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DLN: 93493045015594

## Form **990**

Department of the Treasury Internal Revenue Service

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

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

2012

OMB No 1545-0047

Den to Public

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

Open to Public Inspection

A F-	4 1	2012 1			l: 0C 20	2012		
			endar year, or tax year beging C Name of organization	inning 07-01-2012 , 2012, and end	aing 06-30	)-2013	<b>T</b> p ===================================	- idtifiti
_		applicable	The University of Connecticut	D Employe	r identification number			
_	lress cl	_	Inc Doing Business As	06-607	0722			
— Nar	ne cha	ange	Doing Business As					
Init	ıal retu	ım		ox if mail is not delivered to street address)	Room/sui	te	E Telephone	e number
Ter	mınate	ed	2390 Alumnı Drive					
– <sub>Am</sub>	ended	return	City or town, state or country,	and ZIP + 4	<u> </u>		(860)48	86-5000
— App	lication	n pending	Storrs, CT 06269				<b>G</b> Gross rece	eipts \$ 71,358,633
			<b>F</b> Name and address o	f principal officer		H(a) Is th	his a group re	eturn for
			Kevin A Edwards				ates?	⊤Yes <b>∀</b> No
			2390 Alumnı Dr Storrs,CT 06269			HZEN .		
			,					ıncluded?
[ Ta:	x-exen	npt status	▼ 501(c)(3)	) ◀ (insert no )	527			
ı w	ebsite	e: ► ww	w foundation uconn edu			H(c) Gro	up exemption	n number <b>►</b>
<b>K</b> Forr	n of or	rganızatıon	Corporation Trust Asso	ociation Other 🕨	•	<b>L</b> Year of f	ormation 1964	<b>M</b> State of legal domicile CT
Pa	rt I	Sum	ımary			_		
Governance		The Univ	versity of Connecticut Found vate sources for the benefit	nission or most significant activities dation, Inc mission is to solicit, rec of all campuses and programs of the on discontinued its operations or di	ceive, inv e Univers	ity of Conne	ecticut	
	_						ı	- I
Activities &				everning body (Part VI, line 1a) .				3 47
Ě				pers of the governing body (Part VI) ed in calendar year 2012 (Part V, lii			<u> </u>	<b>5</b> 158
ទ្ធ				e if necessary)			· ·	6 104
•				om Part VIII, column (C), line 12			· ·	<b>7a</b> -250,748
	l			ome from Form 990-T, line 34 .			<b>⊢</b>	<b>7b</b> -323,773
	<u> </u>			,		Pri	or Year	Current Year
	8	Contri	ibutions and grants (Part VI	II, line 1h)		<u> </u>	39,505,20	
흜	9			II, line 2g)			8,704,30	
Revenue	10	_	•	olumn (A), lines 3, 4, and 7d)			12,276,36	
æ	11			(A), lines 5, 6d, 8c, 9c, 10c, and 1			-138,81	
	12			h 11 (must equal Part VIII, column	-			
				<u> </u>			60,347,05	
	13			(Part IX, column (A), lines 1–3)			28,986,70	6 33,415,410
	14			Part IX, column (A), line 4)				0
8	15	Saları 5–10		ployee benefits (Part IX, column (A	(), lines		10,359,34	4 10,866,218
Expenses	16a		•	t IX, column (A), line 11e)			638,51	4 636,163
훈	ь	Total fu	ındraısıng expenses (Part IX, colur	nn (D), line 25) 🕒 11,733,911				
ш	17	Other	expenses (Part IX, column	(A), lines 11a-11d, 11f-24e) .			5,906,93	3 8,100,611
	18	Total	expenses Add lines 13-17	(must equal Part IX, column (A), lı	ine 25)		45,891,49	7 53,018,402
	19	Reven	ue less expenses Subtract	line 18 from line 12			14,455,55	6 17,634,652
Net Assets or Fund Balances						_	ng of Current Year	End of Year
988 888 888	20	Total	assets (Part X, line 16) .				398,575,98	8 458,795,532
2 E	21	Total	liabilities (Part X, line 26)				14,635,69	8 45,325,934
	22		ssets or fund balances Subt	tract line 21 from line 20			383,940,29	0 413,469,598
Pai	t II	Sign	nature Block					
ny ki	nowled Frer ha	dge and as any k	belief, it is true, correct, and nowledge	e examined this return, including ac d complete Declaration of preparer		an officer) is		
			e or print name and title					
		<u> </u>	Print/Type preparer's name	Preparer's signature	Da	ate Ch	eck I if P	TIN
Paid	t	<u> </u>				se	lf-employed	
	- pare		Firm's name 🕨			Fir	m's EIN ►	
	On		-ırm's address <b>►</b>			Ph	one no	

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

**Yes No** 

33,415,410

Total program service expenses ►

Part IV	Checklist of	Required	<b>Schedules</b>

			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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, 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	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of	11c		No
d	Its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Vaa	
	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	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		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		No
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		No
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			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, 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	Yes	
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Encert the number reported in Box 3 of Form 1098 Enter+0if not applicable   1	Par	Statements Regarding Other IRS Filings and Tax Compliance			_
be Better the number of Forms W-2G included in the 1s Easer-0-clinat applicable comparison comply with backing subhibility place for reportable payments to vendors and reportable garring (genelong) winterpot to prove winters?  2 Defect the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed of the calendar year ending with or within the year covered by this return.  3 Did the organization and on the 1s I and 2 size greater than 250, you may be required to e-file cell employment but stratums?  3 Did the organization have unrolated blumbers gross income of \$1,000 or mere during the year?  3 Did the organization have unrolated blumbers gross income of \$1,000 or mere during the year?  3 Did the organization have unrolated blumbers gross income of \$1,000 or mere during the year?  4 Did the organization have unrolated blumbers gross income of \$1,000 or mere during the year?  5 Did the organization have unrolated blumbers gross income of \$1,000 or mere during the year?  6 Did the year that Garbon 900 or first the year (70%) growed an organization show over, a financial account, in a foreign country, \$0C\$  See instructions for filing requirements for Form TDF \$0-221, Report of Foreign Bank and Financial Accounts  5 Did did any blashed party profits the diagnostical that it was or as a party to a probabled tax shelter transaction?  5 Did did any blashed party profits the agnituration in EFF profits of Foreign Bank and Financial Accounts  5 Did the organization she was ensured gross incerption that are not trace decidable as chaintable contributions and party for goods and services provided to the paymor?  5 Did these years and the programation in the two accounts an express statement that such contributions and party for goods and services provided to the paymor?  5 Did the organization receive a something the value of the goods or services provided to the paymor?  6 Did the organization organization analytic the donor of the value of the goods or services provided to the paymor?  7 D		Check if Schedule O contains a response to any question in this Part V	•	Yes	No
Description of the organization comply with backing withholding rules for reportable payments to vendors and reportable gaming (graining yoursing to proceed where with the service of the process with the process of t	1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   205			
agamma (cambina) wannas to prize wanners?  2 Enter the number of employees reported on From W-3, Transmittal of Waga and Tax Statements, filed for the calendar yeer ending with or within the year covered by this return.  3 If the statements, filed for the calendar yeer ending with or within the year covered by this return.  3 If the statements, filed for the calendar yeer ending with or within the year covered by the statements, filed for the calendar year, did the organization file all required federal employment tax returns?  3 If the organization are unrelated business gross income of \$1,000 or more during the year?  3 If Yes, 11/14/25, 1746, "provide an explication on the year?  3 If Yes, 11/14/25, 1746, "provide an explication on the water of the calendar year, did the organization have an interest in, or a signiture or other authority over, a insencial account in a foreign country. POC  5 If Yes, 1746, the the name of the foreign country (such as a bank account, securities account, or other financial accounts accounts of thing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 If Yes, 1746 to line 5 are 55, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 If Yes, 1740 the 5 are 55, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 If Yes, 1740 the organization have annual gross receipts that are normally greater than \$100,000, and did the organization showed annual gross receipts that are normally greater than \$100,000, and did the organization should annual than the year country of the organization should be organization and party for goods and services provided?  5 If Yes, 1740 the organization and year party of the proposition of the year party of the organization and party for goods and services provided?  7 If Yes, 1740 the organization and year party of the proposition of the year p	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
Tax Statements, field for the calendar year enting with or within the year covered by this return.  If it least one is reported on line 2 a, did the organization file all required federal employment tax returns?  Abota. If the sum of fines 1 and 2 a list greater than 250, you may be required to e-fine (see instructions)  30. Did the organization have unrelated business gross income of \$1,000 or more during the year?  31. Did the organization have unrelated business gross income of \$1,000 or more during the year?  32. Did the organization is count in a foreign country (such as a sub-ak-account, securities account;) or other authority one; a financial account in a foreign country (such as a sub-ak-account, securities account?)  32. Example the arms of the foreign country EOC  33. Did the organization is perty to a prohibited tax shelter transaction in a foreign country EOC  34. Example the arms of the foreign country EOC  35. Was the organization a perty to a prohibited tax shelter transaction?  36. Did any taxable party notify the organization that it was on is a party to a prohibited tax shelter transaction?  37. Policy of the organization and party to a prohibited tax shelter transaction?  38. One she organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that swere not tax deductable?  38. One she organization include with every solicitation an expenses statement that such contributions orgifis were not tax deductable?  39. One she organization receive a payment in excess of \$7.5 made party as a contribution and party for goods and services provided to the payer?  49. Ves.  40. If Yes, if the organization include with every solicitation and expenses statement that such contributions or gross across the arms of the such and the organization and party for goods and services provided to the payer?  40. If Yes, if the organization is expense of tample personal property for which it was required to least year.  40. If Yes, if the organiza	С		1c	Yes	
b If at least one is reported on line 2 a, did the organization file all recurred desiral employment tax returns?  Note: If the sum of lines 1 and 20 is greater than 20 is, own with the required to e-life (see instructions).  30 Did the organization have unrelated business gross income of \$1,000 or more during the year?  31 Yes  32 If Yes, has in filed a Form 990-T for the year? If Yes, provide an optimation in Schedule 0.  32 A Kara yman during the calendary year, did the organization have an interest in, or a signature or other authority over, a historical scount in a foreign country. (such as a bank account, securities account, an other financial account in a foreign country. (such as a bank account, securities account, and the interest in the superior of the responsibility of the country in the country of the organization for the responsibility of the country over, a historical scount in a foreign country. (such as a bank account, securities account, and the responsibility of the country over, a historical scount in a foreign country. (such as a bank account, securities account, and the responsibility of the country over, a historical scount in a foreign country. (such as a bank account, securities account, and the responsibility of the country over, a historical scount in a foreign country. (such as a bank account, securities account, and the responsibility of the country of the organization has been such as a country of Foreign Bank and Financial Accounts  50 If Yes, the line of the organization has the organization that the such contributions of Forms 100,000, and did the organization has a annual gross receipts that are normally greater than \$100,000, and did the organization has a sound and services of the organization include with every solicitation an express statement that such contributions.  60 If Yes, it did the organization include with every solicitation and expert set of the such as a contribution or great set of the organization receive a payment in excess of \$75 made partly 12 to 10 to 10 to		Tax Statements, filed for the calendar year ending with or within the year covered			
b. If Fives, "has it filed a Form 990-1 for this year" If "Wo," provide an explanation in Schedule O.  4a A kany time during the celendar year, did the organization have an interest in, or a signisture or other authority accounty?  4b A kany time during the celendar year, did the organization have an interest in, or a signisture or other authority accounty?  5c If "Yes," enter the name of the foreign country. ▶ OC.  5c If "Yes," enter the name of the foreign country. ▶ OC.  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization object any contributions that were not ax deductible as charitable contributions?  5c C  6c Does the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170c).  8d Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?  7d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  8d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9d If the organization developed the solice of tangible personal property for which tix was required to life pairs.  9d If the organization makes any time during the year?  9d If the organization makes any time during the year?  9d If the organization makes any tixable distributions under section 509(a) supporting o	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
b. If FVes, *has it field a Form 990-1 for this year* If *No.* provide an explanation in Schedule O .  4a A Kany time during the celerator year, did the organization have an interest in, or a significant or other numbers of the received as a bank account, securities account, or other financial account in a foreign country *PCC*  5e instructions for filing requirements for Form TDF 90-22 1, Report of Foreign Bank and Financial Accounts accountly.  5 Was the organization in party to a prohibited tax sheller transaction at any time during the tax year?  5 Was the organization aparty to a prohibited tax sheller transaction at any time during the tax year?  5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did 1 the organization solici any contributions that were not ax deducible as cheritable contributions?  5 If If *Yes,** dot the organization include with every solicitation an express statement that such contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible as cheritable contributions or gifts were not tax deducible.  7 Organization tatal may receive deductible contributions under section 170c).  8 Did the organization receive applying the contributions under section 170c).  9 If *Yes,** dot the organization sell, exchange, or otherwise dispose of tangible personal property for which tit was required to file Prim 282?  10 If the organization sell, exchange, or otherwise dispose of tangible personal property for which tit was required to file Prim 282?  11 If the organization in the contribution of qualified intellectual property, did the organization file a Prim 1092.  12 If the organization make any taxable distribution t	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
4a A tay time during the calendary 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 accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over the country of the					
See instructions for filing requirements for form TDF 90-22 1, Report of Foreign Bank and Financial Accounts  Sae instructions for filing requirements for form TDF 90-22 1, Report of Foreign Bank and Financial Accounts  Say Was the organization a party to a prohibited tax shelter transaction?  Say Was the organization a party to a prohibited tax shelter transaction?  Shows the organization between the same and the organization solicit any contributions that were not tax deductible as chantable contributions?  So Does the organization heve annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  So If Y'es," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  By If Yes," did the organization notify the donor of the value of the goods or services provided?  Organization state may receive deductible contributions under section 170(c).  If Y'es," indicate the number of Forms 8282 filed during the year.  Did the organization state the number of Forms 8282 filed during the year.  Did the organization state the number of Forms 8282 filed during the year.  Form 1999 or filed the organization state of the state of the organization file form 8289 as required?  To the organization flow or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year?  Socion 501(c)(12) organizations. Enter  In Initiation fees and cepital contributions included on Part VIII, line 12.  Did fores receipts, i	4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a	Yes	
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  53. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  54. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  55. Did any taxable party notify the organization file Form 886-7?  56. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization melude with very solicitation an express statement that such contributions or gifts were not tax deductible?  76. Organization shelt may receive deductible contributions under section 170(c).  87. Organization state may receive deductible contributions under section 170(c).  88. 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?  98. Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  99. Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  90. Did the organization receive a contribution of the value of the goods or services provided?  90. Did the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file form 8899 as required?  91. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file form 8899 as required?  92. Sponsoring organizations malntaining donor advised funds and section 500(a) supporting organizations. Did the supporting organizations make any taxable distributions under section 4966?  91. Did the organization make any taxable distributions under section 4966?  92. Did the organization make any taxable distributions and organization file form 890 in lieu of Form 1041?  93. Section 501(c)(7) organizations. Enter  94. Organization from the f	b	If "Yes," enter the name of the foreign country ▶ O C			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 If "Yes," to line 5 a or 5b, did the organization file Form 8886-17  5 So 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 chantable contributions?  5 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made pertly as a contribution and partly for goods and services provided to the payor?  9 Did the organization notify the donor of the value of the goods or services provided?  10 If "Yes," indicate the number of Forms 8282 filed during the year  11 If "Yes," indicate the number of Forms 8282 filed during the year  12 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  13 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8282 filed during the year are quired?  14 If the arganization received a contribution of qualified intellectual property, did the organization file Form 8282 filed years are quired?  15 Did the organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did this supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Better  1 Intiation fees and capital contribution to a donor, donor advised funds.  1 Did the organization make a distribution to a donor, donor advised funds.  2 Did the organization make a distribution to a donor, donor advised funds.  3 Did the organization make a distribution to a donor, d		See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
c If "Yes," to line 5 a or 5 b, did the organization file Form 8886-T?  5c   Second Form 1	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
So 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?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization stat may receive deductible contributions under section 170(c).  9 Did the organization stat may receive deductible contributions under section 170(c).  16 If "Yes," did the organization notify the donor of the value of the goods or services provided to the payor?  17 Did the organization notify the donor of the value of the goods or services provided?  18 Point of the organization notify the donor of the value of the goods or services provided?  19 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  19 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  10 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required?  10 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  20 Did the organization make any taxable distributions under section 4966?  30 Did the organization make any taxable distributions under section 4966?  31 Did the organization make any taxable distributions under section 4966?  32 Section 501(c)(7) organizations. Enter  33 Torganization make and distribution to a donor, donor advisor, or related person?  34 Did the	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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 I''es, "find the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  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?  If I''es, "did the organization notify the donor of the value of the goods or services provided?  To be a services provided to the payor?  If I''es, "did the organization notify the donor of the value of the goods or services provided?  To be a services provided to the payor?  If I''es, "did the organization notify the donor of the value of the goods or services provided?  To be a services provided to the payor?  To be a services provided to the pay	c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
organization solicit any contributions that were not tax deductible as charitable contributions?	62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			No
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 7 Organizations that may receive a payment in excess of \$7.5 made partly as a contribution and partly for goods and services provided to the payor? 7 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 2 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? 3 Sponsoring organizations maintaining donor advised funds. 4 Did the organization make any taxable distributions under section 4966? 5 Section 501(c)(7) organizations. Enter 5 Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(c)(12) organizations. Enter 2 Gross income from members or shareholders 3 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 4 Did Fives,* enter the amount of tex-exempt interest received or accrued during the year  3 Section 501(c)(29		organization solicit any contributions that were not tax deductible as charitable contributions?	Od		NO
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b Yes  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8 28 22?  Reflection 8 28 22.  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?  To Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  To If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  Sponsoring organizations make any taxable distributions under section 4966?  Sponsoring organizations make any taxable distributions under section 4966?  Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12.  Forms income from members or shareholders.  Section 501(c)(12) organizations. Enter  Gross income from members or shareholders.  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  Section 501(c)(29) qualified nonprofit health insurance issues.  Section 501(c)(29) qualified nonprofit health insurance issues.  Section 501(c)(29) qualified nonprofit health insurance issues.  Enter the amount of reserves the organization is required to maintain by the state in which the organization is licensed to issue qualified health plans in more than one state?  Note. See		were not tax deductible?	6b		
the If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of transible personal property for which it was required to file Form 8282?  c Did the organization sell, exchange, or otherwise dispose of transible personal property for which it was required to file Form 8282?  d Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations maintaining donor advised funds and section 509(a) (3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a) (3) supporting organizations. Did the organization make any taxable distributions under section 4966?  g Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  g Sponsoring organizations Enter  initiation fees and capital contributions included on Part VIII, line 12  f Cross receipts, included on Form 990, Part VIII, line 12  f Cross receipts, uncluded on Form 990, Part VIII, line 12, for public use of club facilities  G Gross receipts, uncluded on Form 990, Part VIII, line 12, for public use of club facilities  G Gross receipts, uncluded on Form 990, Part VIII, line 12, for public use of club facilities  G Gross receipts, uncluded on Form 990, Part VIII, line 12, for public use of club facilities  G Gross receipts, uncluded on Form 990, Part VIII, line 12, for public us		Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
file Form 8282?	b		7b	Yes	
b If "Yes," indicate the number of Forms 8282 filed during the year	c				NI -
contract?	d		/c		NO
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  h If the organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, average and the supporting organization, average and the supporting organization and the supporting organizations. Did the supporting organization make and the supporting organization and the supporting organization have excess business holdings at any time during the vear?  9 Sponsoring organization make any taxable distributions under section 4966?  9a No.  9b No.  9cito 10 the organization make any taxable distributions under section 4966?  9a No.  9b No.  9cito 10 the organization make any taxable distributions under section 4966?  9b No.  9cito 10 the organization make any taxable distributions under section 4966?  9b No.  9cito 10 the organization make any taxable distributions under section 4966?  9a No.  9b No.  9cito 10 the organization make any taxable distributions under section 4966?  9b No.  9cito 10 the organization support to a donor, donor advisor, or related person?  9b No.  10a	e		7e		No
required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  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?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  Section 501(c)(7) organizations. Enter  Section 501(c)(12) organizations. Enter  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter  Gross income from members or shareholders  Section 501(c)(12) organizations. Enter  In the organization in the sources (Do not net amounts due or paid to other sources against amounts due or received from them)  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 year  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  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 in the organization is sequented to maintain by the states in which the organization is sequented to maintain by the states in which the organization is sequented to maintain by the states in which the organization is sequented to maintain by the states in which the organization is sequented	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
Form 1098-C?  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?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter  Gross income from members or shareholders  Section 501(c)(12) organizations. Enter  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  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 year  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  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 .  13a  Note that the supporting organization is negative to maintain by the states in which the organization is licensed to issue qualified health plans .  13b  Contact the supporting organization is prequired to maintain by the states in which the organization is licensed to issue qualified health plans .  Section 501(c) (29) qualified health plans in more than one state?  Note See the instructions for additional information the organization must report on Schedule O	g				No
the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	h		7h		No
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?		the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess		1	N.o.
a Did the organization make any taxable distributions under section 4966?	9		-		NO
b Did the organization make a distribution to a donor, donor advisor, or related person?			9a		No
a Initiation fees and capital contributions included on Part VIII, line 12 10a  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders			9b		No
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders					
facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
a Gross income from members or shareholders	b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	1	Section 501(c)(12) organizations. Enter			
against amounts due or received from them )	а	Gross income from members or shareholders			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
year	2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
3 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b				
Note. See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	3	<u> </u>	1		
In which the organization is licensed to issue qualified health plans	a	- · · · · · · · · · · · · · · · · · · ·	13a		No
	b	Enter the amount of reserves the organization is required to maintain by the states			
4a Did the organization receive any payments for indoor tanning services during the tax year? 14a No				l	
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					Νo

20

			Yes	No_
1a	Enter the number of voting members of the governing body at the end of the tax vear			
	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
	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
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o 
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	evenu	ıe Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	V	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	114	Yes	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	11a	Yes	
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			
L2a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
L2a b c	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes Yes	
12a b c	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c	Yes Yes Yes	
L2a b c L3	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13	Yes Yes Yes	
L2a b c L3 L4	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13	Yes Yes Yes	
L2a b c L3 L4 L5	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes	
L2a b c L3 L4 L5	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
12a b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
12a b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b 16a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes Yes Yes Yes	

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

►Kevin Edwards 2390 Alumni Drive Storrs, CT (860) 486-5000

Form	990	(2012
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#### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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

	T T									
(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-	(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	2,2033 11130,	MISC)	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)

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t perso	tion ( han d n is l	ne l both	box, an d	heck unless officer stee)	3	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	compensation V- from the		
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		relate anızat	d
1b	Sub-Total							<u> </u>					
C	Total from continuation sheet	· · · · · s to Part VII, S	· · · ection A	٠.				<b>.</b>					
d	Total (add lines 1b and 1c) .							►	2,041,827				349,829
2	Total number of individuals (in \$100,000 of reportable compe	cluding but not	limited 1	to the			d abov	e) w	ho received more th	an			
												Yes	No
3	Did the organization list any <b>fc</b> on line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	or highest compen		3		No
4	For any individual listed on line organization and related organ individual									uch	4	res (	
5	Did any person listed on line 1 services rendered to the organ										5		No
Se	ction B. Independent Co	ntractors											
1	Complete this table for your five	e highest comp											
	compensation from the organiz	ation Report co	ompens	atıon	for	the c	alend	arye	ar ending with or wi	thin the organization (B)	n's tax	year (C)	

(A) Name and business address	(B) Description of services	(C) Compensation
Wilshire Associates LLC 1299 Ocean Avenue Santa Monica CA 90401	Invest Consulting	148,583
Ruffalo Cody PO Box 3018 Cedar Rapids IA 52406	Phone Solicitations	422,973
Perrone Group 45 Braintree Hill Office Park 201 Braintree MA 02184	Mailing	158,562
Gold Orluck & Partners LLP 172 West Main Street Avon CT 06001	Event Planning	150,436
Blackbaud Inc 2000 Daniel Island Drive Charlestown SC 29492	Software Consulting	256,791
Total number of independent contractors (including but not limited to these lighted about	Nuclea managed manus than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►10

Form 99								Page <b>9</b>
Part V	<u> </u>	Statement of Check if Schedul	r <b>Revenue</b> le O contains a respon	ise to any question i	n this Part VIII	<u> </u>	<u> </u>	
					<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
2 2	1a	Federated campa	aigns 1a					
ant	b	Membership due	s <b>1b</b>					
A A	С	Fundraising ever	nts <b>1c</b>	2,012,473				
Siffs lar,	d	Related organiza	ations 1d					
⊒. <u>°</u> 2	е	Government grants	(contributions) <b>1e</b>					
rtior er S	f	All other contribution similar amounts not	ns, gifts, grants, and <b>1f</b> included above	42,561,703		j		
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution 1a-1f \$	ns included in lines	2,849,674				
S E	h	Total. Add lines	1a-1f	· · · •	44,574,176			
<u> </u>				Business Code				
Wen	2a	Univ Fee for Service		900099	8,589,259	8,589,259		
Program Serwoe Revenue	b	Univ Endow Admin	ree	900099	124,215	124,215		
7 M C	d	-						
33 ⊆	e							
gra.	f	All other prograr	n service revenue					
£	g	Total. Add lines	2a-2f	►	8,713,474			
	3	Investment inco	me (ıncludıng dıvıdend		7,000,357			7,000,357
	4	and other similar Income from investr	r amounts) ment of tax-exempt bond p	proceeds	0			7,000,337
	5	Royalties		▶	0			
			(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	°	expenses Rental income						
	d	or (loss)	ne or (loss)		0			
	u		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	10,515,686	, .				
	b	than inventory Less cost or						
		other basis and sales expenses	10 515 606					
	d d	Gain or (loss)	10,515,686		10,515,686		-250,748	10,766,434
		Gross income fro	om fundraising		10,010,000			10,700,10
Other Revenue			173 reported on line 1c)					
ı,		See Part IV, line	e 18 a	551,320				
the	b	Less direct exp	L	705,150				
0	C		oss) from fundraising 6	events 🛌	-153,830			-153,830
	9a	See Part IV, line	om gaming activities e 19 a	2.520				
	b	Less direct exp	enses b	3,620 429				
	с 10а	Gross sales of ir		/ities≱-	3,191			-429
		returns and allow	a					
	С		oss) from sales of inve		0			
	11-	Miscellaneous	Revenue	Business Code				
	11a b							
	C							
	d	All other revenue	e					
	е	Total. Add lines	11a-11d	🕨	0			
	12	<b>Total revenue.</b> S	ee Instructions		70,653,054	8,713,474	-250,748	17,612,532
	1				70,053,054	0,713,474		Form <b>990</b> (2012)

	Statement of Functional European				Page 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A )	
	Check if Schedule O contains a response to any question in this Pa				
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(c)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	33,415,410	33,415,410		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,557,170		411,488	1,145,682
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	7,266,672		1,671,335	5,595,337
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	482,919		111,071	371,848
9	Other employee benefits	905,323		208,224	697,099
10	Payroll taxes	654,134		150,451	503,683
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	24,638		5,667	18,971
С	Accounting	153,950		153,950	
d	Lobbying	40,000			40,000
е	Professional fundraising services See Part IV, line 17	636,163			636,163
f	Investment management fees	4,452,546		4,452,546	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	38,978		8,965	30,013
12	Advertising and promotion	12,376		2,846	9,530
13	Office expenses	185,297		42,618	142,679
14	Information technology	433,711		99,753	333,958
15	Royalties	0			
16	Occupancy	289,221		66,521	222,700
17	Travel	270,123		62,128	207,995
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	35,224		8,102	27,122
20	Interest	381,510		87,747	293,763
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	331,935		76,345	255,590
23	Insurance	125,592		28,886	96,706
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)				
а	Recruitment	149,480		34,380	115,100
b	Special Events	238,860			238,860
c	Service Contracts	279,005		64,171	214,834
d	Printing and Publications	330,550		76,027	254,523
е	All other expenses	327,615		45,860	281,755
25	Total functional expenses. Add lines 1 through 24e	53,018,402	33,415,410	7,869,081	11,733,911
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

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
		, , , , , , , , , , , , , , , , , , , ,	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,026,190	1	3,419,448
	2	Savings and temporary cash investments	6,897,055	2	21,785,654
	3	Pledges and grants receivable, net	31,846,403	3	31,532,338
	4	Accounts receivable, net	233,426	4	289,257
	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	0
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	0
S.	_	Notes and loans receivable, net		7	
¥	7 8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	208.632	9	247,759
	10a	Land, buildings, and equipment cost or other basis  Complete Part VI of Schedule D  10,086,366	,	9	247,733
	ь	Less accumulated depreciation 10b 3,430,279	6,030,196	10c	6,656,087
	11	Investments—publicly traded securities	167,754,502	11	179,180,050
	12	Investments—other securities See Part IV, line 11	89,737,776	12	90,377,584
	13	Investments—program-related See Part IV, line 11	, ,	13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	94,841,808	15	125,307,355
	16	Total assets. Add lines 1 through 15 (must equal line 34)	398,575,988	16	458,795,532
	17	Accounts payable and accrued expenses	5,123,215	17	5,574,321
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	6,270,000	20	26,030,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D	3,114,574	21	13,598,053
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	, ,		<u>, , , , , , , , , , , , , , , , , , , </u>
ge		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	127,909	25	123,560
	26	D	14,635,698	26	45,325,934
S	20	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.	14,000,000	20	40,020,904
g	27	Unrestricted net assets	-7,276,710	27	-5,447,303
<u> </u>	28	Temporarily restricted net assets	93,929,000	28	102,723,872
#	29	Permanently restricted net assets	297,288,000	29	316,193,029
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			<u> </u>
s or	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
\$	32	Retained earnings, endowment, accumulated income, or other funds		32	
		_ , , , , , , , , , , , , , , , , , , ,	<b>—</b>		
Net	33	Total net assets or fund balances	383,940,290	33	413,469,598

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		70,6	553,054
2	Total expenses (must equal Part IX, column (A), line 25)	2		53,0	18,402
3	Revenue less expenses Subtract line 2 from line 1	3		17,6	534,652
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		383,9	940,290
5	Net unrealized gains (losses) on investments	5		12,8	358,608
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		<u>-                                    </u>	963,952
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	LO		413,4	169,598
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 reviewe a separate basis, consolidated basis, or both	d 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 separa basis, consolidated basis, or both	te			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight caudit, 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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the rec	juired	3b		

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As Filed Data -

DLN: 93493045015594

**Employer identification number** 

OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

The University of Connecticut Foundation

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

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

Open to Public Inspection

		D	f P	blic Charity C:	A / All -				106-6070			
	rt I			blic Charity Sta						instruction	15.	
	organi —						= -					
1	<u> </u>		-	on of churches, or a				section 170	(D)(1)(A)(I)	•		
2	<u> </u>			in section 170(b)(1			*	4==41.54				
3				perative hospital se	=						_	
4				h organization operat ity, and state	ted in conjun	iction with	a hospital de:	scribed in <b>s</b>	ection 170(b	)(1)(A)(iii).	Enter the	
5	Γ			erated for the benefi	t of a college	or univers	sity owned or	operated by	a governme	ntal unit des	scribed in	
		sect ior	ection 170(b)(1)(A)(iv). (Complete Part II)									
6	$\Gamma$	A fede	ral, state, or	local government or	government	tal unit des	cribed in <b>sec</b>	tion 170(b)	(1)(A)(v).			
7	ᆫ	describ	oed in <b>sectio</b>	at normally receives on 170(b)(1)(A)(vi).	(Complete F	Part II)		_	nental unit or	from the ge	neral public	
8	<u> </u>			described in <b>section</b>								
9	Γ	_		at normally receives					•			
		•		ities related to its ex	· ·	=						
				oss investment inco						1 tax) from t	ousinesses	
	_			ganızatıon after June								
10	<u> </u>	_		ganized and operated	•							
11	l	one or the box	more public k that descr	ganized and operated ly supported organiz bes the type of supp <b>b</b> Type II <b>c</b>	ations descr orting organ	ibed in sec lization and	tion 509(a)(: I complete lin	l) or sectio es 11e thro	n 509(a)(2) ough 11h	See <b>section</b>	<b>509(a)(3).</b> Check	
e	Γ	other t		ox, I certify that the on managers and ot								
f		If the c		received a written d	etermination	from the I	RS that it is a	Type I, Ty	pe II, or Typ	e III suppoi	ting organization,	
g		Since A		2006, has the organ	ızatıon accep	oted any gi	ft or contribut	ion from an	y of the		,	
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	ner alone or	together wit	n persons d	escribed in (i	II)	Yes No	
		and (111	) below, the	governing body of th	e supported	organizatio	on?			11	.g(i)	
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				11	g(ii)	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	) above?			11	g(iii)	
h		Provide	e the follow	ng information about	the support	ed organıza	ition(s)					
(i) Nan suppor organiz		rted	organization organization in		(v) Did yo the organ in col (i) suppo	ization of your	organiza col (i) oi	(vi) Is the organization in col (i) organized support in the U S?				
				instructions))	Yes	No	Yes	No	Yes	No	,	
Tota	1							I		1	1	

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 22,510,381 28,779,876 32,185,542 39,505,200 44,574,176 167,555,175 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit O to the organization without charge 22,510,381 28,779,876 32,185,542 39,505,200 44,574,176 167,555,175 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 1,447,494 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 166,107,681 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (c) 2010 (a) 2008 (d) 2011 (e) 2012 (f) Total beginning in) 🟲 22,510,381 39,505,200 Amounts from line 4 28,779,876 32,185,542 44,574,176 167,555,175 Gross income from interest, dividends, payments received on securities loans, rents, royalties 6,570,221 5,966,980 6,271,420 3,329,883 7,000,357 29,138,861 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 196,694,036 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 84 450 % Public support percentage for 2011 Schedule A, Part II, line 14 15 80 810 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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					<u> </u>
	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: 93493045015594

#### OMB No 1545-0047

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

**Political Campaign and Lobbying Activities** 

Inspection

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

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

● S ● S If the	Section 501(c)(3) organizations tl Section 501(c)(3) organizations tl	s" to Form 990, Part IV, Line 4, or hat have filed Form 5768 (election und hat have NOT filed Form 5768 (election s" to Form 990, Part IV, Line 5 (Preauzations Complete Part III	er section 501(h)) n under section 50	) Complete Part II-A Do not 01(h)) Complete Part II-B Do	complete Part II-B not complete Part II-A				
Na	me of the organization University of Connecticut Foundation	-		<b>Employer iden</b> 06-6070722	tification number				
Par	t I-A Complete if the or	ganization is exempt under	section 501(d		organization.				
1 2 3	Provide a description of the ord Political expenditures Volunteer hours	ganızatıon's dırect and ındırect politic	cal campaign acti	vities in Part IV ▶	\$				
Par	t I-B Complete if the or	ganization is exempt under	section 501(c	:)(3).					
1	<u> </u>	e tax incurred by the organization und			\$				
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectior	ı 4955 <b>►</b>	\$				
3		section 4955 tax, did it file Form 472			☐ Yes				
4a	Was a correction made?				┌ Yes				
b	If "Yes," describe in Part IV								
Par	t I-C Complete if the or	ganization is exempt under	section 501(d	c), except section 50	1(c)(3).				
1	Enter the amount directly expe	ended by the filing organization for se	ctıon 527 exemp	t function activities 🕨	\$				
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organızatıons	for section 527	\$				
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	¢				
4	Did the filing organization file <b>I</b>	Form 1120-POL for this year?			⊤ Yes				
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.								
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-				

section 4911 tax for this year?

┌ Yes ┌ No

## Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means an		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	51,136	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	14,866	
c	Total lobbying expenditures (add lines 1a and 1b	o)	66,002	
d	Other exempt purpose expenditures		53,952,400	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	54,018,402	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lir	ne 1h or line 1ı, did the organization file Form 472	0 reporting	□ Ves □ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expe	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	55,425	77,108	59,014	66,002	257,549
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f_	Grassroots lobbying expenditures	30,000	59,379	41,862	51,136	182,377

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge <b>S</b>
	Week Week was a second to be a second to be a second to be a second to be a second to the second to	( 6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c	)(5), (	or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

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

DLN: 93493045015594

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► 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

**Supplemental Financial Statements** 

Open to Public

emai	Revenue Service	rm 990. F See separate instructions.		Inspection
	me of the organization University of Connecticut Foundation			oloyer identification number
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990			
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advis funds are the organization's property, subject to the or	5	nor adv	rsed <b>Yes No</b>
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit?			
a	rt II Conservation Easements. Complete if	f the organization answered "Yes" t	o Forn	n 990, Part IV, 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	n or education)	certifie	d historic structure
	easement on the last day of the tax year	a quantied conservation contribution in	tile loll	ii oi a conservation
				Held at the End of the Year
1	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements		2b	
	Number of conservation easements on a certified history	orıc structure ıncluded ın (a)	2c	
	Number of conservation easements included in (c) accommodate accommodate the structure listed in the National Register	quired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by th	ne organization during
	the tax year 🗠			
	Number of states where property subject to conservat	tion easement is located ►		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	f violations, and <b>Yes No</b>
	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easer	ments o	during the year
	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durın	g the year
	Does each conservation easement reported on line 2( and section $170(h)(4)(B)(II)$ ?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	ne footnote to the organization's financia		
ľ	Complete if the organization answered "Y	ns of Art, Historical Treasures, Yes" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education,	or rese	earch in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to these	116 (ASC 958), to report in its revenue ets held for public exhibition, education,	statem	nent and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1			<b>-</b> \$
	(ii) Assets included in Form 990, Part X			<b>-</b> \$
	If the organization received or held works of art, historfollowing 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			<del></del> -
				т

Part	Organizations Maintaining Co	llections of Art	, His	tori	cal Treas	sures, or C	<u> the</u>	r Similar .	Asse	<b>ts</b> (cc	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck	any of the f	ollowing that	are a	sıgnıficant ı	ıse of	ıts	
а	Public exhibition		d	Γ	Loan or ex	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	ın hov	v the	y further th	e organızatıoı	ı's ex	cempt purpos	se in		
5	During the year, did the organization solicit							nılar	_		_
	assets to be sold to raise funds rather than							/a.a.ll ta		Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					ion answere	ea Y	es" to Forn	n 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					s or other ass	sets	not	Г	Yes	✓ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ıng t	able	-					
						-			Amou	ınt	
C	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, line	e 21?						<u> </u>	Yes	□ No
ь	If "Yes," explain the arrangement in Part XII										<u> </u>
Pai	rt V Endowment Funds. Complete					o Form 990 <sub>.</sub> Two years back				\	ara bask
1a	Beginning of year balance	(a)Current year 301,637,000	(D)F	rior y	525,000	263,049,000		244,032,0	_		ears back 4,454,000
b	Contributions	17,340,000		-	132,000	14,333,000		10,319,0	_		6,768,000
c	Net investment earnings, gains, and losses				,			<u> </u>			
_		25,956,000			324,000	39,732,000		21,826,0	00	-6	3,238,000
d	Grants or scholarships								-		
е	Other expenditures for facilities and programs	11,127,000		10,	226,000	10,249,000		9,769,0	00	1	.0,082,000
f	Administrative expenses	3,628,000		3,	218,000	3,240,000		3,359,0	00		3,870,000
g	End of year balance	330,178,000		301,	537,000	303,625,000		263,049,0	00	24	4,032,000
2	Provide the estimated percentage of the cur	rent year end baland	ce (lın	e 1 g	, column (a	)) held as					
а	Board designated or quasi-endowment 🕨	0 640 %									
b	Permanent endowment ► 97 570 %										
c		90 %									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organiz	atıon t	hat	are held and	d administere	d for	the			
	organization by							_	- (')	Yes	No
	(i) unrelated organizations			•			•	H-	3a(i) 3a(ii)		No No
ь	(ii) related organizations				· · · · · · · · · · · · · · · · · · ·		٠.	<u>L</u>	3b	<u> </u>	No
4	Describe in Part XIII the intended uses of the	•									
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa								
	Description of property				) Cost or othe is (investmen			(c) Accumula depreciatio		( <b>d)</b> Bo	ok value
1a	and										
b i	Buildings		•			5,89	7,828	1,989	9,183		3,908,645
<b>c</b> l	_easehold improvements						5,906		9,331		56,575
	Equipment		•	<u> </u>			0,294		1,765		208,529
				<u> </u>	D) /: :::::		2,338				2,482,338
Inta	I. Add lines 1a through 1e <i>(Column (d) must e</i>	quai rorm 990, Part 🤇	л, colu.	mn (.	6), iine 10(c	<i>i).)</i>		🕨			6,656,087

Part VII Investments-Other Securities. Se	e Form 990, Part X, line 12	2.	<u> </u>
(a) Description of security or category	(b)Book value	(c) Metho	od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
	+		_
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	90,377,584		
Part VIII Investments—Program Related. S	ee Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
	+		_
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>p</b> -		
Part IX Other Assets. See Form 990, Part X,	line 15.		
(a) Desc			(b) Book value
(1) Limited Partnership Investments			96,800,873
· · ·			
(2) Investment in R&D			334,321
(3) Fund Held in Trust by Other			16,697,608
(4) Endowments held for University			10,518,254
(5) Deferred Bond Issuance			584,293
(6) CSV - Life Insurance Policies			372,006
			3, 2,555
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		125,307,355
Part X Other Liabilities. See Form 990, Part	: X, line 25.		
1 (a) Description of liability	(b) Book value		
Federal income taxes	+		
Rounding	1		
Accrued Debt Service Interest	123,559		
	+		
	+		
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	123,560		
2 Fin 48 (ASC 740) Footpote In Part XIII provide the t	•	nization's financial state:	

	· · · · · · · · · · · · · · · · · · ·		
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	79,573,954
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	8,215,321
3	Subtract line <b>2e</b> from line <b>1</b>	3	71,358,633
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	-705,579
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	70,653,054
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	50,044,646
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)............. 2d 1,478,790	]	
e	Add lines 2a through 2d	2e	1,478,790
3	Subtract line <b>2e</b> from line <b>1</b>	3	48,565,856
4	A mounts 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		
b	Other (Describe in Part XIII ) 4b 4,452,546	_	
c	Add lines <b>4a</b> and <b>4b</b>	4c	4,452,546
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	53,018,402

#### 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 ınformatıon

Identifier	Return Reference	Explanation
Part XII, Line 4b	Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Investment Fees \$4452546
Part XII, Line 2d	Part XII, Line 2d Other expenses and losses per audited F/S	Event Expenses \$705579 R&D expenses \$773211
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	The Foundation's endowment funds provide grants to the University of Connecticut The grants may be used to provide scholarships to University of Connecticut students, compensation and research support for University of Connecticut faculty, and general program support for University of Connecticut academic and athletic programs. The use of all endowment funds is subject to any restriction placed on funds by donors. All disbursements are subject to the Foundation's policy on disbursements. Including the amount of the expenditure must be reasonable, for a legitimate business purpose, and with no private benefit.
Part IV , Line 2b	Part IV, Line 2b Explanation of escrow account liability	The Foundation is named as the trustee and remainder beneficiary of several charitable remainder trusts. In addition, the Foundation has entered into contracts with donors for charitable gift annuities for which the Foundation has accepted contributions. The present value of the liability for future payments is reflected on the Foundation's balance sheet. The Foundation has a contractual arrangement to act as the University's agent in managing the University's endowment assets ensuring consistent management of endowment assets that support the University regardless of entity ownership Starting in fiscal year 2013 the market value of the endowment pool is reflected on the Foundation's balance sheet.

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As Filed Data -

DLN: 93493045015594

OMB No 1545-0047

Department of the Treasury

**SCHEDULE F** 

(Form 990)

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

**Statement of Activities Outside the United States** 

► Attach to Form 990. ► See separate instructions.

Open to Public

Interna	al Revenue Service					Inspection						
	ne of the organization				Employer iden	tification number						
The Inc	University of Connecticut Founda	tion			06-6070722							
	art I General Information	n on Activitie	es Outside tl	he United States Co		zation answered						
	"Yes" to Form 990, Pa			ile omited otatesi et	ompiete ii tile organii	edion answered						
1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or											
	assistance, the grantees' elig	gibility for the g	grants or assis	stance, and the selecti	on criteria used to aw	ard						
	the grants or assistance? . $$ .					┌ Yes ┌ No						
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fu	ınds outsıde						
3	Activites per Region (The follow	ung Part I, line 3	3 table can be d	uplicated if additional spa	ace is needed )							
	<b>(a)</b> Region	<b>(b)</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	(f) Total expenditures for and investments in region						
	See Add'l Data		,	,								
_	a Sub-total					71,063,02						
	<b>b</b> Total from continuation sheets to Part I											
	c Totals (add lines 3a and 3h)	1			1	71 063 02						

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. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		<del>                                     </del>		+
	<del> </del>		<del>                                     </del>		<del> </del>	<del> </del>	+
			<del></del>		<u> </u>		
			<b></b>		<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	<del>                                     </del>	+			+		+
			1		-		+
	<del> </del>		<del>                                     </del>		<del> </del>	<del> </del>	<del> </del>
			<del> </del>		<u> </u>	<del> </del>	
						1	

#### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the 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	Γ	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	Į <b>√</b>	No
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)	١✓	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)	<u> </u>	Yes	Г	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)	١✓	Yes	Г	No
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>	Νo

Schedule F (Form 990) 2012

Part V	Supplementa	al Information
Part v	Supplementa	ai intormatio

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).

Identifier	ReturnReference	Explanation

#### **Additional Data**

**Software ID:** 12000229

Software Version: 2012v2.0

**EIN:** 06-6070722

Name: The University of Connecticut Foundation

Inc

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
North America	0	0	Fundraising		0
East Asia and Pacific	0	0	Fundraising		0
Europe	0	0	Fundraising		0

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</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
North America	0	0	Investments		8,788,351
Central America and the Caribbean	0	0	Investments		34,939,318
Europe	0	0	Investments		27,335,357

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DLN: 93493045015594

**SCHEDULE G** (Form 990 or 990-EZ) **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.

OMB No 1545-0047

Open to Public **Inspection** 

Department of the Treasury Attach to Form 990 or Form 990-EZ. See separate instructions. Internal Revenue Service Name of the organization The University of Connecticut Foundation

**Employer identification number** 

06-6070722

Рa	LT T	Fundraising Activities. Complete if the organ	zat	ion a	answered "Yes" to Form 990, Part IV, line 17.	
1	Ind	ıcate whether the organızatıon raısed funds through any of	the	follo	wing activities Check all that apply	
а	~	Mail solicitations	e	굣	Solicitation of non-government grants	
b	~	Internet and email solicitations	f	Γ	Solicitation of government grants	
C	~	Phone solicitations	g	~	Special fundraising events	
А	✓	In-person solicitations				

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais cust cont	Did ser have ody or crol of outions?	(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			
Gold Orluk & Partners LLC Avon, CT 06001	Event Planner		No	868,150	175,479	692,6
Ruffallo Cody PO Box 3018 Cedar Rapı, IA 52406	Phone Solicitat		No	377,922	460,684	
				1,246,072	636,163	692,6

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

WY, WI, WV, WA, UT, VA, VT, UT, TX, TN, SD, SC, RI, PA, OR, OK, OH, ND, NC, NY, NM, NJ, NH, NV, NE, MT, MO, MS, MN, MI, MA, MD, ME, LA, KY, KS, IA, IN, IL, ID, HI, GA, FL, DC, DE, CT, CO, CA, AR, AZ, AK, AL

Sche	dule	G (Form 990 or 990-EZ) 2012				Page <b>2</b>
Pai	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi			
			(a) Event #1  White Coat Gala (event type)	(b) Event #2  Calhoun Celebrity Golf Classic (event type)	(c) O ther events  13 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	1,287,020		956,353	2,559,338
Revenue	2	Less Contributions	1,065,916		·	
ž	3	Gross income (line 1 minus line 2)	221,104			549,358
	4	Cash prizes				
ú	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
莅	9	Other direct expenses .	230,923	107,844	361,970	700,737
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	•	(700,737)
	11	Net income summary Combine Ii	ne 3, column (d), and line	10		-151,379
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		'Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	( <b>b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
enses	2	Cash prizes				
Exper	3	Non-cash prizes				
Direct E	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	Г Yes Г No	┌ Yes	│ Yes_____ │ No	
	7	Direct expense summary Add line	s 2 through 5 ın column (ı	d)		
	8	Net gaming income summary Com	ibine lines 1 and 7 in colu	mn (d)		
9	Ent	ter the state(s) in which the organize	ation operates gaming act	ivities		
a b	Ist	the organization licensed to operate No," explain	gaming activities in each	of these states?		. Tyes TNo
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during		

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	gamıng <sup>,</sup>		· · · · Fyes F No			
13 Indicate the percentage of gaming activity operated in							
а	The organization's facility			13a			
b	An outside facility			13b			
.4	Enter the name and address of th	Enter the name and address of the person who prepares the organization's gaming/special events books and records					
	Name ►						
	Address 🟲						
	revenue?	ntract with a third party from whom the					
	amount of gaming revenue retain	ied by the third party 🟲 \$					
С	If "Yes," enter name and address	s of the third party					
	Name 🟲						
	Address 🟲						
<b>.</b> 6	Gaming manager information						
	Name 🟲						
	Gaming manager compensation <b>I</b>	<b>*</b> \$					
	Description of services provided	<b>&gt;</b>					
	☐ Director/officer	<b>F</b> Employee	Independent contractor				
<b>.7</b>	Mandatory distributions						
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to						
	retain the state gaming license?						
b							
	<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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Schedule I

(Form 990)

Department of the Treasury

OMB No 1545-0047

DLN: 93493045015594

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

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

Name of the organization						Employer identific	ation number
The University of Connecticut F Inc	Foundation					06-6070722	
	mation on Grants						
<ol> <li>Does the organization mathe selection criteria use</li> <li>Describe in Part IV the o</li> </ol>	d to award the grants	orassistance?					✓ Yes
					. Complete if the orga dicated if additional spa		"Yes" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation n (book, FMV, appraisal, other)	(g) Description of on-cash assistance	(h) Purpose of grant or assistance
(1) University of Connecticut 352 Mansfield Road Unit 2048 Storrs, CT 06269	06-0772160	1	33,415,410	C			
2 Enter total number of sec 3 Enter total number of other							1

I	Grants and Other Assistance to Individuals in the United States. Complete if the orga	anization 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	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Identifier	Return Reference	Explanation
Additional Supplemental Information		Fund Administration staff receives appropriate documentation prior to making disbursements to ensure compliance with grant restrictions, and to ensure such disbursements are reasonable

Schedule I (Form 990) 2012

DLN: 93493045015594

OMB No 1545-0047

**Compensation Information** 

**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, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization The University of Connecticut Foundation **Employer identification number** 

06-6070722

Ρa	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided a 990, Part VII, Section A, line 1a Complete Part III to pro-				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
h	If any of the boxes in line 1a are checked, did the organizat	tion follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses describe		1b	Yes	
2	Did the organization require substantiation prior to reimbur				
	directors, trustees, and the CEO/Executive Director, regar	ding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization organization organization CEO/Executive Director Check all that appused by a related organization to establish compensation o	ly Do not check any boxes for methods			
	Compensation committee	Written employment contract			
	✓ Independent compensation consultant	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, Part VI or a related organization	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payme	nt?	4a		Νo
b	Participate in, or receive payment from, a supplemental noi	nqualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-based co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide t	he applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must com	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a compensation contingent on the revenues of	a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a compensation contingent on the net earnings of				
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.		7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or				
	subject to the initial contract exception described in Regul- in Part III	ations section 53 4958-4(a)(3)? If "Yes," describe	_		
_			8		No
9	If "Yes" to line 8, did the organization also follow the rebut section $534958-6(c)$ ?	table presumption procedure described in Regulations	9		No

#### 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)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Thomas Scarlett System Architect	(i)	140,000			7,754	13,736	161,490	
(2)Suzanne O'Conor Legal Counsel	(i)	182,885	7,500		15,231	3,015	208,631	
(3)Kevın A Edwards Vice President	(i) (ii)	213,366	10,000		17,869	16,625	257,860	
(4)John Martin President	(i) (ii)	364,951	53,250		91,455	9,946	519,602	
(5)Hal Reed AVP Plan Giving	(i) (ii)	149,049			11,924	13,736	174,709	
<b>(6)</b> Frank Gifford VP for Development	(i) (ii)	158,404	1,000		12,752	15,374	187,530	
(7)Dına Plapler VP Development Health Center	(i) (ii)	169,087	5,000		13,927	16,801	204,815	
(8)Deborah Cunningham VP, Advancement Services and AG	(i) (ii)	158,404	3,000		12,912	2,067	176,383	
(9)Brian Otis VP Development and Campaign	(i) (ii)	174,808	5,000		14,385	16,787	210,980	

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

Identifier	Return Reference	Explanation
	· · ·	The Foundation may give performance based awards based on formal review and with approval of Foundation management and board
, ,	ın regards to selections on 1a	The Foundation provides memberships to the Hartford Club for Mr Martin and Ms Papler for business related meetings. The amount in 2012 was \$2,544 for Ms. Plapler and \$1,894 for Mr. Martin. Memberships were used solely for Foundation business.

Schedule J (Form 990) 2012

**Software ID:** 12000229

**Software Version:** 2012v2.0

**EIN:** 06-6070722

Name: The University of Connecticut Foundation

Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Torin 330, Schedule 3, 1 are 11 Sincers, Directors, Trustees, key Employees, and riighest compensated Employees								
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Thomas Scarlett	(I) (II)	.			7,754	13,736	161,490	
Suzanne O'Conor	(ı) (ıı)	. I	7,500		15,231	3,015	208,631	
Kevin A Edwards	(ı) (ıı)	.	10,000		17,869	16,625	257,860	
John Martin	(ı) (ıı)	- 1	53,250		91,455	9,946	519,602	
Hal Reed	(ı) (ıı)	, l			11,924	13,736	174,709	
Frank Gıfford	(I) (II)	.	1,000		12,752	15,374	187,530	
Dina Plapler	(I) (II)	.	5,000		13,927	16,801	204,815	
Deborah Cunningham	(I) (II)	.	3,000		12,912	2,067	176,383	
Brian Otis	(I) (II)	) 174,808 )	5,000		14,385	16,787	210,980	

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OMB No 1545-0047

Open to Public

DLN: 93493045015594

2012

Schedule K (Form 990)

Department of the Treasury Internal Revenue Service

Other spent proceeds

11

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** 

The University of Connecticut Foundation 06-6070722 Part I **Bond Issues** (h) On (i) Pool (g) Defeased behalf of financing (c) CUSIP # (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price (f) Description of purpose ıssuer Yes No Yes No Yes No CHEFA 06-0806186 04-24-2013 20,000,000 Construction project Χ Χ Χ

CHEFA 06-0806186 20774UJD8 01-23-2007 7,252,762 Refunding Series A Χ Χ Χ **Proceeds** C Α В D Amount of bonds retired Amount of bonds legally defeased 2 Total proceeds of issue 3 20,000,000 7,974,994 Gross proceeds in reserve funds 4 502,944 502,944 Capitalized interest from proceeds 5 6 Proceeds in refunding escrows Issuance costs from proceeds 7 270,526 236,705 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 2,147,966

Other unspent proceeds 12 17,581,508 Year of substantial completion 13 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ Χ 14 Were the bonds issued as part of an advance refunding issue? 15 Χ Χ Has the final allocation of proceeds been made? Χ Χ 16 Does the organization maintain adequate books and records to support the final Χ Χ allocation of proceeds? Part III **Private Business Use** 

7,235,346

7,235,346

В C D Α Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned 1 Χ property financed by tax-exempt bonds? Are there any lease arrangements that may result in private business use of bond-Χ financed property? Schedule K (Form 990) 2012 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50193E

Part Private Business Use (Continued) C D Α В Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed Χ property? Are there any research agreements that may result in private business use of bond-Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside Х counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 % % % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501 % % % (c)(3) organization, or a state or local government Total of lines 4 and 5 % % % % Does the bond issue meet the private security or payment test? 7 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? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of h % % % % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Х Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С Α D Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T? 1 Χ Χ If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Exception to rebate? b No rebate due? Х Χ C If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Has the organization or the governmental issuer entered 4a Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was a hedge terminated?

Supplemental Information

Part IV Arbitrage (Continued)

Part VI

D

		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	t	Х		х				
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair ma value of the GIC satisfied?	rket							
6	Were any gross proceeds invested beyond an available te period?	mporary	х		х				
7	Has the organization established written procedures to mo the requirements of section 148?	onitor		х					
Pa	art V Procedures To Undertake Corrective Ac	tion	·						
			Α	В	ı	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to en that violations of federal tax requirements are timely iden- and corrected through the voluntary closing agreement pr self-remediation is not available under applicable regulati	tified X		х					
		·	·	•		-	-		
P	art VI Supplemental Information. Complete t	<u>hıs part to provide addıtı</u>	onal informat	on for respo	nses to ques	stions on Sch	edule K (see	instructions)	
	Tdentifier Peturn Peferei	nce			Fynlan	ation			

В

Part IV 3c Arbitrage - the rebate calculation was completed in February 2012 and no rebate was due

С

Schedule K (Form 990) 2012

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DLN: 93493045015594

OMB No 1545-0047

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**Noncash Contributions** 

Name of the organization The University of Connecticut Foundation **Employer identification number** 

IIIC					06-6070722			
Pa	Types of Property							
	Ash Madle of all	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of d noncash contrib	etermı	_	ts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional Interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	75	2,849,674				
	Securities—Closely held stock	<b>_</b>	,,,	2,013,011				
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received				29			
	for which the organization comple	eted Form 8	283, Part IV, Donee Ackno	owledgement [	29		1	
20-			- h.,	utu waxantad w Daut I lusaa	1 20 +6-+ .+		Yes	No
SUA	During the year, did the organiza							
	must hold for at least three year				i to be used			N1 -
_	for exempt purposes for the enti					30a		No
ь 31	If "Yes," describe the arrangem  Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	ies or related organizations	to solicit, process, or sell r	oncash • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	in column (c) for a type of	property for which column (a	a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

**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

Schedule M (Form 990) (2012)

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As Filed Data -

DLN: 93493045015594

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization	Employer identification number
The University of Connecticut Foundation	
Inc	06-6070722

Identifier	Return Reference	Explanation
	Schedule R - Related Organizations	While the mission of the Foundation is to support the University, under IRS instructions the University does not meet the definition of a "related organization". The Foundation has ten ex-officio board members, six of whom serve by virtue or their position as a University employee. None of the six University employees are counted in determining quorum and none are entitled to vote on matters before the Board. No compensation is paid by the Foundation for their service as directors.

Identifier	Return Reference	Explanation
	Part V, Question 4 b	Foreign countries which an account with a financial interest in was located duringthe calendar year Bermuda, Canada, Cayman Islands, Ireland and Netherland Antilles

Identifier	Return Reference	Explanation
	Form 990, Part III, Line 1	The mission of The University of Connecticut Foundation, Inc. is to solicit, receive, invest and administer gifts and financial resources from private sources for the benefit of all campuses and programs of the University of Connecticut. The Foundation operates exclusively to promote the educational, scientific, cultural, research and recreational objectives of the University of Connecticut. As the primary fund-raising vehicle to solicit and administer private gifts and grants to enhance the University's mission, the Foundation supports the University's pursuit of excellence in teaching, research, and public service

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Increases	R&D Revenue = \$7208

ldentifier	Identifier Return Reference	
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Decreases	R&D Expense = -\$773211

ldentifier	Identifier Return Reference	
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Decreases	Bad Debt Expense = -\$197949

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The Foundation's financial statement and conflict of interest policy are posted on the Foundation's web site and on the Electronic Municipal Market Access system (EMMA), which is available to the public. The Foundation also posts an annual report and annual debt filing on EMMA. The Foundation's Articles of incorporation, IRS Determination Letter and By-laws are available upon request.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	See 15a

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Foundation's salary structure is market-driven and undergoes a rigorous, periodic review under which compensation levels are compared to organizations of similar size and mission. The salaries and benefits of the UCONN Foundation's officers and key employees are subject to approval in advance of payment by a majority of disinterested directors on the HR Committee of the Board of Directors and subsequently by a majority of disinterested directors on the Executive Committee of the Board of Directors. The officers and key employees are not in a position of control with respect to either Committee. The Committees rely on appropriate comparability data in determining the reasonableness of the compensation packages. Minutes adequately documenting the basis for the HR Committee and the Executive Committee's decisions are maintained. The approval of compensation packages occurs in June for compensation to be paid in the subsequent fiscal year.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Explanation of Monitoring and Enforcement of Conflicts	Annually the Foundation board members, officers and employees are sent a copy of the Foundation's Conflict of Interest questionnaire that they are required to complete and return to the Foundation. The responses are then reviewed by the Foundation's in-house legal counsel, with any potential conflicts reviewed with the Nominating and Governance Committee of the Board and the full Board as appropriate

Identifier	Return Reference	Explanation
	Form 990, Part VI, Line 11b Form 990 Review Process	The Form is prepared by the Foundation and reviewed by management and the Foundation's Audit Committee The Form is provided to the entire Board before it is filed

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 2	, , ,	Board members Constance Weaver and Mark Boxer serve on the board of the Bushnell, a non-for-profit arts organization

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 1a	Form 990, Part VI, Line 1a Explanation of Delegated Broad Authority to Committee	The Foundation Board has given the Executive Committee that consists of the Chair, Vice Chair, Chair of the Nominating and Board Governance Committee, Foundation President, and three or more at-large Board Members full power and authority as the Board. The Executive Committee may meet and exercise all such powers and authority in the interim between the meetings of the Board. The Executive Committee may not fill Board vacancies, amend certificate of incorporation, adopt amend or repeal bylaws, approve plan for merger, approve sale, lease, exchange or other disposition of all, or substantially all, of the property, approve a proposal to dissolve the Corporation.

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 4d	Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 Program Services The University of Connecticut Foundation, Inc. receives gifts on behalf of donors restricted to the support of programs at the University. Generally the expenditure is made to the vendor directly by the University with the Foundation then providing a grant to the University to fund the expenditure after receiving appropriate documentation. Occasionally, the Foundation will pay the vendor directly. OTHER PROGRAM SERVICES 5. The University of Connecticut provides payment to the Foundation for fund raising and development expenses. The Foundation also earns a fee for management of endow ment funds held by the University.

Identifier	Return Reference	Explanation
		Client Note 1 - Statement 4Form 990T, Part V, Line 4Bermuda, Canada, Cayman Islands, Ireland, and Netherland Antilles

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R** 

**Related Organizations and Unrelated Partnerships** 

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

OMB No 1545-0047

06-6070722

DLN: 93493045015594

Department of the Treasury Internal Revenue Service

Name of the organization The University of Connecticut Foundation

(Form 990)

► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection **Employer identification number** 

(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controllir entity	ng		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	tions (Complete ıf tax year.)	the organization a	inswered "Yes'	' to Form 990, F	Part IV, line 34 be	ecause it h	iad on	ie
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	cion Public charity (if section 501	status Direct co	tity	Section (13) cor enti	512(b ntrolle ity?
							Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y		Schedu	ıle R (Form 9	990) 20	012

Part III Identification of Related O because it had one or more re								zation a	nswered "Y	es" to	Form	n 990, Par	t IV,	line 3	34	
(a) Name, address, and EIN related organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity		(e) Predominan Income(relate unrelated, excluded froi tax under sections 512		<b>(f)</b> Share of total incor			prtionate	(i) Code V—UE amount in b 20 of Schedule K- (Form 1065	BI Geno ox mar par	( <b>j)</b> eral or naging tner?	(k Percei owne	ntage
						,				Yes	No		Yes	No		
Part IV Identification of Related O line 34 because it had one or										swere	ed "Ye	s" to Forn	า 990	, Par	t IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Lega domic (state or f counti	il ile oreign		Direct	(d) controlling entity	Type (C cor	(e) of entity p, S corp, trust)	(f) Share of total Income		( <b>g)</b> e of end- year assets	of- Perce	n) Intage Ership		(i) Section (b)(1: control entity	512 3) lled
(1) Charitable Remainder Trust11	Development	СТ			N/A		Trust								Yes	No No
2390 Alumnı Drive Storrs, CT 06269																
(2) UConn Research and Development Corp 400 Farmington Ave Farmington, CT 06032 06-1145567	Start ups	СТ			N/A		С Согр	)	7,208	1	593,5	05 100 (	000 %		Yes	

Part V	Transactions With Related Organizations (Complete if the organization	on answer	red "Yes" to Form	ı 990, Part IV, lın	e 34, 35b, or 36.)			
Note	. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	No
<b>1</b> During	the tax year, did the orgranization engage in any of the following transactions with one oi	r more relat	ted organizations lis	ted in Parts II-IV?				
<b>a</b> Rece	eipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					1a		No
<b>b</b> Gıft,	grant, or capital contribution to related organization(s)					1b	Yes	
<b>c</b> Gıft,	grant, or capital contribution from related organization(s)					1c		No
<b>d</b> Loar	ns or loan guarantees to or for related organization(s)					1d		No
<b>e</b> Loar	ns or loan guarantees by related organization(s)					1e		No
<b>f</b> Divid	dends from related organization(s)					1f		No
<b>g</b> Sale	of assets to related organization(s)					<b>1</b> g		No
<b>h</b> Purc	hase of assets from related organization(s)					1h		No
i Exch	ange of assets with related organization(s)					1i		No
<b>j</b> Leas	e of facilities, equipment, or other assets to related organization(s)					1j		No
<b>k</b> Leas	se of facilities, equipment, or other assets from related organization(s)					1k		No
<b>I</b> Perfo	ormance of services or membership or fundraising solicitations for related organization(s	5)				11		No
<b>m</b> Perfo	ormance of services or membership or fundraising solicitations by related organization(s	;)				1m		No
<b>n</b> Shari	ing of facilities, equipment, mailing lists, or other assets with related organization(s)					1n		No
<b>o</b> Shai	ring of paid employees with related organization(s)					10		No
<b>p</b> Rein	nbursement paid to related organization(s) for expenses					1р	Yes	
<b>q</b> Rein	nbursement paid by related organization(s) for expenses					<b>1</b> q		No
r Othe	er transfer of cash or property to related organization(s)					1r	Yes	
s Othe	er transfer of cash or property from related organization(s)					1s		No
2 If the	e answer to any of the above is "Yes," see the instructions for information on who must c	complete th	is line, including co	vered relationships	and transaction threshol	ds		
	(a) Name of other organization		<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount	ınvolved	
(1) Charitab	le Remainder Trust11	r		53,811	Cash			
(2) UConn R	esearch and Development Corp	p		550,000	Cash			
(3) UConn R	esearch and Development Corp	b		550,000	Cash			

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				•	,		Ī	
<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)	managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

**Software ID:** 12000229

**Software Version:** 2012v2.0

**EIN:** 06-6070722

Name: The University of Connecticut Foundation

Inc

Schedule R (Form 990) 2012

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### Part VII Supplemental Information

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

**Software ID:** 12000229 **Software Version:** 2012v2.0

**EIN:** 06-6070722

**Name:** The University of Connecticut Foundation

Inc

Form 990, Part VII - Compensation of	Officers, Dir	ectors	s,Tru	uste	ees,	, Key	, En	nployees, Highe	st	
Compensated Employees, and Indeper (A) Name and Title	(B) Average hours per week (list	Positio more unless an	than	not one on i r an trus	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
Christopher Riley Dir until 10/12	0 00							0	0	0
John Rafal Dır from 11/12	1 00 0 00							0	0	0
Dominick Pagano Director	1 00 0 00							0	0	0
Coleman Levy Chairman	1 00 0 00							0	0	0
Janet Hansen Director	1 00 0 00							0	0	0
Douglas Elliot Dir until 10/12	1 00 0 00							0	0	0
Gerald DesRoches Director	1 00 0 00							0	0	0
Elease Wright Director	1 00 0 00	х						0	0	0
Harriet Munrett Wolfe Director	1 00 0 00	х						0	0	0
Connie Weaver Director	1 00 0 00	х						0	0	0
Wendy Watkins Director	1 00 0 00	х						0	0	0
Daniel Toscano Director	1 00 0 00	х						0	0	0
Robert Skinner Director	1 00	х						0	0	0
Stephen Sills Dir until 10/12	1 00 0 00	х						0	0	0
Robert Sherman Dır from 11/11	1 00 0 00	х						0	0	0
Mark Shenkman Chairman	1 00 0 00	х		х				0	0	0
Adam Schwartz Dir from 11/11	1 00 0 00	х						0	0	0
Marsha Roth Director	1 00 0 00	х						0	0	0
John Ritter Director	1 00 0 00	х						0	0	0
Lucille Protas Dir from 11/12	1 00 0 00	х						0	0	0
Charlene Polino Dir until 10/12	1 00 0 00	х						0	0	0
Joseph Papa Director	1 00 0 00	х						0	0	0
Sharon Nunes Director	1 00 0 00	х						0	0	0
Ronald McIntosh Director	1 00 0 00	х						0	0	0
Denis McCarthy Director	1 00 0 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (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 per from the from related compensation organization (Worganizations (Wweek an officer and a from the (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director hours organizations stitutional for employee related organizations trustaa below Trustee dotted line) 1 00 Kimberly Manning Х 0 0 0 Director 0 00 1 00 John Malfettone Х 0 0 0 Treasurer 0 00 1 00 Douglas Lawrence 0 0 0 Х Director 0 00 1 00 John Krenicki Х 0 0 0 Dir until 02/13 0 00 1 00 Carla Klein 0 0 0 Director 0 00 1 00 Lısa Klauser 0 0 0 Х Dir from 11/12 0 00 1 00 Robert Holster 0 0 0 Х Director 0 00 1 00 Mickey Herbert 0 0 0 Х Director 0 00 1 00 Jonathon Greenblatt Χ 0 0 0 Dir from 11/12 0 00 1 00 Mary Ann Gilleece Х 0 0 X 0 Secretary 0 00 1 00 Clinton Gartin Х 0 0 0 Director 0 00 1 00 Mark Freitas 0 0 Director 0 00 1 00 Albert Foreman 0 0 0 Х Director 0 00 1 00 Drew Figdor 0 0 Х 0 Director 0 00 1 00 Robert D'Amore 0 0 0 Dir until 10/12 0 00 1 00 John Cutler 0 0 0 Х Director 0 00 1 00 Candace Clark 0 0 0 Х Dir until 10/12 0 00 1 00 Micheal Cantor Χ 0 0 0 Director 0 00 1 00 Patrick Campion 0 0 0 Director 0 00 1 00 Melinda Brown 0 0 0 Х Dir from 11/12 0 00 1 00 Mark Boxer Х 0 0 0 Director 0 00 1 00 Andy Bessette 0 0 0 Director 0 00 1 00 Allen Bennett 0 0 0 Х Director 0 00 1 00 David Barton 0 0 Х 0 Director 0 00 1 00 George Aylward 0 0 Dir from 11/12 0 00

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

Compensated Employees, and Indepe	ndent Contra	ctors				_			•	
<b>(A)</b> Name and Title	(B) Average hours per week (list	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						( <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
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
Craig Ashmore Director	1 00 0 00	х						0	0	0
Kenneth Alleyne Director	1 00 0 00	Х						0	0	0
Ray Allen Director	1 00 0 00	х						0	0	0
John Martin President	40 00 0 00	Х		х				418,201	0	101,401
Kevin A Edwards Vice President	40 00 0 00			х				223,366	0	34,494
Dina Plapler VP Development Health Center	40 00 0 00				х			174,087	0	30,728
Brian Otis VP Development and Campaign	40 00 0 00				Х			179,808	0	31,172
Frank Gifford VP for Development	40 00 0 00				х			159,404	0	28,126
Deborah Cunningham VP, Advancement Services and AG	40 00 0 00				Х			161,404	0	14,979
Suzanne O'Conor Legal Counsel	40 00 0 00					х		190,385	0	18,246
Hal Reed AVP Plan Giving	40 00 0 00					х		149,049	0	25,660
Thomas Scarlett System Architect	40 00 0 00					х		140,000	0	21,490
Tım Nguyen Dırector of Invest	40 00 0 00					х		124,183	0	16,454
Paul Goldberg DO Fine Arts	40 00 0 00					х		121,940	0	27,079