

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493060015149

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public

Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

A For the 2017 calendar year, or tax year beginning 06-01-2017 , and ending 05-31-2018

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

WILLAMETTE UNIVERSITY

Doing business as

Number and street (or P O box if mail is not delivered to street address)

900 STATE STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

SALEM, OR 97301

F Name and address of principal officer

STEPHEN E THORSETT

900 STATE STREET

SALEM, OR 97301

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

93-0386972

E Telephone number

(503) 370-6974

G Gross receipts \$ 158,798,765

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW WILLAMETTE EDU

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1842

M State of legal domicile OR

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

WILLAMETTE UNIVERSITY PROVIDES RIGOROUS EDUCATION IN THE LIBERAL ARTS AND SELECTED PROFESSIONAL FIELDS TEACHING AND LEARNING, STRENGTHENED BY SCHOLARSHIP AND SERVICE, FLOURISH IN A VIBRANT CAMPUS COMMUNITY A WILLAMETTE EDUCATION PREPARES GRADUATES TO TRANSFORM KNOWLEDGE INTO ACTION AND LEAD LIVES OF ACHIEVEMENT, CONTRIBUTION AND MEANING

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

33

4 Number of independent voting members of the governing body (Part VI, line 1b)

30

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

2,125

6 Total number of volunteers (estimate if necessary)

601

7a Total unrelated business revenue from Part VIII, column (C), line 12

-553,023

7b Net unrelated business taxable income from Form 990-T, line 34

-516,926

Revenue

8 Contributions and grants (Part VIII, line 1h)

10,272,515

9 Program service revenue (Part VIII, line 2g)

125,557,501

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

115,081

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

391,303

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

136,336,400

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

51,117,434

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

64,650,847

16a Professional fundraising fees (Part IX, column (A), line 11e)

42,000

b Total fundraising expenses (Part IX, column (D), line 25) ▶4,502,143

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

34,474,772

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

150,285,053

19 Revenue less expenses Subtract line 18 from line 12

-13,948,653

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

457,044,870

21 Total liabilities (Part X, line 26)

110,428,423

22 Net assets or fund balances Subtract line 21 from line 20

346,616,447

Prior Year

Current Year

Beginning of Current Year

End of Year

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2019-03-01

Date

DANIEL VALLES VP FOR FINANCE AND TREASURER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name ▶ MOSS ADAMS LLP

Firm's EIN ▶ 91-0189318

Firm's address ▶ 805 SW BROADWAY STE 1200

Phone no (503) 242-1447

PORTLAND, OR 97205

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

WILLAMETTE UNIVERSITY PROVIDES RIGOROUS EDUCATION IN THE LIBERAL ARTS AND SELECTED PROFESSIONAL FIELDS TEACHING AND LEARNING, STRENGTHENED BY SCHOLARSHIP AND SERVICE, FLOURISH IN A VIBRANT CAMPUS COMMUNITY A WILLAMETTE EDUCATION PREPARES GRADUATES TO TRANSFORM KNOWLEDGE INTO ACTION AND LEAD LIVES OF ACHIEVEMENT, CONTRIBUTION AND MEANING

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 118,570,474 including grants of \$ 50,188,430) (Revenue \$ 107,453,864)
	See Additional Data

4b	(Code) (Expenses \$ 10,744,990 including grants of \$ 0) (Revenue \$ 15,113,162)
	See Additional Data

4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
-----------	---

4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)

4e	Total program service expenses ▶ 129,315,464
-----------	---

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16 Yes	
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	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes
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) a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	No
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	3,944	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2,125	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	If "Yes," enter the name of the foreign country ▶ SP See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	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?		No
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).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		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?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	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.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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		
1b	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?	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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	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.		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization		No
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: AL, CA, CO, CT, MA, NH, NV, OR, WA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☒ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
►KENNETH L PIFER 900 STATE STREET SALEM, OR 97301 (503) 370-6974

Check if Schedule O contains a response or note to any line in this Part VII ☒

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

[illegible]

[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 92

Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
COMPASS GROUP USA PO BOX 417632 BOSTON, MA 02241	FOOD SERVICE	3,814,305
FXG CONSTRUCTION LLC 3833 CROISAN CREEK RD S SALEM, OR 97302	CONSTRUCTION	1,947,558
IBM CORPORATION PO BOX 676673 DALLAS, TX 752676673	SOFTWARE CONFIGURATION	646,655
WORKDAY INC 6230 STONERIDGE MALL ROAD PLEASANTON, CA 94588	SOFTWARE CONFIGURATION	294,204
ELLUCIAN COMPANY LP 62578 COLLECTIONS CENTER DR CHICAGO, IL 60693	SOFTWARE CONFIGURATION	288,677

Form 990 (2017)

Part VIII		Statement of Revenue				
Check if Schedule O contains a response or note to any line in this Part VIII						☐
		(A)	(B)	(C)	(D)	
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	6,350			
	d Related organizations	1d				
	e Government grants (contributions)	1e	1,317,140			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,700,914			
	g Noncash contributions included in lines 1a-1f \$		2,188,777			
	h Total. Add lines 1a-1f		11,024,404			
Program Service Revenue		Business Code				
	2a TUITION AND FEES	611310	106,083,389	106,083,389		
	b ROOM AND BOARD FEES	721310	14,350,728	14,350,728		
	c AUXILIARY INCOME	611710	762,434	762,434		
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		121,196,551			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		-251,300		324,925	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		14,853		14,853	
	6a Gross rents	(i) Real (ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)		90,020		90,020	
	8a Gross income from fundraising events (not including \$ 6,350 of contributions reported on line 1c) See Part IV, line 18	a	7,221			
	b Less direct expenses	b	8,193			
	c Net income or (loss) from fundraising events		-972		-972	
	9a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
11a OTHER INCOME	900099	1,392,814		23,202	1,369,612	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		1,392,814				
12 Total revenue. See Instructions		133,466,370	121,196,551	-553,023	1,798,438	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	7,500	7,500		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	48,883,956	48,883,956		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	1,296,974	1,296,974		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	2,487,136	533,364	1,748,163	205,609
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	104,290	41,515	62,775	
7 Other salaries and wages.	43,018,880	37,909,282	2,826,038	2,283,560
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	3,802,267	3,432,686	154,928	214,653
9 Other employee benefits.	8,526,597	7,431,872	633,408	461,317
10 Payroll taxes.	3,381,305	2,903,692	298,363	179,250
11 Fees for services (non-employees):				
a Management.				
b Legal.	132,823	5,172	115,561	12,090
c Accounting.	144,599		144,599	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	1,227,944		1,227,944	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	2,740,824	1,816,927	460,977	462,920
12 Advertising and promotion.	715,186	593,395	114,069	7,722
13 Office expenses.	2,340,648	1,816,424	291,646	232,578
14 Information technology.	1,607,776	1,279,605	270,811	57,360
15 Royalties.				
16 Occupancy.	2,654,249	2,529,205	124,632	412
17 Travel.	2,311,046	2,061,402	81,670	167,974
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	120,832	93,032	22,644	5,156
20 Interest.	2,109,004	2,039,062	69,942	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	5,826,395	5,808,411	17,984	
23 Insurance.	1,076,007	11,235	1,064,772	
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):				
a FOOD SERVICE	4,202,282	4,037,493	125,184	39,605
b PROGRAM/STUDY ABROAD	727,257	723,111	4,146	
c BOOKS AND PERIODICALS	710,339	710,339		
d FURNITURE AND EQUIPMENT	572,358	548,419	15,202	8,737
e All other expenses	3,385,632	2,801,391	421,041	163,200
25 Total functional expenses. Add lines 1 through 24e.	144,114,106	129,315,464	10,296,499	4,502,143
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 SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		40,134	1	212,044
	2	Savings and temporary cash investments		21,547,838	2	19,434,424
	3	Pledges and grants receivable, net		4,760,532	3	4,338,530
	4	Accounts receivable, net		3,106,219	4	3,665,924
	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	
	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	
	7	Notes and loans receivable, net		7,731,238	7	6,983,428
	8	Inventories for sale or use		11,284	8	-17,688
	9	Prepaid expenses and deferred charges		428,377	9	695,394
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a 255,127,354			
	b	Less: accumulated depreciation	10b 114,191,771	143,215,953	10c	140,935,583
	11	Investments—publicly traded securities		4,776,377	11	34,261,982
	12	Investments—other securities. See Part IV, line 11		270,124,982	12	257,019,299
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		1,301,936	15	3,390,923
16	Total assets. Add lines 1 through 15 (must equal line 34)		457,044,870	16	470,919,843	
Liabilities	17	Accounts payable and accrued expenses		17,499,264	17	19,184,286
	18	Grants payable			18	
	19	Deferred revenue		2,617,817	19	1,944,375
	20	Tax-exempt bond liabilities		69,030,151	20	67,493,393
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		1,330,070	21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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 D		19,951,121	25	21,195,969
	26	Total liabilities. Add lines 17 through 25		110,428,423	26	109,818,023
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		53,260,804	27	56,075,158
	28	Temporarily restricted net assets		145,191,397	28	150,909,803
	29	Permanently restricted net assets		148,164,246	29	154,116,859
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		346,616,447	33	361,101,820
34	Total liabilities and net assets/fund balances		457,044,870	34	470,919,843	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	133,466,370
2	Total expenses (must equal Part IX, column (A), line 25)	2	144,114,106
3	Revenue less expenses Subtract line 2 from line 1	3	-10,647,736
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	346,616,447
5	Net unrealized gains (losses) on investments	5	23,720,001
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	1,413,108
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	361,101,820

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

Software ID:

Software Version:

EIN: 93-0386972

Name: WILLAMETTE UNIVERSITY

Form 990 (2017)

Form 990, Part III, Line 4a:

HIGHER EDUCATION - INSTRUCTION AND SUPPORT 1,917 IN THE COLLEGE OF LIBERAL ARTS, 293 IN THE COLLEGE OF LAW, 200 IN THE ATKINSON GRADUATE SCHOOL OF MANAGEMENT, AND 52 IN THE JOINT DEGREE JD/MBA (2,462 STUDENTS)

Form 990, Part III, Line 4b:

HIGHER EDUCATION - AUXILIARY FUNCTIONS INCLUDES ROOM & BOARD (FOR 1,253 STUDENTS) AND SUMMER CONFERENCES

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES F ALBAUGH BOARD MEMBER	1 00	X						0	0	0
BRYN A BERGLUND BOARD MEMBER	1 00	X						0	0	0
ROBIN O BRENA BOARD MEMBER	1 00	X						0	0	0
KATHERINE S CAHILL BOARD MEMBER	1 00	X						0	0	0
TRUMAN W COLLINS JR BOARD MEMBER	1 00	X						0	0	0
JAMES B CUNO BOARD MEMBER	1 00	X						0	0	0
HEATHER K DEMPSEY BOARD MEMBER - 9/20/17	1 00	X						0	0	0
JAMES A FITZHENRY BOARD MEMBER	1 00	X						0	0	0
ERIC M FRIEDENWALD-FISHMAN BOARD MEMBER	1 00	X						0	0	0
MELVIN HENDERSON-RUBIO BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH F HOFFMAN BOARD MEMBER	1 00	X						0	0	0
BRIAN R HUFFT BOARD MEMBER	1 00	X						0	0	0
EVA M KRIPALANI BOARD MEMBER	1 00	X						0	0	0
KONRAD CHIP R KRUGER BOARD MEMBER	1 00	X						0	0	0
ELIZABETH J LARGE BOARD MEMBER	1 00	X						0	0	0
ANDY M MIGUEL BOARD MEMBER - 5/31/18	1 00	X						0	0	0
HEIDI A PATTERSON BOARD MEMBER	1 00	X						0	0	0
CRAIG S PESTI-STROBEL BOARD MEMBER	1 00	X						0	0	0
PUNIT RENJEN BOARD MEMBER - 5/31/18	1 00	X						0	0	0
LYNN E RISTIG BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SANDRA M ROWE BOARD MEMBER - 5/31/18	1 00	X						0	0	0
KEVIN R SMITH BOARD MEMBER	1 00	X						0	0	0
MELISSA L SMITH BOARD MEMBER	1 00	X						0	0	0
PATRICIA C SMULLIN BOARD MEMBER	1 00	X						0	0	0
GUY C STEPHENSON BOARD MEMBER - 5/31/18	1 00	X						0	0	0
PATRICK J WAITE BOARD MEMBER	1 00	X						0	0	0
RODERICK C WENDT BOARD MEMBER	1 00	X						0	0	0
DALE C SAUSE CHAIRMAN OF THE BOARD	1 00	X		X				0	0	0
LYNNE H SAXTON VICE CHAIR OF THE BOARD	1 00	X		X				0	0	0
SEAN B O'HOLLAREN SECRETARY	1 00	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KERRY R TYMCHUK ASSISTANT SECRETARY	1 00	X		X				0	0	0
STEVEN E WYNNE IMMEDIATE PAST CHAIR OF THE BOARD	1 00	X		X				0	0	0
STEPHEN E THORSETT PRESIDENT	40 00	X		X				428,756	0	182,857
MONICA RIMAI SVP FINANCE/TREASURER - 1/5/18	40 00	X		X				242,142	0	27,557
DANIEL VALLES SVP FINANCE/TREASURER	40 00	X		X				153,832	0	32,765
COLLEEN KAWAHARA ADMINISTRATIVE SECRETARY	40 00			X				81,856	0	11,486
JAMES R BAUER VP FOR PLANNING, FACILITIES & EXTERNAL AFFAIRS	40 00				X			173,015	0	65,626
CURTIS BRIDGEMAN DEAN, COLLEGE OF LAW	40 00				X			253,571	0	49,873
RUTH FEINGOLD DEAN, COLLEGE OF LIBERAL ARTS	40 00				X			178,983	0	33,177
CAROL LONG PROVOST AND SENIOR VICE PRESIDENT	40 00				X			241,756	0	42,059

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KENNETH PIFER CONTROLLER	40 00				X			153,184	0	28,458
EDWARD WHIPPLE VICE PRESIDENT FOR STUDENT AFFAIRS	40 00				X			173,676	0	27,744
SHELBY RADCLIFFE VP FOR ADVANCEMENT	40 00					X		283,029	0	41,773
DEBRA RINGOLD DEAN, ATKINSON GRAD SCHOOL	40 00					X		242,221	0	34,520
SYMEON SYMEONIDES PARKS DISTINGUISHED PROFES	40 00					X		261,196	0	43,741
YVONNE TAMAYO PROFESSOR OF LAW, GENERAL COUNSEL	40 00					X		206,306	0	26,352
NORMAN WILLIAMS ASSOCIATE DEAN FOR ACADEMIC AFFAIRS, LAW PROFESSOR	40 00					X		210,562	0	31,267

SCHEDULE A (Form 990 or 990EZ)	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. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2017 Open to Public Inspection
	Department of the Treasury Internal Revenue Service Name of the organization WILLAMETTE UNIVERSITY	Employer identification number 93-0386972

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2

☒

A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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 in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	12,554,742	7,713,676	9,500,089	10,272,514	11,024,404	51,065,425
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	12,554,742	7,713,676	9,500,089	10,272,514	11,024,404	51,065,425
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,989,260
6	Public support. Subtract line 5 from line 4						47,076,165

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7	Amounts from line 4	12,554,742	7,713,676	9,500,089	10,272,514	11,024,404	51,065,425
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,925,481	1,444,124	199,988	230,178	339,778	4,139,549
9	Net income from unrelated business activities, whether or not the business is regularly carried on		223,641				223,641
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	2,307,197	1,526,934	2,687,881	354,753	1,369,612	8,246,377
11	Total support. Add lines 7 through 10						63,674,992
12	Gross receipts from related activities, etc (see instructions)					12	623,641,303
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14 73.930 %
15	Public support percentage for 2016 Schedule A, Part II, line 14	15 74.290 %
16a	33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☒	
b	33 1/3% support test—2016. 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—2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ ☐	
b	10%-facts-and-circumstances test—2016. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ ☐	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ ☐	

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

(Complete only if you checked the box on line 10 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 in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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 furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated 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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2016. 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 ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
	11a	
	11b	
	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

- 7** ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART I, LINE 7	THE UNIVERSITY IS TAX EXEMPT AS A SCHOOL UNDER 170(B)(1)(A)(II) AND ALSO MEETS THE PUBLIC SUPPORT TEST UNDER 509(A)(1) CALCULATED IN PART II OF SCHEDULE A

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493060015149	
SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service		Supplemental Financial Statements ► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.			OMB No 1545-0047 2017 Open to Public Inspection
Name of the organization WILLAMETTE UNIVERSITY				Employer identification number 93-0386972	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1		Total number at end of year			
2		Aggregate value of contributions to (during year)			
3		Aggregate value of grants from (during year)			
4		Aggregate value at end of year			
5		Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No			
6		Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No			
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1 Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a Total number of conservation easements				2a	
b Total acreage restricted by conservation easements				2b	
c Number of conservation easements on a certified historic structure included in (a)				2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4 Number of states where property subject to conservation easement is located ►					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1 ► \$ 298,918					
(ii) Assets included in Form 990, Part X ► \$ 5,826,883					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1 ► \$ 0					
b Assets included in Form 990, Part X ► \$ 0					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
			Cat No 52283D Schedule D (Form 990) 2017		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** ☒ Public exhibition
- b** ☒ Scholarly research
- c** ☒ Preservation for future generations
- d** ☐ Loan or exchange programs
- e** ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	240,701,156	229,133,489	245,454,444	236,678,165	222,487,762
b Contributions	6,865,714	3,528,612	4,130,352	2,178,723	3,727,322
c Net investment earnings, gains, and losses	23,854,468	21,941,870	-6,353,672	19,990,691	23,482,147
d Grants or scholarships	3,810,478	3,905,787	4,015,227	4,815,105	4,601,814
e Other expenditures for facilities and programs	7,757,467	8,841,907	9,195,024	8,390,249	8,012,288
f Administrative expenses	1,222,913	1,155,121	887,384	187,781	404,964
g End of year balance	258,630,480	240,701,156	229,133,489	245,454,444	236,678,165

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 9 170 %

b Permanent endowment ▶ 56 900 %

c Temporarily restricted endowment ▶ 33 930 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		8,655,297		8,655,297
b Buildings		179,038,270	68,317,824	110,720,446
c Leasehold improvements		14,217,407	11,648,919	2,568,488
d Equipment		7,557,835	6,356,759	1,201,076
e Other		45,658,545	27,868,269	17,790,276
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				140,935,583

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) MULTI-STRATEGY LIMITED PARTNERSHIP INVESTMENT FUND	250,823,011	F
(B) PRIVATELY POOLED FUNDS	5,567,325	F
(C) PRIVATE STOCK & PARTNERSHIP INTERESTS	628,963	C
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ▶	257,019,299	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value	
(1) Federal income taxes		
ANNUITIES AND TRUSTS PAYABLE	14,380,269	
GOVERNMENT ADVANCES FOR STUDENT LOANS	6,815,700	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	21,195,969	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	107,527,880
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	23,720,001
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-49,014,965
e	Add lines 2a through 2d	2e	-25,294,964
3	Subtract line 2e from line 1	3	132,822,844
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,227,944
b	Other (Describe in Part XIII)	4b	-584,418
c	Add lines 4a and 4b	4c	643,526
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	133,466,370

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	93,042,506
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	8,193
e	Add lines 2a through 2d	2e	8,193
3	Subtract line 2e from line 1	3	93,034,313
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,227,944
b	Other (Describe in Part XIII)	4b	49,851,849
c	Add lines 4a and 4b	4c	51,079,793
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	144,114,106

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 93-0386972
Name: WILLAMETTE UNIVERSITY

Supplemental Information

Return Reference	Explanation
PART III, LINE 4	WILLAMETTE UNIVERSITY HAS A COLLECTION OF ART AND CULTURAL/HISTORICAL ARTIFACTS THAT CONSISTS OF PAINTINGS, PHOTOGRAPHS, CERAMICS, DRAWINGS, ARCHAEOLOGICAL ARTIFACTS, TEXTILES, SCULPTURES, NATIVE AMERICAN WOVEN BASKETS, AND OTHER MEDIA THE COLLECTION IS VALUED AT \$5,826,883 AND IS HELD IN THE UNIVERSITY ART MUSEUM THE MUSEUM EXISTS TO SUPPORT THE LIBERAL ARTS CURRICULUM OF WILLAMETTE UNIVERSITY AND TO SERVE AS AN INTELLECTUAL AND CULTURAL RESOURCE FOR THE CITY OF SALEM AND BEYOND, THROUGH THE COLLECTION, PRESERVATION, EXHIBITION AND INTERPRETATION OF HISTORICAL AND CONTEMPORARY ART WITH AN EMPHASIS ON REGIONAL ART

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE ENDOWMENT FUNDS HELD BY THE UNIVERSITY ARE USED TO SUPPORT OPERATIONS, INCLUDING FINANCIAL AID, INSTRUCTION AND BUILDINGS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	FIN 48 (ASC 740) UNCERTAIN TAX POSITIONS FINANCIAL STATEMENT FOOTNOTE - U S GENERALLY ACC EPTED ACCOUNTING PRINCIPLES REQUIRE THE UNIVERSITY'S MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE UNIVERSITY AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE UNIVERSITY HAS TAK EN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE IRS MANAGEMENT HAS ANALYZED TAX POSITIONS TAKEN BY THE UNIVERSITY AND HAS CONCLUD ED AS OF MAY 31, 2018, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEM ENTS THE UNIVERSITY IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS THE UNIVERSITY'S MANAGEMENT BELIE VES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO FISCAL 2014

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	SCHOLARSHIPS NETTED WITH REVENUE ON FINANCIAL STATEMENTS -49,788,819 CHANGE IN VALUE OF ANNUITIES AND TRUSTS 773,854

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	UNRELATED BUSINESS INCOME FROM ALTERNATIVE INVESTMENTS -576,225 FUNDRAISING EXPENSES NETTED WITH REVENUE ON 990 -8,193

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EVENT EXPENSES NETTED WITH REVENUE ON 990 8,193

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS NETTED WITH REVENUE ON FINANCIAL STATEMENTS 49,788,819 NONCASH EMPLOYEE BENEFITS NOT INCLUDED ON FINANCIAL STATEMENTS 63,030

SCHEDULE E (Form 990 or 990-EZ)	Schools ► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.	OMB No 1545-0047
		2017
	Department of the Treasury Name of the organization WILLAMETTE UNIVERSITY	Employer identification number 93-0386972

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

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

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	THE UNIVERSITY'S NON-DISCRIMINATION NOTICE WAS PUBLISHED IN THE OREGONIAN NEWSPAPER ON SEPTEMBER 20, 2017
SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVES TITLE IV FUNDS FOR FINANCIAL AID PURPOSES, AS WELL AS FEDERAL AND STATE GRANTS FOR FACULTY RESEARCH AND PROGRAMMING PURPOSES

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization
WILLAMETTE UNIVERSITY

Statement of Activities Outside the United States

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

► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

**Open to Public
Inspection**

Employer identification number

93-0386972

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
3a Sub-total	1	2			2,131,114
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	1	2			2,131,114

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► _____
- 3 Enter total number of other organizations or entities ► _____

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.

[illegible]

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)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately 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, do not file with Form 990)* ☐ Yes ☒ 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)* ☐ Yes ☒ No
- 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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 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)* ☐ Yes ☒ 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☒ No

Part V Supplemental Information

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).

Return Reference	Explanation
PART I, LINE 2	SCHOLARSHIPS/GRANTS AWARDED TO STUDENTS WHO ARE STUDYING ABROAD ARE APPLIED TO THEIR STUDENT ACCOUNTS. THE SCHOLARSHIPS OFFSET TUITION AND FEES TO REDUCE THE AMOUNT THAT STUDENTS OWE TO THE UNIVERSITY. THUS, THE STUDENTS DO NOT PHYSICALLY RECEIVE THE MONEY. PROCEDURES DO NOT DIFFER FROM THOSE APPLIED TO STUDENTS WHO ARE ATTENDING ON CAMPUS, OTHER THAN VERIFICATION OF PARTICIPATION AND COMPLETION OF THE PROGRAM. THE FOLLOWING ARE THE PROCEDURES FOLLOWED BY THE UNIVERSITY FOR MONITORING THE USE OF SCHOLARSHIP/GRANT FUNDS. THE BUSINESS OFFICE NOTIFIES THE FINANCIAL AID OFFICE OF AMOUNTS AVAILABLE TO AWARD TO STUDENTS EACH ACADEMIC YEAR. THE FINANCIAL AID OFFICE SELECTS RECIPIENTS BASED UPON CRITERIA ESTABLISHED FOR EACH TYPE OF FUNDING. THE FINANCIAL AID OFFICE NOTIFIES THE BUSINESS OFFICE OF EXPENDITURES FOR EACH TERM DURING THE ACADEMIC YEAR. AT YEAR-END, THE FINANCIAL AID OFFICE AND BUSINESS OFFICE RECONCILE ACCOUNTS FOR ALL FUNDS. THE DEVELOPMENT OFFICE PROVIDES ANNUAL REPORTS TO THE DONORS REGARDING THE USE OF DONOR-CONTRIBUTED SCHOLARSHIP FUNDS (ENDOWED OR ANNUALLY FUNDED).

Return Reference	Explanation
PART I, LINE 3	EXPENDITURES ARE ACCOUNTED FOR UNDER THE ACCRUAL METHOD

Additional Data

Software ID:

Software Version:

EIN: 93-0386972

Name: WILLAMETTE UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	1	2	PROGRAM SERVICES	STUDY ABROAD PROGRAM	834,140
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	GRANTMAKING	STUDY ABROAD PROGRAM	297,637

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
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	GRANTMAKING	STUDY ABROAD PROGRAM	768,412
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	GRANTMAKING	STUDY ABROAD PROGRAM	138,175

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
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,	0	0	GRANTMAKING	STUDY ABROAD PROGRAM	16,950
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING	STUDY ABROAD PROGRAM	54,737

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
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING	STUDY ABROAD PROGRAM	21,063

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	RUSSIA AND NEIGHBORING STATES	1	21,063	APPLIED TO STUDENT ACCOUNT TO OFFSET TUITION AND FEES			
SCHOLARSHIPS	SOUTH AMERICA	10	138,175	APPLIED TO STUDENT ACCOUNT TO OFFSET TUITION AND FEES			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	SUB-SAHARAN AFRICA	1	16,950	APPLIED TO STUDENT ACCOUNT TO OFFSET TUITION AND FEES			
SCHOLARSHIPS	EAST ASIA AND THE PACIFIC	22	297,637	APPLIED TO STUDENT ACCOUNT TO OFFSET TUITION AND FEES			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	EUROPE (INCLUDING ICELAND & GREENLAND)	61	768,412	APPLIED TO STUDENT ACCOUNT TO OFFSET TUITION AND FEES			
SCHOLARSHIPS	MIDDLE EAST AND NORTH AFRICA	3	54,737	APPLIED TO STUDENT ACCOUNT TO OFFSET TUITION AND FEES			

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
WILLAMETTE UNIVERSITY

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number
93-0386972

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS TO STUDENTS	2965	48,491,845			
(2) OTHER STUDENT AWARDS AND PRIZES	177	392,111			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	PROCEDURES FOR MONITORING OF SCHOLARSHIPS - THE BUSINESS OFFICE NOTIFIES THE FINANCIAL AID OFFICE OF AMOUNTS AVAILABLE TO AWARD TO STUDENTS EACH ACADEMIC YEAR THE FINANCIAL AID OFFICE SELECTS RECIPIENTS BASED UPON CRITERIA ESTABLISHED FOR EACH TYPE OF FUNDING THE FINANCIAL AID OFFICE NOTIFIES THE BUSINESS OFFICE OF EXPENDITURES FOR EACH TERM DURING THE ACADEMIC YEAR AT YEAR-END, THE FINANCIAL AID OFFICE AND BUSINESS OFFICE RECONCILE ACCOUNTS FOR ALL FUNDS THE DEVELOPMENT OFFICE PROVIDES ANNUAL REPORTS TO THE DONORS REGARDING THE USE OF DONOR-CONTRIBUTED SCHOLARSHIP FUNDS (ENDOWED OR ANNUALLY FUNDED) PROCEDURES FOR MONITORING RESEARCH GRANTS - THERE ARE SEVERAL DIFFERENT DEPARTMENTS THAT OFFER RESEARCH GRANTS AT WILLAMETTE EACH DEPARTMENT HAS DIFFERENT MONITORING PROCEDURES FOR THE USE OF GRANT FUNDS HOWEVER, THE MONITORING PROCEDURES TYPICALLY INVOLVE THE FOLLOWING A WRITTEN AND/OR VERBAL REPORT ON THE RESEARCH PROJECT MUST BE SUBMITTED DURING AND/OR AT THE CONCLUSION OF THE PROJECT, RECEIPTS MUST BE SUBMITTED FOR REIMBURSEMENT OF PROJECT EXPENDITURES FINAL PAYMENT OF GRANT FUNDS IS OFTEN CONTINGENT ON THE AFOREMENTIONED ITEMS THE DEPARTMENT THAT AWARDS THE GRANTS HANDLES THE RELATED MONITORING OF THOSE GRANT FUNDS PROCEDURES FOR MONITORING OTHER AWARDS AND PRIZES - AWARD/PRIZE RECIPIENTS ARE DETERMINED BY CRITERIA ESTABLISHED BY THE RESPECTIVE DEPARTMENTS DEPARTMENTS WORK WITH THE ACCOUNTING OFFICE TO MAKE SURE THAT THE AWARD FUNDS ARE DISBURSED TO THE CORRECT STUDENT OR FACULTY MEMBER

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization WILLAMETTE UNIVERSITY	Employer identification number 93-0386972
---	--

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
☒ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account		
☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☒ Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b	No
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations		
☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

For each individual whose compensation must be reported on 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.

See Additional Data Table**Schedule J (Form 990) 2017**

Part III Supplemental Information

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.

Return Reference	Explanation
PART I, LINE 1A	THE UNIVERSITY PRESIDENT IS REQUIRED AS A CONDITION OF EMPLOYMENT TO MAINTAIN A PERSONAL RESIDENCE IN A HOUSE PROVIDED BY THE UNIVERSITY. THE HOUSING ARRANGEMENT IS FOR THE CONVENIENCE OF THE UNIVERSITY AND THE HOUSE IS USED FOR UNIVERSITY BUSINESS. THE PRESIDENT FLEW FIRST CLASS ON ONE OCCASION DURING THE 2017-2018 FISCAL YEAR. CLUB MEMBERSHIPS WERE PROVIDED TO THE UNIVERSITY PRESIDENT AND THE DEAN OF THE GRADUATE SCHOOL OF MANAGEMENT AND ARE USED FOR UNIVERSITY BUSINESS MEETINGS. PERSONAL SERVICES CONSIST OF CUSTODIAL SERVICES FOR THE UNIVERSITY-OWNED RESIDENCE OCCUPIED BY THE PRESIDENT.
PART I, LINE 1B	ITEMS NOTED IN LINE 1A WERE PROVIDED BASED ON EMPLOYMENT AGREEMENTS WITH THE UNIVERSITY PRESIDENT AND OTHER EMPLOYEES, AND THE UNIVERSITY FOLLOWED THE PROVISIONS OF THESE AGREEMENTS REGARDING PAYMENT/REIMBURSEMENT/ PROVISION OF THESE ITEMS.
PART I, LINE 4B	THE EMPLOYMENT AGREEMENT FOR PRESIDENT THORSETT INCLUDES A LONGEVITY BONUS EQUAL TO 10% OF HIS BASE SALARY FOR EACH OF THE FIVE YEARS FOLLOWING JULY 1, 2016, PAYABLE AFTER JUNE 30, 2021. DURING FISCAL YEAR 2017-2018, VICE PRESIDENT FOR ADVANCEMENT SHELBY RADCLIFFE ASSIGNED AN AGREEMENT WHICH PROVIDES A LONGEVITY BONUS EQUAL TO 5% OF HER SALARY, PAYABLE UPON COMPLETION OF 6 YEARS OF FULL SERVICE ENDING ON MAY 31, 2023.

Additional Data

Software ID:
Software Version:
EIN: 93-0386972
Name: WILLAMETTE UNIVERSITY

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1STEPHEN E THORSETT PRESIDENT	(i)	422,107	6,649	0	82,418	100,439	611,613	0
	(ii)	0	0	0	0	0	0	0
1MONICA RIMAI SVP FINANCE/TREASURER - 1/5/18	(i)	241,918	224	0	19,064	8,493	269,699	0
	(ii)	0	0	0	0	0	0	0
2DANIEL VALLES SVP FINANCE/TREASURER	(i)	153,522	310	0	16,037	16,728	186,597	0
	(ii)	0	0	0	0	0	0	0
3JAMES R BAUER VP FOR PLANNING, FACILITIES & EXTERN	(i)	162,353	10,662	0	17,328	48,298	238,641	0
	(ii)	0	0	0	0	0	0	0
4CURTIS BRIDGEMAN DEAN, COLLEGE OF LAW	(i)	252,739	832	0	25,998	23,875	303,444	0
	(ii)	0	0	0	0	0	0	0
5RUTH FEINGOLD DEAN, COLLEGE OF LIBERAL ARTS	(i)	179,268	-285	0	18,500	14,677	212,160	0
	(ii)	0	0	0	0	0	0	0
6CAROL LONG PROVOST AND SENIOR VICE PRESIDENT	(i)	233,084	8,672	0	24,000	18,059	283,815	0
	(ii)	0	0	0	0	0	0	0
7KENNETH PIFER CONTROLLER	(i)	152,737	447	0	15,732	12,726	181,642	0
	(ii)	0	0	0	0	0	0	0
8EDWARD WHIPPLE VICE PRESIDENT FOR STUDENT AFFAIRS	(i)	167,552	6,124	0	17,000	10,744	201,420	0
	(ii)	0	0	0	0	0	0	0
9SHELBY RADCLIFFE VP FOR ADVANCEMENT	(i)	277,752	5,277	0	32,776	8,997	324,802	0
	(ii)	0	0	0	0	0	0	0
10DEBRA RINGOLD DEAN, ATKINSON GRAD SCHOOL	(i)	230,949	11,272	0	23,180	11,340	276,741	0
	(ii)	0	0	0	0	0	0	0
11SYMEON SYMEONIDES PARKS DISTINGUISHED PROFES	(i)	254,054	7,142	0	26,111	17,630	304,937	0
	(ii)	0	0	0	0	0	0	0
12YVONNE TAMAYO PROFESSOR OF LAW, GENERAL COUNSEL	(i)	204,239	2,067	0	17,245	9,107	232,658	0
	(ii)	0	0	0	0	0	0	0
13NORMAN WILLIAMS ASSOCIATE DEAN FOR ACADEMIC AFFAIRS,	(i)	209,978	584	0	21,210	10,057	241,829	0
	(ii)	0	0	0	0	0	0	0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
WILLAMETTE UNIVERSITY

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.

► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number
93-0386972

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A STATE OF OREGON - OREGON FACILITIES AUTHORITY	93-6001787	68608JMC2	05-06-2010	28,540,002	SEE SCHEDULE K, PART VI		X		X		X
B STATE OF OREGON - OREGON FACILITIES AUTHORITY	93-6001787		07-14-2016	22,410,000	SEE SCHEDULE K, PART VI		X		X		X
C STATE OF OREGON - OREGON FACILITIES AUTHORITY	93-6001787	68608JTZ4	07-14-2016	22,815,181	SEE SCHEDULE K, PART VI		X		X		X
D STATE OF OREGON - OREGON FACILITIES AUTHORITY	93-6001787		10-02-2017	7,680,000	SEE SCHEDULE K, PART VI		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	3,485,000							
2	Amount of bonds legally defeased	9,100,000							
3	Total proceeds of issue	28,540,002		22,387,590		22,815,181		7,680,000	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	438,227		232,892		315,181		100,000	
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	10,405,304				6,910,525			
11	Other spent proceeds	17,696,471		22,154,698		12,500,000		7,580,000	
12	Other unspent proceeds					3,089,475			
13	Year of substantial completion	2012							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X		X
15	Were the bonds issued as part of an advance refunding issue?	X		X		X			X
16	Has the final allocation of proceeds been made?	X		X			X	X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

				A		B		C		D	
				Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?				X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?				X		X		X		X

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b 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 property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5 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 ▶								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?		X		X		X	X	
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . .								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X	X		X		X	
b Exception to rebate?		X		X		X		X
c No rebate due?	X			X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
DATE REBATE COMPUTATION PERFORMED	ISSUER NAME STATE OF OREGON - OREGON FACILITIES AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED 04/01/2015

Return Reference	Explanation
SCHEDULE K, PART I, BOND ISSUES	(A) ISSUER NAME STATE OF OREGON - OREGON FACILITIES AUTHORITY 5/6/10 (F) DESCRIPTION OF PURPOSE THE PROCEEDS OF THE SERIES 2010 BONDS WERE USED TO REPAY THE OUTSTANDING LINE OF CREDIT, TO ADVANCE REFUND THE REMAINING BALANCES OF THE SERIES 2004 (ISSUED JUNE 30, 2004) AND SERIES 2005 (ISSUED AUGUST 18, 2005) BONDS, TO PROVIDE FUNDING FOR SEVERAL CAPITAL PROJECTS, AND TO ASSIST WITH OTHER FACILITY UPGRADES AND IMPROVEMENTS (A) ISSUER NAME STATE OF OREGON - OREGON FACILITIES AUTHORITY 7/14/16 (F) DESCRIPTION OF PURPOSE THE PROCEEDS OF THE 2016 SERIES A BONDS WERE USED TO REFUND THE MAJORITY OF THE 2007 SERIES A BONDS (A) ISSUER NAME STATE OF OREGON - OREGON FACILITIES AUTHORITY 7/14/16 (F) DESCRIPTION OF PURPOSE THE PROCEEDS OF THE 2016 SERIES B BONDS WERE USED TO REFUND THE SERIES 2014 BONDS AND TO FUND \$10,000,000 IN RESIDENCE HALL UPGRADES (A) ISSUER NAME STATE OF OREGON - OREGON FACILITIES AUTHORITY 10/2/17 (F) DESCRIPTION OF PURPOSE THE PROCEEDS OF THE 2016 SERIES C BONDS WERE USED TO REFUND THE SERIES 2014 BONDS (WHICH CONTAINED THE REMAINING UNPAID BALANCES OF THE SERIES 1994 BONDS) AS WELL AS A PORTION OF THE SERIES 2007 BONDS (WHICH CONTAINED THE REMAINING UNPAID BALANCES OF THE SERIES 1991 BONDS)

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
WILLAMETTE UNIVERSITY

Employer identification number
93-0386972

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						► \$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		39,500	SCHOLARSHIP	TO ASSIST WITH FUNDING WILLAMETTE UNDERGRADUATE EDUCATION

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) RACHEL DEWEY THORSETT	SEE PART V	41,515	EMPLOYMENT		No
(2) JACQUELINE L BALZER	SEE PART V	62,775	EMPLOYMENT		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	(A) NAME OF PERSON RACHEL DEWEY THORSETT(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION SPOUSE OF OFFICER STEPHEN THORSETT
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	(A) NAME OF PERSON JACQUELINE L BALZER(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION SPOUSE OF OFFICER MONICA RIMAI

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
WILLAMETTE UNIVERSITY

Employer identification number
93-0386972

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	30	149,822	OPINION OF EXPERTS
2 Art—Historical treasures	X	5	127,240	OPINION OF EXPERTS
3 Art—Fractional interests				
4 Books and publications	X		6,000	OPINION OF EXPERTS
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	39	415,681	REPORTED MARKET VALUE
10 Securities—Closely held stock				
11 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 ► (TRUST INTERESTS)	X	7	1,474,179	OPINION OF EXPERTS
26 Other ► (MUSICAL INSTRUMENT)	X	1	8,500	OPINION OF EXPERTS
27 Other ► (MACHINERY)	X	1	7,356	OPINION OF EXPERTS
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

6

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II Supplemental Information.

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.

Return Reference	Explanation
PART I, COLUMN (B)	REPRESENTS THE NUMBER OF DONORS WHO MADE CONTRIBUTIONS FOR THE APPLICABLE CATEGORIES
PART I, LINE 33	\$16,944 WAS NOT INCLUDED IN REVENUE BECAUSE NON-ART IN-KIND DONATIONS UNDER \$5,000 ARE NOT RECORDED IN GENERAL LEDGER PER POLICY

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
WILLAMETTE UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2017

**Open to Public
Inspection**

Employer identification number

93-0386972

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	RODERICK WENDT, TRUSTEE, AND STEVEN WYNNE, TRUSTEE, ARE IN A BUSINESS RELATIONSHIP EVA KR IPALANI, TRUSTEE, AND ELIZABETH LARGE, TRUSTEE, ARE IN A BUSINESS RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 AND ITS RELATED SCHEDULES, EXCEPT FOR SCHEDULE B, WERE PROVIDED TO ALL MEMBERS OF THE BOARD OF TRUSTEES PRIOR TO THE UNIVERSITY FILING THE COMPLETED FORM WITH THE IRS. FORM 990 AND ALL ITS ACCOMPANYING SCHEDULES ARE REVIEWED BY THE CONTROLLER AND THE SENIOR VICE PRESIDENT FOR FINANCE AND ADMINISTRATION, AS WELL AS THE AUDIT COMMITTEE. THE DRAFT FORM 990 (EXCEPT FOR SCHEDULE B) IS POSTED TO A SECURE WEBSITE THAT CAN ONLY BE ACCESSED BY MEMBERS OF THE BOARD OF TRUSTEES. BOARD MEMBERS ARE NOTIFIED VIA E-MAIL THAT FORM 990 IS AVAILABLE TO REVIEW ON THE SECURE WEBSITE. IN ADDITION, THE AUDIT COMMITTEE REVIEWS AND DISCUSSES THE RETURN. AFTER THE FORM HAS BEEN REVIEWED BY ALL NOTED PARTIES IT IS MODIFIED (IF NECESSARY), FINALIZED, AND SUBMITTED TO THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED AND REVIEWED ANNUALLY TO THOSE WHOM IT APPLIES OFFICERS, MEMBERS OF THE BOARD OF TRUSTEES AND KEY EMPLOYEES ALL TRUSTEES, OFFICERS AND KEY EMPLOYEES MUST COMPLETE, SIGN AND RETURN THE POLICY TO THE PRESIDENT OR THE SENIOR VICE PRESIDENT FOR FINANCE AND ADMINISTRATION THE BOARD'S PROCESS FOR ADDRESSING CONFLICTS OF INTEREST IN ACCORDANCE WITH THE ADOPTED ABOVE-REFERENCED POLICY IS AS FOLLOWS "IF AN INDIVIDUAL BELIEVES THAT HE OR SHE MAY HAVE A CONFLICT OF INTEREST, THE INDIVIDUAL SHALL PROMPTLY AND FULLY DISCLOSE THE CONFLICT ON A FORM TO THE CHAIRMAN OF THE BOARD OF TRUSTEES OR PRESIDENT, OR THE CHAIR OF ANY COMMITTEE OF THE BOARD CONSIDERING THE MATTER, AND SHALL REFRAIN FROM PARTICIPATING ON BEHALF OF THE UNIVERSITY IN THE MATTER TO WHICH THE CONFLICT RELATES UNTIL THE CONFLICT QUESTION HAS BEEN WAIVED BY VOTE OF THE BOARD OF TRUSTEES OR A COMMITTEE OF THE BOARD AFTER THE MATERIAL FACTS OF THE TRANSACTION AND THE INDIVIDUAL'S INTEREST ARE DISCLOSED OR KNOWN TO THE BOARD OR COMMITTEE OF THE BOARD, OR OTHERWISE RESOLVED IN COMPLIANCE WITH THE OREGON NONPROFIT CORPORATION ACT (ORS CH 65) " THE BOARD CHAIR, BOARD TREASURER, AND ADMINISTRATIVE SECRETARY TO THE BOARD MONITOR COMPLIANCE ON AN ONGOING BASIS MONITORING ACTIVITIES MAY INCLUDE REVIEW OF MEETING MINUTES BY THE ADMINISTRATIVE SECRETARY TO IDENTIFY POTENTIAL/DEVELOPING CONFLICTS OR CONFLICTS THAT MAY HAVE ALREADY OCCURRED AND INFORMAL DISCUSSIONS WITH COMMITTEE CHAIRS OR BOARD OFFICERS TO RAISE AWARENESS OF CONFLICTS AND POTENTIAL CONFLICTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	AN AD HOC COMMITTEE OF MEMBERS OF THE BOARD OF TRUSTEES ESTABLISHED THE COMPENSATION FOR THE PRESIDENT OF THE UNIVERSITY. THE COMMITTEE CONSISTED OF THREE MEMBERS WHO DID NOT HAVE A CONFLICT OF INTEREST PER IRS REGULATIONS SECTION 53.4958-6(C)(1)(III). IN ORDER TO ESTABLISH AN APPROPRIATE LEVEL OF COMPENSATION, THE COMMITTEE GATHERED DATA FROM SIMILAR SIZED PRIVATE LIBERAL ARTS COLLEGES LOCATED IN THE NORTHWESTERN UNITED STATES. THE DATA FROM THE SCHOOLS WAS OBTAINED DIRECTLY FROM EACH INSTITUTION. IN ADDITION, A NATIONWIDE REVIEW OF COMPENSATION AS REPORTED ON THE 990'S OF OTHER SIMILAR SIZED PRIVATE LIBERAL ARTS UNIVERSITIES WAS PERFORMED. ONCE THE AMOUNT WAS DECIDED UPON, THE INFORMATION WAS PASSED ON TO THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SUBSEQUENTLY APPROVED THE COMPENSATION PACKAGE. THE LAST TIME THIS PROCESS WAS UNDERTAKEN BY THE UNIVERSITY WAS IN AUGUST OF 2014.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE UNIVERSITY FILED FOR TAX EXEMPTION BEFORE JULY 15, 1987 AND DID NOT HAVE A COPY OF FORM 1023 ON FILE AT THAT TIME AND IS THEREFORE NOT REQUIRED TO MAKE FORM 1023 PUBLICLY AVAILABLE THE UNIVERSITY INSTEAD POSTS A COPY OF ITS CURRENT IRS EXEMPTION LETTER ON ITS WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	AUDITED FINANCIAL STATEMENTS, BYLAWS AND ARTICLES OF INCORPORATION ARE POSTED ON THE UNIVE RSITY'S WEBSITE THE UNIVERSITY'S CONFLICT OF INTEREST POLICY IS NOT MADE AVAILABLE TO THE PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, LINE 1A	THE TREASURER OF THE ORGANIZATION IS NOT CONSIDERED A TRUSTEE BUT IS CONSIDERED A MEMBER OF THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS THIS POSITION IS REPORTED AS A DIRECTOR/TRUSTEE ON THE FORM 990 BECAUSE MEMBERS OF THE EXECUTIVE COMMITTEE HAVE THE RIGHT TO VOTE ON CERTAIN BOARD MATTERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF ANNUITIES AND TRUSTS 773,854 UNRELATED BUSINESS INCOME FROM ALTERNATIV E INVESTMENTS 576,225 NONCASH EMPLOYEE BENEFITS NOT RECORDED ON FINANCIAL STATEMENTS 63,0 29

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
WILLAMETTE UNIVERSITY

Employer identification number
93-0386972

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) WILLAMETTE ANGEL FUND LLC 900 STATE STREET SALEM, OR 97301 27-1638088	INVESTMENT	OR	220,589	513,963	WILLAMETTE UNIVERSITY
(2) WILLAMETTE ANGEL FUND CONFERENCE 2010 LLC 900 STATE STREET SALEM, OR 97301 27-3724001	INVESTMENT	OR	0	0	WILLAMETTE ANGEL FUND LLC
(3) WILLAMETTE ANGEL FUND CONFERENCE 2011 LLC 900 STATE STREET SALEM, OR 97301 45-3417723	INVESTMENT	OR	0	0	WILLAMETTE ANGEL FUND LLC

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) WUE INVESTMENTS HOLDINGS LP 550 S TRYON STREET SUITE 3500 CHARLOTTE, NC 28202 33-1168742	INVESTMENT	DE	GLOBAL ENDOWMENT MANAGEMENT	EXCLUDED	12,221,200	238,741,700		No			No	99.980 %

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDERMAN TRUSTS (36) 900 STATE STREET SALEM, OR 97301	BENEFICIAL INTEREST	OR	N/A	T					No
(2) ESTATE TRUST (1) 900 STATE STREET SALEM, OR 97301	BENEFICIAL INTEREST	OR	N/A	T					No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r Yes	
s Other transfer of cash or property from related organization(s)	1s Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)WUE INVESTMENTS HOLDINGS LP	S	2,900,000	FAIR MARKET VALUE
(2)WUE INVESTMENTS HOLDINGS LP	B	11,567,945	FAIR MARKET VALUE

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)