knox Board Member	0	х						0	0	0
Eva M Kripalani Board Member	0	х						0	0	0
Heidi Patterson Board Member	0	х						0	0	0
Craig Pesti-Strobel Board Member	0	х						0	0	0
Punit Renjen Board Member	0	х						0	0	0
Sandra M Rowe Board Member	0	х						0	0	0
Jacqueline Rushing Board Member	0	х						0	0	0
Lynne Saxton Board Member	0	х						0	0	0
Kevın R Smith Board Member	0	×						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both from the from related compensation per organization (Worganizations (Wan officer and a from the week (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee hours Institutional organizations idiwduol 1 r diisetor for employee related organızatıons trustae below Trustee dotted line) 1 Melissa I Smith Χ 0 0 0 Board Member 0 1 Patrıcıa Smullın 0 0 Х 0 Board Member 1 Guy Stephenson 0 0 0 Х Board Member 0 1 Patrick J Waite Х 0 0 0 Board Member Λ 1 Roderick Wendt 0 0 0 Х Board Member 0 1 Melissa Wilmot 0 0 0 Х Board Member 0 1 Dale Harris 0 0 0 Х Life Board Member 0 1 George Hoyt Life Board Member 0 0 0 Х 0 1 Joan McNamara Χ 0 0 Life Board Member 0 1 Claris Poppert n 0 0 X Life Board Member 0 1 Donald Brown Χ Χ 0 0 0 Vice Chairman of the Board 0 1 Dale Sause Х 0 Х 0 Secretary 0 1 Kerry Tymchuk Х 0 0 0 Х Assistant Secretary 0 1 Steven Wynne Х Χ 0 0 0 Chairman of the Board 0 40 Stephen E Thorsett Х Х 375,991 0 114,253 President 0 40 William A Yasınski Х 257,947 0 Х 88.310 VP for Financial Affairs/ Treasurer 40 Kristen Grainger Х 0 168,042 31,476 Admin Secretary/VP Exec Assist to President 0 40 Peter Letsou Χ 254,393 0 48,711 Dean College of Law 0 40 Marlene Moore Χ 207,386 0 27,000 Dean College of Liberal Arts 0 40 Debra Rıngold 0 Х 235,242 34,112 Dean Atkinson Graduate School of Mgmt 0 40 Symeon Symeonides Х 234,992 0 45,561 L Parks Chair Professor of Law 0 40 Yvonne Tamayo Х 186,107 0 21,780 Professor of Law & University General Counsel O 40 James Nafzıger Χ 180,980 0 26,269 Thomas B Stoel Professor of Law 0 40 Jeffrey Standen 177,203 Х 0 42,532 Assoc Dean and Melton Professor of Law 0 40 Robert Olson 145,591 0 57,413 Former Interim VP for Financial Affairs/Treasurer 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	than	not one son i er an trust	box s bo d a	, th	Former	( <b>D</b> ) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
David Douglass Former Interim Dean College of Liberal Arts	40					х	172,580	0	26,197

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As Filed Data -

DLN: 93493105000234

**Employer identification number** 

OMB No 1545-0047

# **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization WILLAMETTE UNIVERSITY

Department of the Treasury Internal Revenue Service

Total

# **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.

2012

Open to Public Inspection

				(see instructions))	Yes	No	Yes	No	Yes	No			
	ippor aniza	ted ation		organization (described on lines 1- 9 above or IRC section (see	organizati col <b>(i)</b> lis <sup>:</sup> your gove docume	ted in rning	the organization in col <b>(i)</b> of your support?		organizat col <b>(i)</b> org in the U	ganızed			etary port
	Nam		(ii) EIN	(iii) Type of	(iv) Is		(v) Did you	•	(vi) Is				nount of
h		Provide	e the follown	ng information about	the support	ed organızat	non(s)						
			•	•	of a person described in (i) or (ii) above?								
		•		er of a person descri		_					11g(ii		<del>                                     </del>
				governing body of th	•		•	Persons ut	.scribeu III (II)		11g(i)		140
9		followir	ng persons?	rectly or indirectly o	•							Yes	No
g		check	this box	2006, has the organı							-	-	r
f		section	1509(a)(2)	received a written de									
e	Г	By che	cking this b	ox, I certify that the on managers and otl	organization	ıs not cont	rolled directly	or indirec	tly by one or n	nore dis	qualifi	ed pers	ons
11	ı	one or the box	more public that descri	ganized and operated ly supported organiz bes the type of supp <b>b</b> Type II <b>c</b>	ations descr or <u>ti</u> ng organ	ibed in sect ization and	ion 509(a)(1 complete line	) or sectior s 11e th <u>ro</u>	1509(a)(2) S ugh 11h	ee <b>sect</b> i	ion 509	(a)(3).	. Check
10		_		ganized and operated	•				. , . ,				•
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee <b>section</b> !	<b>509(a)(2).</b> (C	omplete Pa	art III )				
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ess taxable ın	come (less	section 511	tax) fro	m busı	nesses	
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of											
	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross												
8		describ	ed in <b>sectio</b>	on 170(b)(1)(A)(vi).  described in section	(Complete F	art II)		J			g = = 1 t	F 24.1,	
7	<u>'</u>		•	at normally receives	_					rom the	aenera	al public	С
6	_			<b>(A)(iv).</b> (Complete P · local government or		tal unit deco	rihad in sacti	on 170/h\/	1)(A)(v)				
5	Г	=	•	erated for the benefit	_	or universi	ty owned or o	perated by	a government	tal unit	describ	ed in	
	_	hospita	ıl's name, cı	ty, and state									
4	<u>'</u>			h organization operat	-					1)(A)(i	iii). Ent	er the	
	<u> </u>			d in <b>section 170(b)(1</b> perative hospital se			•	n 170(h)/1	)(A)(iii)				
1	ا ا		-	on of churches, or as				ection 170(	(b)(1)(A)(i).				
	ganı		•	te foundation becaus	•			•	•				
Part				blic Charity Sta						nstruct	ions.		
									93-03869	72			

Sch	edule A (Form 990 or 990-EZ) 2012							Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	<b>Total.</b> Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) <b>Public support.</b> Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 20	)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV )							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	<b>First five years.</b> If the Form 990 is this box and <b>stop here</b>							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and <b>stop here.</b> The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	<b>►</b> □
b	<b>33</b> 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and <b>stop here.</b> The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	<b>▶</b> □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							<b>▶</b> ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493105000234

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	e of the organization METTE UNIVERSITY	Employer identification number						
AA TLL	JELLE ONIVERSEL		93-0386972					
Par	Organizations Maintaining Donor Adorganization answered "Yes" to Form 990	), Part IV, line 6.		•				
. 7		(a) Donor advised funds	(b) Funds and	other accounts				
	otal number at end of year							
	ggregate contributions to (during year)							
	ggregate grants from (during year)							
	ggregate value at end of year							
	Old the organization inform all donors and donor advis unds are the organization's property, subject to the o		or advised	┌ Yes ┌ No				
	Old the organization inform all grantees, donors, and d ised only for charitable purposes and not for the bene conferring impermissible private benefit?			┌ Yes ┌ No				
art	Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part I	V, line 7.				
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of an Preservation of a c	ertified historic struc	cture				
	easement on the last day of the tax year			End of the Year				
	otal number of conservation easements	<u> </u>	2a	e cha or the rear				
	otal acreage restricted by conservation easements	<u> </u>	2b					
	Number of conservation easements on a certified histo	oric structure included in (a)	2c					
	Number of conservation easements included in (c) accounts to the structure listed in the National Register	` '	2d					
	Number of conservation easements modified, transfer	– red, released, extinguished, or terminated	d by the organization	during				
	he tax year <b>►</b>							
	Number of states where property subject to conservat	non easement is located .						
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		— ling of violations, an	d   Yes   No				
	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easem	ents during the year					
	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	during the year					
	Does each conservation easement reported on line 2( and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	tion 170(h)(4)(B)(ı)	┌ Yes ┌ No				
	n Part XIII, describe how the organization reports co valance sheet, and include, if applicable, the text of th he organization's accounting for conservation easeme	e footnote to the organization's financial						
rt	Organizations Maintaining Collection Complete if the organization answered "Y		or Other Similar	Assets.				
	f the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education, o	or research in further					
	f the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	l 16 (ASC 958), to report in its revenue s ets held for public exhibition, education, o	statement and balanc					
	i) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$	94,568				
	ii) Assets included in Form 990, Part X			3,625,314				
	f the organization received or held works of art, historollowing amounts required to be reported under SFAS							
	Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$	(				
	Assets included in Form 990, Part X			0				
•	155615 Illituueu III FUIIII 550, Fait X		<b>-</b> →					

Part	Organizations Maintaining Co	ollections of Art	t, His	<u>tori</u>	cal Treas	sures, or C	<u> the</u>	r Similar <i>F</i>	\sse	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other recoi	rds, ch	eck	any of the f	ollowing that	are a	sıgnıfıcant u	se of	ıts	
а	Public exhibition		d	Γ	Loan or e	xchange prog	rams	•			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	aın hov	v the	y further th	e organizatioi	n's ex	kempt purpos	e ın		
5	During the year, did the organization solicit							nılar	_		
Dav	assets to be sold to raise funds rather than  t IV Escrow and Custodial Arrange							'as" ta Farm		Yes	✓ No
Par	Part IV, line 9, or reported an air					ion answere	u i	es to rom	990	,	
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?					s or other ass	sets	not		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	ving t	able	-					
						-		,	4 mou	nt	
С .	Beginning balance					-	1c				
d	Additions during the year					}	1d				
e	Distributions during the year					}	1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, lin	ie 21?							Yes	Г No
ь	If "Yes," explain the arrangement in Part XI										<u> </u>
Pa	<b>TEX Endowment Funds.</b> Complete	If the organizatio		were Prior y		o Form 990 Two years back				Four vo	ears back
1a	Beginning of year balance	213,765,462	(0)		539,755	215,471,491		197,933,68	_		7,209,451
b	Contributions	2,007,611			798,414	3,232,101	_	2,383,02	1		2,929,983
c	Net investment earnings, gains, and losses										
		20,404,995 4,824,897			718,310 381,878	34,515,481 5,099,917	+	31,018,72 5,399,82	_	-5	5,021,560
d	Grants or scholarships	4,024,097		4,0	561,676	3,099,917	_	3,399,62			3,021,300
е	Other expenditures for facilities and programs	8,430,489		8,6	598,764	9,052,579	9	9,450,58	2		8,380,073
f	Administrative expenses	434,920			373,755	426,822	2	1,013,54	4		628,447
g	End of year balance	222,487,762		213,	765,462	238,639,755	5	215,471,49	1	19	7,933,688
2	Provide the estimated percentage of the cui	rrent year end balan	ce (lın	e 1g	, column (a	)) held as					
а	Board designated or quasi-endowment ►	7 %									
b	Permanent endowment ► 93 %										
c	Temporarily restricted endowment 🕒	0 %									
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%									
3 <b>a</b>	Are there endowment funds not in the posse	ession of the organiz	ation 1	that a	are held and	d admınıstere	d for	the			
	organization by  (i) unrelated organizations							Гэ	a(i)	<b>Yes</b> Yes	No
	(ii) related organizations			•			•		a(ii)	165	No No
b	If "Yes" to 3a(II), are the related organization						٠.	· . · . · . [-	3b		
4	Describe in Part XIII the intended uses of t	he organization's er	ndowm	ent f	unds						
Par	t VI Land, Buildings, and Equipm	<b>ent.</b> See Form 99	90, Pa	_		_		1			
	Description of property				Cost or other (investment			(c) Accumulat depreciation		( <b>d</b> ) Boo	ok value
1a	Land					0 8,607	7,797				8,607,797
b I	Buildings		•			0 159,16:	1,696	51,120,8	357	10	8,040,839
c I	Leasehold improvements		•		ı	0 12,814	1,940	9,006,2	243	:	3,808,697
d I	Equipment				(	0 5,687	7,687	4,275,:	133		1,412,554
	Other				<b>D</b> ) /	0 40,920	<del></del>	<u> </u>	172		8,929,878 0,799,765

Part VIII Investments—Other Securities. See	e Form 990, Part X, line 12.	
(a) Description of security or category	<b>(b)</b> Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives	0	Cost or end-of-year market value
(2)Closely-held equity interests	0	
(3)Other		_
(A) Hedge funds	52,951,618	F
(B) Private Equity funds	30,392,687	F
(C) Real Asset funds	16 403 432	F
(C) Real Asset Iulius	16,493,432	Г
(D) Venture Capital funds	9,801,143	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	109,638,880	
Part VIII Investments—Program Related. Se  (a) Description of investment type	ee Form 990, Part X, line 13.  (b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>•</b>	
Part IX Other Assets. See Form 990, Part X, I	line 15.	
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part		
1 (a) Description of liability	(b) Book value	
Apputtee and truste payable	0 9 8 3 4 1 6 7	
Annuities and trusts payable U S Government loan advances refundable	9,834,167 7,022,596	
3 3 33 Comment Ivan advances leightable	7,022,330	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	16,856,763	

	a.e = (, e = e.e.		r age 1
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	111,725,479
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	10,506,561
3	Subtract line <b>2e</b> from line <b>1</b>	3	101,218,918
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 434,920		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	44,988,644
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	146,207,562
Par	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	96,919,097
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	31,937
3	Subtract line <b>2e</b> from line <b>1</b>	3	96,887,160
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 434,920		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	45,020,581
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	141,907,741

### Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation				
SchD_P03_S00_L04	Schedule D, Part III, Line 4	Willamette University has a collection of art and cultural/historical artifacts that consists of paintings, photographs, ceramics, drawings, archaeological artifacts, textiles, sculptures, Native American woven baskets, and oth media. The collection is valued at \$3,625,314 and is held in University Art Museum. The museum exists to support the liberal arts curriculum of Willamette University, and to serve an intellectual and cultural resource for the City of Salem and beyond, through the collection, preservation, exhibition, and interpretation of historical and contemporary art with an emphasis on regional art.				
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The endowment funds held by the University are used to support operations including financial aid, instruction, and buildings				
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The Internal Revenue Service has recognized the University as exempt from tax under the provisions of Section 501(c) (3) of the Internal Revenue Code except to the extent of unrelated business income under Sections 511 through 515 Unrelated business income tax is insignificant, and therefore, no tax provision has been made Accounting principles generally accepted in the United States of America require the University's management to evaluate tax positions taken by the University and recognize a tax liability (or asset) if the University has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS Management has analyzed tax positions taken by the University and has concluded as of May 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The University is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. The University's management believes it is no longer subject to income tax examinations for years prior to fiscal 2009.				
SchD_P11_S00_L04b	Schedule D, Part XI, Line 4b	Student scholarships of \$44,585,661 are net against tuition and fees on the Financial Statement's Statement of Activities to show net tuition and fees. Tuition and fees are grossed up by this amount in Part VIII of the 990 which increases the revenue amount on Line 12. In addition, fundraising direct expenses of \$31,937 are included in the calculation of total revenue as reported in Part VIII, Line 12, but are not included in revenue on the Statement of Activities. Thus, revenue in Part VIII of the 990 is decreased by this amount. The net effect of these two items is an increase in revenue in part VIII of the 990 of \$44,553,724				
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Direct expenses for fundraising events totaling \$31,937 are included in expenses on the Statement of Activities in the audited financial statements. However, they are not included in Part IX of the 990 Rather, they are included in the calculation of total revenue in Part VIII.				
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Student scholarships of \$44,585,661 are netted against tuition and fees on the Statement of Activities to reduce total revenue on the audited financial statements. They are not included in total expenses on the Statement of Activities. Whereas, student				

scholarships are reported as an expense in Part IX of the 990 and are included in total expenses as reported on Line 25

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As Filed Data -

DLN: 93493105000234

# Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization WILLAMETTE UNIVERSITY

**SCHEDULE E** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

 ${\bf Employer\ identification\ number}$ 

	93-0386972			
Pai	rtI		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4 a	Does the organization maintain the following?  Records indicating the racial composition of the student body, faculty, and administrative staff?	4a_	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
Ь	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
	Use of facilities?	5e		No
	Athletic programs?	5f 5g		No No
	Other extracurricular activities?	5 <u>5</u>		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either line 6a or line 6b, explain on Part II  Does the organization contribute that it has complied with the applicable requirements of costions 4.01 through 4.05.	6b		No
,	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
SchE_P01_S00_L03	Schedule E, Part I, Line 3	The University posted its policy in the Oregonian newspaper during the period of solicitation for students
SchE_P01_S00_L06	Schedule E, Part I, Line 6	The University receives Title IV funds for financial aid purposes, as well as federal and state grants for faculty research and programming purposes

Schedule E (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493105000234

OMB No 1545-0047

No

2012

Open to Public

**Inspection** 

### SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Department of the Treasury Internal Revenue Service ► Attach to Form 990. ► See separate instructions.

Name of the organization WILLAMETTE UNIVERSITY

Employer identification number

93-0386972

Part I	General Information on Activities Outside the United States.	Complete	e if the organization answered
	"Yes" to Form 990. Part IV. line 14b.		

- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	<b>(f)</b> Total expenditures for and investments in region
	See Add'l Data					
За	Sub-total					
	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)	1	2			74,856,521

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

z duplicated il additio	Tial space is the	<u>seueu.</u>				
(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	<b>(f)</b> A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Europe (including Iceland and Greenland)	74		offset tuition and fees			
East Asia and the Pacific	29		Applied to student bill to offset tuition and fees			
South America	9		Applied to student bill to offset tuition and fees			
Sub-Saharan Africa	7		Applied to student bill to offset tuition and fees			
Mıddle East and North Afrıca	5		Applied to student bill to offset tuition and fees			
<u> </u>						
'						
'						
1						
	(b) Region  Europe (including Iceland and Greenland)  East Asia and the Pacific  South America  Sub-Saharan Africa  Middle East and North	(b) Region (c) Number of recipients  Europe (including Iceland and Greenland)  East Asia and the Pacific South America 9  Sub-Saharan Africa 7  Middle East and North 5	Europe (including T4 869,420 Iceland and Greenland)  East Asia and the Pacific South America 9 98,500  Sub-Saharan Africa 7 77,375  Middle East and North 5 62,001	(c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement  Europe (including Iceland and Greenland)  East Asia and the Pacific 9 357,990 Applied to student bill to offset tuition and fees  South America 9 98,500 Applied to student bill to offset tuition and fees  Sub-Saharan Africa 7 77,375 Applied to student bill to offset tuition and fees  Middle East and North 5 62,001 Applied to student bill to	(c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement (f) Amount of non-cash assistance  Europe (including Iceland and Greenland)  East Asia and the Pacific 9 98,500 Applied to student bill to offset tuition and fees  South America 9 98,500 Applied to student bill to offset tuition and fees  Sub-Saharan Africa 7 77,375 Applied to student bill to offset tuition and fees  Middle East and North 5 62,001 Applied to student bill to	(b) Region (c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement (f) Amount of non-cash assistance (g) Description of non-cash assistance (f) Amount of non-cash assistance (g) Description of non-cash assistance (f) Amount of non-cash assistance (f) A

### Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> </u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	<b>▽</b>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	굣	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	<b>▽</b>	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<b>₽</b>	No

Schedule F (Form 990) 2012

#### Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Al	so complete this part to provide an	y additional information (see instructions).
Identifier	ReturnReference	Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	Scholarships/grants awarded to students that are studying abroad are applied to their student accounts. The scholarships offset tuition and fees to reduce the amount that students owe to the University. Thus, the students do not physically receive the money. So, there is not a need to have any procedures that differ from students that are attending on campus - other than the verification of participation and completion of the program. The following are the procedures followed by the University for monitoring the use of scholarship/grant funds. The Business. Office notifies the Financial Aid Office of amounts available to award to students each academic year. Financial Aid Office selects recipients based upon criteria established for each type of funding. Financial Aid Office notifies the Business Office of expenditures for each term during the academic year. At yearend, Financial Aid Office and Business Office reconcile accounts for all funds. For donor-contributed scholarships (endowed or annually funded), the Development Office provides annual reports to the donors regarding the use of those funds.

### **Additional Data**

**Software ID:** 12000197

**Software Version:** v1.00

**EIN:** 93-0386972

Name: WILLAMETTE UNIVERSITY

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		66,163,000
Europe (including Iceland and Greenland)			Investments		5,927,000
Europe (including Iceland and Greenland)	1	2	Program Services	Study Abroad Program	1,194,175

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ies Outside Tl</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (including Iceland and Greenland)	0	0	Grantmakıng		869,420
East Asia and the Pacific	0	0	Grantmakıng		357,990
East Asia and the Pacific	0	0	Program Services	Study Abroad Program	107,060

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region				
South America	0	0	Grantmakıng		98,500				
Sub-Saharan Africa	0	0	Grantmakıng		77,375				
Middle East and North Africa	0	0	Grantmakıng		62,001				

DLN: 93493105000234

OMB No 1545-0047

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

**SCHEDULE G** 

**Supplemental Information Regarding** 

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

**Employer identification number** 

VILLAMETTE UNIVERSIT	1				93-0386972	
Part I Fundraising	Activities. Complete	if the or	ganızatı	on answered "Yes" t	to Form 990, Part IV	', line 17.
1 Indicate whether the	organization raised funds	through an	y of the f	ollowing activities Che	eck all that apply	
a Mail solicitations			e	Solicitation of non	-government grants	
<b>b</b> $\Gamma$ Internet and ema	ıl solıcıtatıons		f	☐ Solicitation of gov	ernment grants	
c	ns		g	□ Special fundraisin	g events	
<b>d</b>	ations					
2a Did the organization h or key employees list	nave a written or oral agre ed in Form 990, Part VII)					Г Yes Г N
	ighest paid individuals or least \$5,000 by the orga		ındraıser	s) pursuant to agreeme	ents under which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	of (ii) Activity	(iii) fundrais custo contr contribu	er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
otal			▶			
3 List all states in which	h the organization is regis	tered or lıc	ensed to	solicit funds or has be	len notified it is exemp	l t from registration or

_	dule	more than \$15,000 of fundr	aising event contribut							
		events with gross receipts o	(a) Event #1  FORE Willamette (event type)	(b) Event #2  Believe in Me (event type)	(c) O ther events  0 (total number)	(d) Total events (add col (a) through col (c))				
₽	1	Gross receipts	77,745			103,745				
Revenue	2	Less Contributions	36,210			51,210				
<del>2</del>	3	Gross income (line 1	30,210	15,000	,	31,210				
		minus line 2)	41,535	11,000	)	52,535				
	4	Cash prizes	(	0	)	0				
မွာ	5	Noncash prizes	(	0	)	0				
Expenses	6	Rent/facility costs	11,000	1,000	)	12,000				
ă	7	Food and beverages .	6,476	2,500		8,976				
Drea	8	Entertainment	C	o		0				
₫	9	Other direct expenses .	10,16	800	)	10,961				
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)		(31,937)				
	11	Net income summary Combine li				20,598				
Par	t II	Gaming. Complete if the o	rganization answered	"Yes" to Form 990, Pa	ırt IV, lıne 19, or rep					
Revenue		\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
<u> </u>	1	Gross revenue								
မှာ	2	Cash prizes								
sesued	3	Non-cash prizes								
Direct B	4	Rent/facility costs								
<u>ā</u>	5	Other direct expenses								
	6	Volunteer labor	│ Yes │ No	Г Yes Г Nо	┌ Yes	_				
	7	Direct expense summary Add line	s 2 through 5 in column (	d)						
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)	🛌					
9 a b										
10a b		re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?					

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
<b>.6</b>	Gaming manager information			
	Name 🟲			
	Gaming manager compensation <b>I</b>	<b>\$</b> \$		
	Description of services provided	<b>&gt;</b>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г <sub>Yes</sub> Г <sub>No</sub>
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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**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.

OMB No 1545-0047

DLN: 93493105000234

Open to Public Inspection

Internal Revenue Service Name of the organization

WILLAMETTE UNIVERSITY

Schedule I

(Form 990)

Department of the Treasury ► Attach to Form 990

**Employer identification number** 

93-0386972

Does the organization m     the selection criteria use	ed to award the grants	s and Assistance stantiate the amount of t or assistance? ures for monitoring the us			lity for the grants or ass	ıstance, and	₹Yes 「N
		o Governments and received					l "Yes" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Salem Art Association 600 Mission Street SE Salem, OR 97302	93-0421613	501(c)(3)	6,000		1		Sponsorship of art fair and annual fundraiser
		overnment organizations					10
For Paperwork Reduction Act No		d in the line 1 table		Cat No 50055P			edule I (Form 990) 2012

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.

(a)Type of grant or assistance (b)Number of recipients		(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Scholarships to students	2436	43,120,375			
(2) Student research grants	28	79,058			
(3) Faculty research grants	15	45,577			
(4) Other student awards & prizes	15	8,076			

#### Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

	·	The 2,1 are 111, coralin (5), and any other additional morniation
Identifier	Return Reference	Explanation
SchI_P01_S00_L02		Procedures for monitoring of scholarships - The Business Office notifies the Financial Aid Office of amounts available to award to students each academic year Financial Aid Office selects recipients based upon criteria established for each type of funding Financial Aid Office notifies the Business Office of expenditures for each term during the academic year At year-end, Financial Aid Office and Business Office reconcile accounts for all funds. For donor-contributed scholarships (endowed or annually funded), the Development Office provides annual reports to the donors regarding the use of those funds. Procedures for monitoring research grants. There are several different departments that offer research grants at Willamette Each department has different monitoring procedures for the use of grant funds. However, the monitoring procedures typically involve the following a written and/or verbal report on the research project must be submitted during and/or at the conclusion of the project, receipts must be submitted for reimbursement of project expenditures. Final payment of grant funds is often contingent on the aforementioned items. The Department that awards the grants handles the related monitoring of those grant funds. Procedures for monitoring other student awards and prizes. Award/prize recipients are determined by criteria established by the respective departments. Departments work with the Accounting Office to make sure that the award funds are disbursed to the correct student. Procedures for monitoring other student awards & prizes. Award/prize recipients are determined by criteria established by the respective departments. Departments work with the Accounting Office to make sure that the award funds go to the correct student. Procedures for monitoring grants to organizations - the Office of the President selects organizations in the community to sponsor based upon established criteria. Typically, the mission and goals of the sponsored organization are related to those of the University Sponsorships are c

DLN: 93493105000234

OMB No 1545-0047

#### **Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

**Compensation Information** 

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name	of the	organiz	ation
WILLAM	ETTE U	NIVERSIT	Υ

**Employer identification number** 

		At abox (es) if the organization provided any of the following to or for a person listed in Form attion A, line 1a Complete Part III to provide any relevant information regarding these items charter travel  I Payments for business use of personal use atton and gross-up payments  I Payments for business use of personal residence atton and gross-up payments  I Payments for business use of personal residence atton and gross-up payments  I Payments for business use of personal residence atton and gross-up payments  I Payments for business use of personal residence atton and gross-up payments  I Payments for business use of personal residence atton and gross-up payments  I Payments for business use of personal residence atton and gross-up payments  I Payments for business use of personal use  I Business use of personal use				
Pa	rt I Questions Regarding Compensation					
					Yes	No
1a						
	▼ First-class or charter travel	<u></u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u></u>	Health or social club dues or initiation fees			
	Discretionary spending account	⊽	Personal services (e g , maid, chauffeur, chef)			
b				1b		No
2						
	unectors, trustees, and the CLO/Executive Director,	regard	and the items thetked in line 1a.	2	Yes	
3	organization's CEO/Executive Director Check all tha	t appl	y Do not check any boxes for methods			
	✓ Compensation committee	<u>~</u>	Written employment contract			
	☐ Independent compensation consultant	<u></u>	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VII	I , Section A , line $1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymen	nt?	4a		No
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the revenues of	ıne 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
6	If "Yes," to line 5a or 5b, describe in Part III  For persons listed in Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de		•	7		No
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in F					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section $5.3.4958-6(c)$ ?	rebutt	able presumption procedure described in Regulations			

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) 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

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation		
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990		
See Additional Data Table									

Schedule J (Form 990) 2012

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any	additional information	
Identifier	Return Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	First class travel for business purposes was provided to the University President. The University President is required as a condition of employment to maintain a personal residence in a house provided by the University. The housing arrangement is for the convenience of the University and the house is used for University business. Club memberships were provided to the University President and the Dean of the Graduate School of Management Personal services - housekeeping - were provided to the University President.
SchJ_P01_S00_L01b	Schedule J, Part I, Line 1b	Items noted in 1a were provided based on employment agreements with the University President and other employees, and the University followed the provisions of these agreements regarding payment/reimbursement/provision of these items
SchJ_P01_S00_L04	Schedule J, Part I, Line 4	The employment agreement for President Thorsett includes a position longevity bonus equal to 10% of the base salary amount for each of the five years following July 1, 2011, payable upon completion of five full years of employment as President

Schedule J (Form 990) 2012

**Software ID:** 12000197

**Software Version:** v1.00

**EIN:** 93-0386972

Name: WILLAMETTE UNIVERSITY

Form 990	, Schedule J	, Part II -	Officers,	Directors,	Trustees,	Key	Empl	oyees,	, and I	Highe	st Com	pens	sated E	mploy	ees	
1																

(A) Name	<b>(B)</b> Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Deferred	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form	
			(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
Stephen E Thorsett (1)	370,443 0	0 0	5,548 0	60,875 0	53,378 0	490,244 0	0	
William A Yasınskı (i)		0 0	9,670 0	25,000 0	63,310 0	346,257 0	0	
Kristen Grainger (i)	137,608 0	0 0	30,434 0	14,525 0	16,951 0	199,518 0	0 0	
Peter Letsou (I)	253,078 0	0 0	1,315 0	25,000 0	23,711 0	303,104 0	0 0	
Marlene Moore (1)	201,981 0	0 0	5,405 0	20,233 0	6,767 0	234,386 0	0 0	
Debra Ringold (i)		0	7,487 0	22,889 0	11,223 0	269,354 0	0 0	
Symeon Symeonides (i)	231,560 0	0 0	3,432 0	24,160 0	21,401 0	280,553 0	0 0	
Yvonne Tamayo (I)	185,020 0	0 0	1,087 0	12,996 0	8,784 0	207,887 0	0 0	
James Nafziger (i)		0 0	4,771 0	17,355 0	8,914 0	207,249 0	0 0	
Jeffrey Standen (I)		0 0	778 0	16,675 0	25,857 0	219,735 0	0 0	
Robert Olson (I)	144,355 0	0	1,236 0	14,447 0	42,966 0	203,004 0	0	
David Douglass (i)		0	817 0	17,284 0	8,913 0	198,777 0	0	

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DLN: 93493105000234

2012

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

## **Supplemental Information on Tax Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

**Inspection** Employer identification number

93-0386972

Pa	Part I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	<b>(e)</b> Issue p	rıce	(f)	<b>f)</b> Descriptio	n of purpose	(g) Defeased		(h) beha ıssı	lfof		Pool ncing
										Yes	No	Yes	No	Yes	No
A	State of Oregon - Oregon Facilities Authority	93-6001787	00068608J	06-14-2007	32,409	,522	See F	Part VI of Sc	hedule K		x		Х		Х
В	State of Oregon - Oregon Facilities Authority	93-6001787	68608JMC2	05-06-2010	28,540	,002	See F	See Part VI of Schedule K			х		Х		Х
Pa	Part II Proceeds														
			A			В	· .		С		D				
1	A mount of bonds retired			715,	,000		2,010,000								
2	A mount of bonds legally defea				0		0								
3	Total proceeds of issue		33	2,409,	9,522 28,540,002		28,540,002								
4	Gross proceeds in reserve fun				0		0								
5	Capitalized interest from proc	eeds					0		156,603						
6	Proceeds in refunding escrows	5				4,954,	,180	1	5,246,364						
7	Issuance costs from proceeds	5				419,	,966 373,227		373,227						
8	Credit enhancement from proc	eeds					0 0		0						
9	Working capital expenditures	from proceeds					0		0						
10	Capital expenditures from pro-	ceeds			2:	3,437,	,177	1	4,892,393						
11	Other spent proceeds						0		0						
12	Other unspent proceeds						0		0						
13	Year of substantial completion	า			200	9		20:	1 2			•			
					Yes	No		Yes	No	Yes	<u> </u>	lo	Yes	<u> </u>	No
14	Were the bonds issued as part	t of a current refund	ng issue?			Х			Х						
15	Were the bonds issued as part of an advance refunding issue?							Х							
16	Has the final allocation of proc	ceeds been made?			х			х							
17	Does the organization maintai	n adequate books a	nd records to suppo	ort the final	Х			х							

### Part IIII Private Business Use

			Α		В		С		)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		×				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
For D	appropriate Paduction Act Notice see the Instructions for Form 990		at No. 5010	33E			Sch	adula K (For	m 990\ 2012

Sche	dule K (Form 990) 2012									Page <b>2</b>
Par	Private Business Use (Continued)								1	
				Α		В		<u>C</u>		D
За	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
<b>J</b> a	of bond-financed property?			Х		Х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			0%		0%		%		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth (c)(3) organization, or a state or local government			0 %		0 %		%		%
6	Total of lines 4 and 5			0%		0%		%	% 0,	
7	Does the bond issue meet the private security or payment test?			Х		Х				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements unclean Regulations sections 1 141-12 and 1 145-2?		×		Х					
Do-										
Par	t IV Arbitrage	A			В		С С			
		Yes	No	Yes	No	Yes			Yes	No
1	Has the Issuer filed Form 8038-T?		Х		Х					
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?	-	Х	Х						
b	Exception to rebate?		Х		Х					
С	No rebate due?		Х		Х					
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			•	'	•	'	•		
3	Is the bond issue a variable rate issue?		Х		Х					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х					
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
					•	•	•	•		

Part IV Arbitrage (Continued)

			A	1	В		<u> </u>		D	
			Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds investe contract (GIC)?	ed in a guaranteed investment	Х			Х				
b	Name of provider		GE Capitol							
С	Term of GIC			120109						
d	Was the regulatory safe harb value of the GIC satisfied?	or for establishing the fair market	Х							
6	Were any gross proceeds inv period?	rested beyond an available temporary		Х		X				
7	Has the organization established the requirements of section :	shed written procedures to monitor 148?	Х		Х					
Pa	Irt V Procedures To Ur	dertake Corrective Action								
			A	\	В	1	С	1	D	
			Yes	No	Yes	No	Yes	No	Yes	No
1	that violations of federal tax and corrected through the vo	shed written procedures to ensure requirements are timely identified iluntary closing agreement program if able under applicable regulations?		х		Х				
P	art VI Supplemental I	information. Complete this part to	o provide additioi	nal informati	on for respoi	nses to ques	stions on Sch	edule K (see	: instructions	).
	Ident if ier	Return Reference				Explai		,		
Sch	K_P01_S00_L00f	Schedule K, Part I, Column f	Line a) - Bond is outstanding line the Series 2004 68608JMC2 Th remaining balance	of credit, to fir bonds, which ne proceeds of	nance the cons were issued or the bonds wer	struction of fiven June 30, 200 e used to repa	e major project 04 Line B) - Bo ay the outstand	ts, and to adva ond issue date ling line of cre	ance refund \$8, : 5/6/2010, CU dit, to advance	.400,000 of JSIP refund the

provide funding for several capital projects, and to assist with other facility upgrades and improvements

Schedule K (Form 990) 2012

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DLN: 93493105000234

OMB No 1545-0047

2012

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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Name of the orga WILLAMETTE UNIVER							En	nploye	r identii	fication	numbe	r	
Part I Exces	s Benefit Tran	sactions (	section 5	01(c)(3) a	nd section 5	01(c)(4) or		-0386 ations					
	te if the organizati										10b		
<b>1</b> (a) Name o	of disqualified pers	on <b>(b)</b> Re	lationship	between dis	qualified	(c) Descrip	otion o	ftrans	saction		( <b>d)</b> Corr	ected?	
			person and	lorganizatio	on						Yes	No	
2 Enter the am	ount of tax incurre	d by organiza	ation mana	ners or disc	ualified perso	ns during the	veari	ınder	section				
									<b>&gt;</b> \$				
3 Enter the am	ount of tax, if any,	on line 2, ab	ove, reimb	ursed by the	e organization				<b>▶</b> \$				
	ns to and/or F				EZ Dort // lu	no 20a or Eo	rm 00	0 Bar	+ T\/   lun	. 26 .	rıf+bo		
	nization reported ar					ne 30a, 01 10	כל וווו	0, F ai	C I V , IIII	e 20, 0	i ii tiie		
(a) Name of	(b) Relationship				(e)Original	(f)Balance	(g)	) In	(h	)	(i)Wr	itten	
ınterested	with organization	of loan	or from t		principal	due	defa	ult?	Approved				
person			organizat	on?	amount			by boo					
			То	From			Yes	No	Yes	No	Yes	No	
												<u>'</u>	
											_		
											_		
											_		
									<u> </u>		_		
			<u> </u>						<u> </u>		_		
otal			<b>▶</b> \$										
	its or Assistan					TV line 27							
	plete if the organ					•			(-)	D	6		
(a) Name of inte person		atıonshıp bet ted person ar		) Amount o	fassistance	(d) Type o	1 45515	tance	(e)	Purpos	e of ass	istance	
<b>P</b> 2.22		rganization											

Part W Business Transactions					
Complete if the organization	<u>on answered "Yes" on F</u>	<u>form 990, Part IV, lın</u>	e 28a, 28b, or 28c.		
(a) Name of Interested person			(d) Description of transaction	n (e) Sharing of organizatio revenues?	
				Yes	No
(1) Brian Hoyt	Son of trustee George Hoyt	118,134	Employment		No
(2) Mary DeMuniz	Spouse of Trustee Paul DeMuniz	49,461	Employment		No
(3) Karı Maurer	Daughter of Former Officer Robert Olson	46,525	Employment		No
					·

### Part V Supplemental Information

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

Identifier	Return Reference	Explanation

Schedule L (Form 990 or 990-EZ) 2012

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**Noncash Contributions** 

DLN: 93493105000234

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

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

Name of the organization WILLAMETTE UNIVERSITY

**Employer identification number** 

				93-0386972
art I Types of Property		Γ	T	
	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining noncash contribution amounts
Art—Works of art	Х	34	1	Opinion of Experts
Art—Historical treasures .			·	·
Art—Fractional interests				
Books and publications	Х		149,014	Sales of comparable books
Clothing and household goods			·	·
Cars and other vehicles				
Boats and planes				
Intellectual property				
Securities—Publicly traded .	Х	29	1,192,541	Selling price
Securities—Closely held stock .				
Securities—Partnership, LLC, or trust interests				
Securities—Miscellaneous				
Qualified conservation contribution—Historic				
structures				
contribution—Other				
Real estate—Residential .				
Real estate—Commercial				
Real estate—O ther				
Collectibles				
Food inventory				
Drugs and medical supplies .				
Taxidermy				
Historical artifacts				
Scientific specimens				
Archeological artifacts				
Musical				
Other ► (Instruments)	X	2	8,200	Cost of donated Items
Fundraiser				
Other ► ( <u>items</u> )	X	10	1,198	Cost of donated Items
Other ► (				
sical				
uctures/Equipment )	X	2	1,200	Cost of donated items
Food, beverages				
and other				
items for				
campus		_		
Other► ( <u>events</u> )	X	5	·	Cost of donated items
Number of Forms 8283 received for which the organization comple				29
During the warm did the area	ntion ====	o by contribution	who was a whale in Dect T. I.	Yes N
a During the year, did the organiza				
must hold for at least three year			on, and which is not require	
for exempt purposes for the enti				30a N
<b>b</b> If "Yes," describe the arrangem  Does the organization have a gi				
Does the organization have a gr	πacceptan	ce policy that requires the	review of any non-standard	contributions? 31 Yes
Does the organization hire or us contributions?		ies or related organizations	to solicit, process, or sell	noncash •••• 32a Yes
<b>b</b> If "Yes," describe in Part II				
If the organization did not repor	t an amount	: ın column (c) for a type of	property for which column (	a) is checked,
describe in Part II				1 1 1

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
SchM_P01_S00_L00		Part I, column b represents the number of donors who made contributions for the applicable categories
SchM_P01_S00_L32b	· · · ·	Securities that are donated to the University are sold by investment brokerage firms

Schedule M (Form 990) (2012)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493105000234

OMB No 1545-0047

2012

Open to Public Inspection

### Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization
WILLAMETTE UNIVERSITY

Employer identification number

93-0386972

ldentifier	Return Reference	Explanation
F990_P05_S00_L04b		Willamette University filed a Report of Foreign Bank and Financial Accounts TD F 90-22 1, related to the financial account in the country noted in Part V, Line 4b

ldentifier	Return Reference	Explanation
F990_P06_S0A_L01a	Form 990, Part VI, Section A, Line 1a	The University Bylaw's grant broad authority to the Executive Committee of the Board of Trustees to act as an interim Board. It is comprised of the Chair of the Board, the Vice Chair of the Board, the Treasurer, the Secretary, the President of the university, and the chair of the following committees Endowment, Financial Affairs & Audit, Facilities & Technology, College of Liberal Arts, Atkinson Graduate School of Management, College of Law, Graduate School of Education and Advancement All of the voting members of the Executive Committee are members of the Board of Trustees or officers of the corporation

ldentifier	Return Reference	Explanation
F990_P06_S0A_L01b		As is noted in Schedule O for question 12c, board members with a conflict of interest disclose this fact to either the Chairman of the Board, the University President, or the Chair of the relevant committee. Then, an appropriate course of action is taken such as refraining from participation in the matter to which the conflict relates.

ldentifier	Return Reference	Explanation
		Donald Brown, trustee, and Patricia Smullin, trustee Family relationship Roderick Wendt, trustee, and Steven Wynne, trustee Business relationship

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b		(11a) The Form 990 and its related schedules, except for Schedule B, was provided to all members of the Board of Trustees prior to the University filing the completed form with the IRS (11b) The Form 990 and its accompanying schedules are reviewed by the Controller, the Vice President for Financial Affairs and the President. Then, the draft of the 990, except for Schedule B, is posted to a secure website that can only be accessed by members of the Board of Trustees. Board members are notified via e-mail that the 990 is available to review on the secure website. In addition, both the Finance Committee and the Executive Committee review and discuss the return, except for Schedule B. After the form has been reviewed by all noted parties it is modified (if necessary) and finalized. Then, it is submitted to the IRS.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	The conflict of interest policy that applies to all Officers, members of the Board of Trustees and Key Employees is distributed and reviewed annually, all Trustees, Officers and Key Employees must complete, sign, and return the policy to the President's Office or the Vice President for Financial Affairs. The Board's process for addressing conflicts of interest in accordance with the adopted above-referenced policy is as follows: "If an individual believes that he or she may have a conflict of interest, the individual shall promptly and fully disclose the conflict on a form and to the Chairman of the Board of Trustees or President, or the Chair of any Committee of the Board considering the matter, and shall refrain from participating on behalf of the University in the matter to which the conflict relates until the conflict question has been waived by vote of the Board of Trustees or a Committee of the Board after the material facts of the transaction and the individual's interest are disclosed or known to the Board or Committee of the Board, or otherwise resolved in compliance with the Oregon Nonprofit Corporation Act (ORS ch. 65)." The Board Chair, President, Board Treasurer and Administrative Secretary to the Board monitor compliance on an ongoing basis. Monitoring activities may include review of meeting minutes by the Administrative Secretary to identify potential/developing conflicts or conflicts that may have already occurred, informal discussions with Committee chairs or Board officers to raise awareness of conflicts and potential conflicts.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	An ad hoc committee of members of the Board of Trustees established the compensation for the President of the University The committee consisted of three members that did not have a conflict of interest per IRS regulations section 53 4958-6(c)(1)(iii) In order to establish an appropriate level of compensation, the committee gathered data from similar sized private liberal arts colleges located in the northwestern United States. The data from the schools was obtained directly from each institution. In addition, a nationwide review of compensation as reported on the 990's of other similar sized private liberal arts universities was performed. Once the amount was decided upon the information was passed on to the Executive Committee. The Executive Committee subsequently approved the compensation package. The last time this process was undertaken by the University was in August of 2013.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L18		The University does not make Form 1023 or 1024 available to the public as it was filed prior to July 15, 1987 and a copy was not held on July 15, 1987 At the same time, the University does post a copy of its current IRS exemption letter on its' website

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	'	Audited Financial Statements are posted on the University's website. The conflict of interest policy and the University's governing documents are not made available to the public.

Identifier Return Reference		Explanation
F990_P07_S0A_L01a	Form 990, Part VII, Section A, Line 1a	Paul DeMuniz, a board member listed under Line 1a, was compensated as an Adjunct Professor at Willamette University's College of Law His compensation was not related to his position as a member of the board of trustees

SCHEDULE R Related Ord

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

# **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**Employer identification number** 

DLN: 93493105000234

<u> 2012</u>

Open to Public Inspection

WILLAMETTE UNIVERSITY				93-03869	72			
Part I Identification of Disregarded Entities (Complet	e ıf the organızatıor	n answered "Yes" to	o Form 990, Pa		, _			
(a) Name, address, and EIN (If applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Dı	<b>(f)</b> irect controlling entity		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations (Complete if e tax year.)	the organization a	nswered "Yes'	 ' to Form 990, P	art IV,	lıne 34 because ı	t had o	ne
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity (if section 501)	(e) Public charity status (if section 501(c)(3))		Section (13) co	ontrolle tity?
							Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35 Y			Schedule R (For	m 990) 2	2012

Part III Identification of Related because it had one or more	related organizations trea	ted as a part	e <b>rsnip</b> :nershij	(Comp durin	piete g the	tax year	ganız r.)	ation an	swerea "Y	es" to	Form	1 990, Part	10, 1	ine 3	34	
			(c) Legal domicile (state or foreign country)	enti	ct Iling	(e) Predomininome(relaterexcluded fax undersections 5	ated, d, rom er	<b>(f)</b> Share of total income	(g) Share of e end-of-year assets	r allocai	ortionate tions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging tner?	(I Perce owne	<b>k)</b> entage ership
						,				Yes	No		Yes	No	]	
Part IV Identification of Related line 34 because it had one of										iswere	ed "Ye	s" to Form	990,	Part	t IV,	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Lega domici (state or fo countr	lle oreign		Direct	(d) controlling entity	Type (C cor	(e) of entity p, S corp, trust)	(f) Share of tota Income		(g) re of en of-year assets	d- Percen owner	tage		(i) Section (b)(1 control entity	512 3) lled y?
(1) Charitable remainder	Beneficial interest				N/A	-	Т					_		F	Yes	No No
unitrusts (31) 900 State Street Salem, OR 97301		OR														
(2) Estate Trust (1)	Beneficial interest				N/A	-	Т									No
900 State Street Salem, OR 97301		OR														

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No		
<b>1</b> Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more rela	ated organizations li	sted in Parts II-IV?						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No		
b	<b>b</b> Gift, grant, or capital contribution to related organization(s)								
C	Gift, grant, or capital contribution from related organization(s)				1c		No		
d	d Loans or loan guarantees to or for related organization(s)								
e	Loans or loan guarantees by related organization(s)				1e		No		
	Dividends from related organization(s)				1f		No		
g	Sale of assets to related organization(s)				1g		No		
h	Purchase of assets from related organization(s)				1h		No_		
i	xchange of assets with related organization(s)				1i		No_		
j	ease of facilities, equipment, or other assets to related organization(s)				1j		No		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No		
I	erformance of services or membership or fundraising solicitations for related organization(s)				11		No		
m	<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)								
n S	haring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No		
0	Sharing of paid employees with related organization(s)				10		No		
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No		
q	Reimbursement paid by related organization(s) for expenses				1q		No		
r	Other transfer of cash or property to related organization(s)				1r		No		
s	Other transfer of cash or property from related organization(s)				1s		No		
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including co	overed relationships	and transaction thresholds					
	(a)	(b)	(c)	(d)					
	Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amo	ount in	ivolved			

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

**Additional Data Return to Form** 

**Software ID:** 12000197

**Software Version:** v1.00

**EIN:** 93-0386972

Name: WILLAMETTE UNIVERSITY

Schedule R (Form 990) 2012

Page **5** 

### Part VII Supplemental Information

	Complete this part to provide additional information for responses to questions on Schedule R (see instructions)										
	Identifier Return Reference Explanation										
_											