· 990

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service ► The organization may have t

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

Open to Public

inter	nal Heveni			equiletti	ents.	mapection
<u>A</u>	For the	2012 calendar year, or tax year beginning July 1 , 2012, and c	ending	June 3		13
В	Check if	applicable C Name of organization Kuali Foundation, Inc.		DE	Employer iden	tification number
	Address	change Doing Business As			20 5	118023
	Name ch	ange Number and street (or P O box if mail is not delivered to street address) Ro	om/suite	ET	elephone num	ber
	Initial reti	um 2709 E. 10th St.			812-3	145-3948
\Box	Terminat	Charles and the state and Tip and				
一	Amende			G	Gross receipts	\$ 13,321,801
Ħ		on pending F Name and address of principal officer	or H/a)			tes ⁷ ☐ Yes ☑ No
	Applicati	2709 E. 10th St., Bloomington, IN 47408				r ☐ Yes ☐ No
_						ee instructions)
÷			527		-	
	Website		<u>-</u>		emption numb	
K			formation 2	2006	M State of lega	I domicile IN
	art I	Summary				
	1	Briefly describe the organization's mission or most significant activities: s				
ģ	1	for open source collaboration for software designed for higher education and p	romote the e	xpansio	n, developm	ent, and
Ě	1	implementation of open source software for higher education and other sectors	s of the educa	ation cor	nmunity for	the
Governance		benefit of society.				
Š	2	Check this box ▶☐ if the organization discontinued its operations or dispo	sed of more	than 25	% of its ne	t assets.
	3	Number of voting members of the governing body (Part VI, line 1a)			3	12
Activities &	4	Number of independent voting members of the governing body (Part VI, line	e 1b)		4	12
₽	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a	-		5	0
意	6	Total number of volunteers (estimate if necessary)	•		6	0
ď	7a				7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	• • • •		7b	
_	 	Tel difference business taxable filesine from 1500 1, files 64	Pr	ior Year	1.0	Current Year
	8	Contributions and grants (Part VIII. line 1b)	<u> </u>		0.750	
മ`ജ	9	Contributions and grants (Part VIII, line 1h)			28,758	1,298,967
Revenue.	1	Program service revenue (Part VIII, line 2g)			0,179	12,014,200
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1	1,361	8,634
- E	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	0
i —	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 1		9,65	0,298	13,321,801
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0	<u>_</u> 0
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1			0	0
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0	0
ğ	b	Total fundraising expenses (Part IX, column (D), line 25) ▶				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	· L	11,25	57,471	9,730,197
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,25	57,471	9,730,197
	19	Revenue less expenses. Subtract line 18 from line 12		(1,60	7,173)	3,591,604
5 6			Beginning	of Currer		End of Year
ta e	20	Total assets (Part X, line 16)		19.24	16,437	27,848,800
Assets or	21	Total liabilities (Part X, line 26)			1,122	1,493,317
Net A	22	Net assets or fund balances. Subtract line 21 from line 20	-		95,315	26,355,483
_	art II	Signature Block	• !	17,55	73,313	20,333,783
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and	d etatomente, ar	nd to the h	aget of my kno	wledge and ballof it in
		t, and complete. Declaration of preparer (other than officer) is based on all information of which p				wicoge and belief, it is
		11 1/411 0		7 2	12/2/	
Si	an	Signature of officer		Date	12/14	
	_			Date		
п	ere	THE OF PURI COME AND TREASURE	RER_			
_		Type or print name and title	D-4-			I DTIN
Pa	aid	Print/Type preparer's name Preparer's signature	Date		Check 🔲 ıf	PTIN
Pr	epare	r		:	self-employed	L
	se Onl			Firm's I	EIN ►	
_		Firm's address ▶		Phone	no	
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions) .	<u> </u>	<u> </u>	· • _ ·	. 🔲 Yes 🗌 No
E-	- Daman	work Poduction Act Notice, see the concrete instructions	0-4.44.44000			Fa- QQQ (2010)

Part	V 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	✓	ļ.,
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
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		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
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		v ✓
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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		1
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		1
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		√
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e		1
f		11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	ľ
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		1
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		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			Ė
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
	If "Yes," complete Schedule G, Part III	19	L	✓
20 a	5	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	l]	

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	✓	1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
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		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37		✓
	19? Note. All Form 990 filers are required to complete Schedule O	38	√	
		For	n 99 0	(2012)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	✓	
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		·
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: >			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		V
Ų	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	00		
· a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ь 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		
0	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		Ì
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		-
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:		1	
a	Gross income from members or shareholders			İ
Ь	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?	400		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	<u> </u>	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 -	
-	Note. See the instructions for additional information the organization must report on Schedule O.	.54	 	
b	Enter the amount of reserves the organization is required to maintain by the states in which			l
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	<u>l</u> .	L	L
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part		•			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes			tructi	
Section	Check if Schedule O contains a response to any question in this Part VI	· · · · · · · · · · · · · · · · · · · 	• •	<u> </u>	V
Occur	A doverning body and management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 12			
	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.				
_	Enter the number of voting members included in line 1a, above, who are independent .	1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business r	elationship with			,
3	any other officer, director, trustee, or key employee?		2		√
3	supervision of officers, directors, or trustees, or key employees to a management company or other		3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 99	· ·	4	-	1
5	Did the organization become aware during the year of a significant diversion of the organization		5		7
6	Did the organization have members or stockholders?		6	1	
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint			
	one or more members of the governing body?		7a	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval			1	
_	stockholders, or persons other than the governing body?		7b	<u> </u>	
8	Did the organization contemporaneously document the meetings held or written actions un- the year by the following:	dertaken during			
_	The governing body?		0-		
a b	Each committee with authority to act on behalf of the governing body?		8a 8b	√	_
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		1
Section	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		✓
Ь	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exem		405		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befor	•	10b 11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	o ming the fermi.	114		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could giv	e rise to conflicts?	12b	√	
C	Did the organization regularly and consistently monitor and enforce compliance with the particle in Schedule O how this was done	oolicy? If "Yes,"	12c	1	
13	Did the organization have a written whistleblower policy?		13	1	
14	• • • • • • • • • • • • • • • • • • • •		14	✓	
15	Did the process for determining compensation of the following persons include a review a				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				,
a	The organization's CEO, Executive Director, or top management official		15a		√
b	Other officers or key employees of the organization		15b		-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrangement			
	with a taxable entity during the year?		16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps t	o safeguard the			
	organization's exempt status with respect to such arrangements?		16b		L
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed ► Indiana Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T /Section	501/	C)\3)C	Only
.0	available for public inspection. Indicate how you made these available. Check all that apply.	na 990-1 (3 6 01101	, 50 1(₀₎₍ 0)S	oriiy)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sci	nedule (0)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing docu		f intei	rest p	olicy.
	and financial statements available to the public during the tax year.			•	• •
20	State the name, physical address, and telephone number of the person who possesses the be		of the)	
	organization: Lennifer Fourty Executive Director, 2709 F, 10th St. Bloomington, IN 47408, 812.	245 2040			

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

Check if Schedule O contains a re	sponse to any question in this Part VII.		 _	_	 _	 	

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

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

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

Check this box if neither the organization nor	any relate	d orga	anız	atıo (0		ompe	nsa	ited any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per	Ďοx, ι	Position o not check more than one x, unless person is both an icer and a director/trustee)				an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Кеу employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Bradley C. Wheeler	55			,						
Chair (2) Eric Denna	5	✓	╁╌┤	✓		ļ		0	0	
(2) Eric Denna Vice Chair		/		/						
(3) Molly Tamarkin	2	- 	╁┼	- V	<u> </u>			0	0	<u> </u>
	-	1		1	l	1		0	o	
Secretary (4) J. Michael Allred	5	 	H	Ť			-			
Treasurer		1		1				o	o	
(5) Bruce Alexander	2	<u> </u>		Ť	 		 			
Board Member	-	✓				ŀ		0	o	
(6) Patrick Burns	2			<u> </u>			 			
Board Member	} -	1						o	o	
(7) Chris Coppola	2									
Board Member		1		Ì		l	l	0	o	
(8) Stephen Dowdy	2						Г			
Board Member		1					1	0	0	
(9) Sara Gomez	2					ļ				
Board Member		✓		L	L	L	L	0	0	
(10) David Lassner	2									
Board Member	[✓						0	o	
(11) Randy Ozden	2									
Board Member		✓					L	0	0	
(12) Brian Voss	2									
Board Member		1			L		L	0	0	
(13)										
(14)			\vdash		-	 				

Part	Section A. Officers, Directors, Trust	ees, Key E	mploy	/005			lighe	st C	ompensated E	mployees (continue	ed)		
	(A) Name and title	(B) Average hours per	box, i	ot ch unles	Pos eck s pe	rson	than on the thick the thic	n an	(D) Reportable compensation	(E) Reportab compensation	n from	from amount of		
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organization (W-2/1099-M	ons	comp fro orga and	other ensation m the nization related nization	n I
(15)						-								
(16)														
(17)														
(18)						ļ								
(19)								-						
(20)			<u> </u>											
(21)					-									
(22)												· -		
(23)						_								
(24)														
(25)												·		
1b	Sub-total		• •					>						
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			•	•		•		0		0	·		
2	Total number of individuals (including but reportable compensation from the organi	not limited						e) w		ore than \$1		of	<u></u>	0
3	Did the organization list any former of		tor. c	r tn	uste	ee.	kev e	emn	plovee, or high	est compe	nsated		Yes	No
	employee on line 1a? If "Yes," complete 3	Schedule J	for su	ıch i	ındı	vidi	ıal					3		1
4	For any individual listed on line 1a, is the organization and related organizations individual		an \$1	50,	000							4	!	1
5	Did any person listed on line 1a receive of for services rendered to the organization	r accrue co	ompe	nsat	ion					ation or inc		5		1
Section	on B. Independent Contractors	· · · · · ·	<u> </u>			-								
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress		_	_	_			(B) Description of s	ervices	C	(C) compens		
	a University, 400 E. 7th St, Bloomington, IN 4							$\overline{}$	ogramming, Adı				1,48	80,847
	rkeley, 2200 University Ave, Berkeley, CA 94 , Inc., 1375 N. Scottsdale Rd. Suite 480, Scot		15257					I	ogramming, Hos					94,142
	7 Massachusetts Ave, Cambridge, MA 02139	isuale, AZ 8	923/					_	ogramming, Tec ch Support	n Support				<u>83,523</u> 49,456
	sity of Washington, NE Columbia Rd, Seattle							Pro	ogramming, Tec	h Support				22,21 <u>5</u>
2	Total number of independent contractor							th		ove) who				
	received more than \$100,000 of compens	sation from	tne o	gan	ıızaı	ion			16					

Fart	VIII	Check if Schedule O contains a response	to any quest	ion in this Part VI	II		
		Oneskii Ognosais o oomains a isspense	to uny quo	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	1,298,967				
s, G	C	Fundraising events 1c		j			
Sift lar	d	Related organizations 1d			[
in.	е	Government grants (contributions) 1e					
tior sr S	f	All other contributions, gifts, grants,		i			
ibu Ythe		and similar amounts not included above 1f		ļ			
ontro	9	Noncash contributions included in lines 1a-1f. \$. [
	h	Total. Add lines 1a-1f	▶	1,298,967			
пие		<u> </u>	Islness Code		l		
9/6	2a	Kuali Days Conference	541511	543,399	543,399		
Program Service Revenue	b	Direct Support for Systems	541511	11,470,801	11,470,801		
Zic	C						
Se	d						
rau	e	All II					
rog	1 -	All other program service revenue .					
	<u>g</u> 3	Total. Add lines 2a–2f		12,014,200	· · · · · · · · · · · · · · · · · · ·		1
	3	and other similar amounts)		0.024			0.624
	4	Income from investment of tax-exempt bond	,	8,634			8,634
	5	Royalties	•				
			(II) Personal				
	6a	Gross rents			į.		
	b	Less: rental expenses					
	C	Rental income or (loss)			i		
	d	Net rental income or (loss)	▶				
į	7a	Gross amount from sales of (i) Securities	(iı) Other				
i		assets other than inventory					
	b	Less: cost or other basis			}		
		and sales expenses .		ł	Ì		
	С	Gain or (loss)]		
	d	Net gain or (loss)	►				
•							
e Di	8a	Gross income from fundraising					
96		events (not including \$					1
ά		of contributions reported on line 1c). See Part IV, line 18			1		
Other Reve	١.	· · · · · · · · · · · · · · · · · · ·		1			
δ		Less: direct expenses b					
		Net income or (loss) from fundraising eve Gross income from gaming activities.	nts . ▶			·····	+
	34	See Part IV, line 19 a					1
	b	Less: direct expenses b					
	C	Net income or (loss) from gaming activities	es >				
	1 -	Gross sales of inventory, less					
		returns and allowances a					
	ь	Less: cost of goods sold b					
	c	Net income or (loss) from sales of inventor	ory ▶	İ			
			usiness Code		• • • • • • • • • • • • • • • • • • • •		
	11a				1		
	b						
	c						1
	d	All other revenue					
	e	Total. Add lines 11a-11d	▶				
	12	Total revenue. See instructions	🕨	13,321,801	12,014,200		8,634

Form 990 (2012)

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se to any question	in this Part IX		🗹
	t include amounts reported on lines 6b, 7b, , 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 governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes				· · · · · · · · · · · · · · · · · · ·
11	Fees for services (non-employees):				
a	Management	14,274		14,274	
Ь	Legal	13,569		13,569	
Ç	Accounting	24,906		24,906	
d	Lobbying				
e f	Professional fundraising services. See Part IV, line 17 Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	8,220,734	7,919,020	301,714	
12	Advertising and promotion	11,572	11,572		
13	Office expenses	7,176		7,176	
14	Information technology	78,015	51,740	26,275	
15 16	Royalties	<u> </u>			
17	Occupancy	207.544	254,681	22.000	
18	Payments of travel or entertainment expenses	287,541	204,001	32,860	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	659,197	659,197		
20	Interest				
21	Payments to affiliates	ļ			
22	Depreciation, depletion, and amortization .				
23	Insurance	10,225		10,225	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Memberships	14,839	14,839		
b	Bank Charges	1,066		1,066	
C	Write-offs	387,083	387,083		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,730,197	9,298,132	432,065	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)			_	

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part >	(
•			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	51,275	1	39,051
	2	Savings and temporary cash investments	5,003,800		6,410,052
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	14,162,527	4	21,367,134
	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			
s		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	28,835	9	32,563
	10a	Land, buildings, and equipment: cost or			5-,5-5
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	0	11	
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,246,437		27,848,800
	17 18	Accounts payable and accrued expenses	1,036,718	17 18	791,722
	19	Grants payable	644.404		704 505
	20	Tax-exempt bond liabilities	614,404	20	701,595
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	. <u></u>
Ś	22	Loans and other payables to current and former officers, directors,			
Liabilities	_	trustees, key employees, highest compensated employees, and			
ab.		disqualified persons. Complete Part II of Schedule L		22	
ت	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			1
		parties, and other liabilities not included on lines 17-24). Complete Part X			
	00	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,651,122	26	1,493,317
Ces		complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets	869,284	27	1,079,028
89	28	Temporarily restricted net assets	16,726,031		25,276,455
ď	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	17,595,315		26,355,483
_	34	Total liabilities and net assets/fund balances	19,246,437	34	27,848,800
					Form 990 (2012)

Page	12
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Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				V		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			21,801		
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,73	30,197		
3	3 Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,59	5,315		
5	Net unrealized gains (losses) on investments	5			0		
6	Donated services and use of facilities	6			0		
7	Investment expenses	7			<u> </u>		
8	Prior period adjustments	8			0		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		5,18	8,564		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		26,35	<u>55,483</u>		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII	<u>· · · </u>	<u> </u>	$\overline{}$	_Ц		
_			·····	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," ex Schedule O.	plain i	n				
2a			. 2a	1			
Za	If "Yes," check a box below to indicate whether the financial statements for the year were com			 •			
	reviewed on a separate basis, consolidated basis, or both:	Jiica c	"				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		-				
b	Were the organization's financial statements audited by an independent accountant?		. 2b				
•	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on		+			
	separate basis, consolidated basis, or both:		_	Ì			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		ŀ				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	ersigt/	nt				
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	, 2c	1			
	If the organization changed either its oversight process or selection process during the tax year, ex	plain ı	n 🗀				
	Schedule O.		1				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n	1	l		
	the Single Audit Act and OMB Circular A-133?		. 3a		✓		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		e				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b				
			Fo	m 990	(2012)		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer Identification number Kuali Foundation, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is; (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III-Functionally integrated **d** Type III-Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(l) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (Iv) is the organization (ii) EIN (iii) Type of organization (v) Did you notify (vi) Is the (vii) Amount of monetary the organization in organization (described on lines 1-9 in col. (1) listed in your organization in col support above or IRC section governing document? col. (i) of your (I) organized in the support? **IIS 2** (see Instructions)) Yes No Yes Yes No No (A) (B) (C) (D) (E) **Total**

	ule A (Form 990 or 990-EZ) 2012						Page 2
Parl							
	(Complete only if you checked the						lify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease complet	te Part III.)	
	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					ì	
	include any "unusual grants.")	2,338,631	5,841,693	7,217,492	7,050,315	11,649,747	34,097,877
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	о .	0
3	The value of services or facilities	·					
	furnished by a governmental unit to the						
	organization without charge	10,667,479	4,647,989	5,271,924	7,167,833	13,937,000	41,692,225
4	Total. Add lines 1 through 3	13,006,110	10,489,682	12,489,416	14,218,147	25,586,747	75,790,102
5	The portion of total contributions by						
-	each person (other than a						
	governmental unit or publicly		İ				
	supported organization) included on						
	line 1 that exceeds 2% of the amount	j					
	shown on line 11, column (f)		ļ				0
6	Public support. Subtract line 5 from line 4.						75,790,102
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	13,006,110	10,489,682	12,489,416	14,218,147	25,586,747	75,790,103
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	9,757	21,394	16,113	11,361	8,634	67,259
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on	0	o	0	О	o	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0	О.	0	0	o	0
11	Total support. Add lines 7 through 10						75,857,361
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he			· · · · ·			· · > 🗀
	ion C. Computation of Public Suppor						
14	Public support percentage for 2012 (line 6					14	99.91 %
15	Public support percentage from 2011 Sch					15	<u>%</u>
16a	331/3% support test – 2012. If the organi						_
	box and stop here. The organization qua	-		-			
b	331/3% support test—2011. If the organ					15 IS 331/3% (· · —
	check this box and stop here. The organ	-	•	• • • • •			. ▶ 🛚
17a							
	10% or more, and if the organization me						
	Part IV how the organization meets the "f	acts-and-circu		_	ition qualifies a	as a publicly su	pported
_	organization						. •
b	10%-facts-and-circumstances test – 20						
	15 is 10% or more, and if the organization m						

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

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

(Complete o	only if you checked the box or	line 9 of Part I or if the organization	failed to qualify under Part II.
		e tests listed below, please complet	

	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.)	
Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5						
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						
8	Add lines 7a and 7b						
	on B. Total Support	() 0000	410000	() 0040	4 10 0044	T 4 3 2040	1
Galen 9	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
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						
С	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 IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	_	n's first, secon	•	•		` '` '
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3, column (f))	· · · · · ·	15	%
16	Public support percentage from 2011 Sch					16	%
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2012 (line 10c, colur	nn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2011					18	%
19a	331/a% support tests—2012. If the organ 17 is not more than 331/a%, check this box	and stop here	. The organizati	on qualifies as	a publicly supp	orted organizat	tion . ► 🗆
b	331/3% support tests—2011. If the organize line 18 is not more than 331/3%, check this is	oox and stop h	nere. The organ	ization qualifies	s as a publicly s	supported organ	nization 🕨 📋
20	Private foundation, If the organization di	d not check a	hox on line 14	. 19a or 19h	check this hov	and eas inetri	ictions 🕨 🖂

Part IV	Form 990 or 990-EZ) 2012 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;	Page 4
are re	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See	
	instructions).	
·		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

Kuali Foundation, Inc. 20 5118023 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990. Part IV. line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) . 2 3 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 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 ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Tax Year Total number of conservation easements . . 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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) Revenues included in Form 990, Part VIII, line 1 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: \$_____ Assets included in Form 990, Part X

_	•
Pag	e a

Part	III Organizations Maintaining	Collections of	Art, His	torical T	reasures,	or Ot	her Similar As	sets (c	ontin	nued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot	her reco	rds, chec	k any of the	follov	ving that are a s	ignifica	nt use	of its
а	☐ Public exhibition		d	☐ Loan	or exchange	e prog	rams			
b	☐ Scholarly research		8	☐ Other	-					
C	☐ Preservation for future generations									
4	Provide a description of the organizat XIII.	tion's collections a	and expla	ain how ti	hey further t	he org	janization's exer	npt pur	oose i	in Part
5	During the year, did the organization assets to be sold to raise funds rather								res [□ No
Part	IV Escrow and Custodial Arra	ingements. Co	mplete i	f the org	anization a	nswe	red "Yes" to Fo	orm 99	D, Par	rt IV,
	line 9, or reported an amoun									
1a	is the organization an agent, trustee, included on Form 990, Part X?								Yes [□ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	ollowing ta	able:					
							Α	mount		
C	Beginning balance					10				
đ	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount	•	•							☐ No
	If "Yes," explain the arrangement in Pa								<u>. </u>	
Parl	V Endowment Funds. Compl									
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years bac	(e) Fo	ur year	s back
1a	Beginning of year balance		ļ							
Ь	Contributions							_		
С	Net investment earnings, gains, and				ļ					
_	losses							ļ		
d	Grants or scholarships						· · · · · · · · · · · · · · · · · · ·			
е	Other expenditures for facilities and							1		
_	programs									
f	Administrative expenses		 							
g	End of year balance		<u> </u>		1			<u> </u>		
2	Provide the estimated percentage of t			ce (line 1g	j, column (a)) neia	as:			
a	Board designated or quasi-endowmen		%							
b	Permanent endowment									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2		0006							
3a	Are there endowment funds not in the			ization th	at are held a	and ad	iministered for th	10		
	organization by:	o possession on a	io o gain				ininiacionou non ti		Yes	s No
	(i) unrelated organizations							3a(i		}
	(ii) related organizations							3a(i		
ь	If "Yes" to 3a(ii), are the related organ							3b		+
4	Describe in Part XIII the intended uses									-
Part										
	Description of property	(a) Cost or of (investm	ther basis	(b) Cost of	or other basis other)		Accumulated epreciation	(d) B	ook vali	пе
1a	Land									
b	Buildings									
C	Leasehold improvements		·							
d	Equipment			1						
е	Other			1						 -
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part	X, columr	(B), line 10	(c).)	>			

Part VII	Investments—Other Securities	See Form 990, Part X,	line 12.	
	Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financial				
	eld equity interests			
(3) Other				
(A)				
(B)		·····		
(C)				
(D)			<u> </u>	
(E) (F)				
(G)				
(H)				
(1)			 · · · · · - · · · · · · · · · · · · · 	
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments-Program Related	. See Form 990. Part X	. line 13.	
	a) Description of investment type	(b) Book value	(c) Method of valu	ation
			Cost or end-of-year ma	arket value
(1)				
(2)				
(3)				
(4)	· · · · · · · · · · · · · · · · · · ·			
(5)				
(6)				
_(7)				
(8)				
(9)				
(10)	b) must equal Form 990, Part X, col. (B) line 13.)		 	
Part IX	Other Assets. See Form 990, Pa	ort X line 15		
I di CiA		a) Description		(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·		
(2)		· <u></u>		
(3)				
(4)				
(5)				
(6)				
_(7)				· ·
(8)	· · · · · · · · · · · · · · · · · · ·			
(9)				
(10)	(b) COO Don't V -	al (D) (ma 45)		······································
Part X	mn (b) must equal Form 990, Part X, c		<u> ▶</u>]	
Part A	Other Liabilities. See Form 990, (a) Description of liability	(b) Book value	T	
	income taxes	(b) book tado	-	
(2)			-	
(3)			7	
(4)			7	
(5)			7	
(6)			7	
(7)			7	
(8)				
(9)				
(10)			_]	
(11)				
	b) must equal Form 990, Part X, col (B) line 25.)			
2. FIN 48 (AS	C 740) Footnote. In Part XIII, provide the	text of the footnote to the or	ganization's financial statements that	
liability for un	certain tax positions under FIN 48 (ASC 7	40). Check here if the text o	the tootnote has been provided in Pa	art XIII

Page	4

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents	With Revenue per l	Retu	rn
1	Total revenue, gains, and other support per audited financial statements			1	28,301,661
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of pnor year grants	2c			
d	Other (Describe in Part XIII.)	2d	16,455,201		
е	Add lines 2a through 2d			2e	16,455,201
3	Subtract line 2e from line 1			3	11,836,460
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			1,700,7100
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	1,475,341		
С	Add lines 4a and 4b			4c	1,475,341
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	13,321,801
Part	XII Reconciliation of Expenses per Audited Financial Statem			r Re	
1				1	19,541,493
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	11,286,637		
е	Add lines 2a through 2d			2e	11,286,637
3	Subtract line 2e from line 1			3	8,254,856
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	1		5/25 1/555
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	1,475,341		
C	Add lines 4a and 4b			4c	1,475,341
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	9,730,197
Part	XIII Supplemental Information				0,.00,10.
Comp	ete this part to provide the descriptions required for Part II, lines 3, 5, and	9: Pa	rt III. lines 1a and 4: Pa	art 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	prov	ide any additional
inform					•
Part XI	line 2d includes \$1201 of change in fair value, and \$16,454,000 in in-kind cont	ributi	ons. Per SFAS #116, w	e reco	ord in-kind
	······································				
contrib	utions separately from regular revenues and expenses.				
Part X	l, line 2d includes the expense side of the in-kind contributions of \$11,286,637.				
Parts >	I and XII line 4b is an already recognized cash-in-lieu of in-kind contributions	which	must be added in for re	econo	iliation.

ichedule D (Fo	rm 990) 2012	Page 5
Part XIII	Supplemental Information (continued)	
••••		

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

➤ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

Open To Pu Inspection

	tile organization							'	Linploy	61 1061	iuncau	Ori Hu			
	oundation, Inc.	2°1 90									20 5	<u> 1180</u>	23		
Part	Complete if the	fit Transaction e organization	ns (section 501 answered "Ye	(c)(3) a s" on l	and sect Form 990	ion 501(c)(4 0, Part IV, li	ne 25	anizations a or 25b, o	only). or For	m 990	D-EZ,	Part	V, line	40b.	
1 (a) Name of disqualified person			(b) Relationship between disqualified person and					(a) Doo	cnption	of tron				(d) Corrected	
•	(a) Name of disquamed	person		organiza	ation			(0) 065	сприон	Ortrai	isaction	'	1	Yes	No
(1)															
(2)															
(3)															
(4)															
(5)															
(6)						·									
	Enter the amount under section 4958		-		_	gers or disc	•	•		_	·		;		
3	Enter the amount o	f tax, if any, on	line 2, above,	reimb	ursed by	the organi	zatıor	n			1	▶ \$			•
Part	Loons to and	or From Inter	rooted Borean										-		
гагі	Complete if th	e organization			Form 990	0-F7 Part V	/ line	38a or Fo	rm 99	n Pa	rt IV	line 2	6· or i	f the	
	organization r	eported an am	ount on Form	990, P	art X, line	e 5, 6, or 22	2.	, , , , , , , ,	00	o, . u	,		o, o		
		T	T			<u> </u>						<u> </u>			
(a) Nar	me of interested person	(b) Relationship with organization	(c) Purpose of loan		oan to or om the	(e) Ongin principal am			Balance due		lefault?	t? (h) Approved by board or			ritten ment?
		, s. g			organization?		iou.i.		- 1	}		committee?		agreement?	
				То	From	1			1	Yes	No	Yes	No	Yes	No
(1)			Ì .									-			
(2)															
(3)															
(4)															
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(7)											L.,				
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(9)				ļ								-	ļ		
(10)		J		<u> </u>		<u> </u>					L	ļ	<u> </u>		
Total							<u>. </u>	\$				L		·	
Part I		sistance Bene e organization				0, Part IV, li	ne 27	7.							
(a) N	lame of interested persor		ship between inter and the organization		(c) Amount	of assistance	(d) Type of as	sistance	•	(e)	Purpo	se of a	ssistan	Ce
(1)															
(2)								·					· · ·		
(3)															
(4)															
(5)															
(6)															
(7)					·										
(8)															
(9)															

Part IV	Business Transactions Involv Complete if the organization ar	ring Interested Persons. nswered "Yes" on Form 990	0, Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
(4)					Yes	No
	s Coppola, CEO, rSmart dy Ozden, CEO, Vivantech	BoardMember/Contractor BoardMember/Contractor		Contractual Services Contractual Services		 -
(3)	dy Ozden, CLO, Vivaniech	Boardiviernber/Contractor	467,630	Contractual Services		-
(4)						
(5)						
(6)						ļ
(7)		· · · · · · · · · · · · · · · · · · ·				ļ
(8) (9)						
(10)						
Part V	Supplemental Information Complete this part to provide a	additional information for re	esponses to questio	ns on Schedule L (see instruction	ons).	
These two	interested parties are CEOs of two	companies who are member	rs of the Kuali Found	ation, and they have been		·
elected or	appointed to the governing Board.	All members of the Kuali Fo	undation's Board of	Directors sit on the		
Board as	individuals and not representative o	f their schools or companies	s. However, because	both are on the		
governing	body and our organization has a be	usiness relationship with the	eir companies, we are	e disclosing this		
informatio	on ın Schedule L.	·	•••••			
			•••••••••••••••••••••••••••••••••••••••			
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SÇHEDULE O (Form 990 or 990-EZ)

Name of the organization

Kuali Foundation, Inc.

Supplemental Information to Form 990 or 990-EZ

201

Employer Identification number

20 5118023

2012

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Part VI, #11: The method by which the Board of Directors reviews the 990 is for the Executive Director and the Treasurer to bring the completed form to them for review prior to submission. However, it is the responsibility of the Executive Director and the Treasurer to approve, sign, and submit the form. Part VI, #12c: Each member of the Board of Directors and each Project Manager and other lead staff are required annually to complete a Conflict of Interest disclosure form to verify that they have read and understood the by-laws and that they are in compliance. In addition, between these annual disclosures, the Board and Executive Director review any changes in the roles of the Board members and Project Managers to evaluate if a possible conflict exists. If a conflict arises, the specifics of the conflict are disclosed, and the person with the conflict is recused from the discussion and decision. Part VI, #19: The organization makes public all agendas and minutes from the Board meetings on its public web site. The audited financials are also posted on the public web site. The by-laws and policies are posted on the public web site. Part VI, #6-7b: Members join the organization by institutionally signing a membership agreement and paying annual dues. These members elect some of the members of the governing body, as outlined in the by-laws. Any changes to the by-laws or other significant organizational or structural changes are shared with the members. Part IX, line 11g: The detailed expenses in this line item are: Contractual Services: \$5,894,695 Licensing: \$34,063 Maintenance: \$340 Marketing: \$73,976 Meeting Support: \$580 Programming: \$1,175,000 Project Management: \$504,657

Support: \$91,503

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer identification number
Kuali Foundation, Inc.	20 5118023
(continued)	
Technical Support: \$399,646	
Training, \$20,600	
Training: \$20,600	
Web Development: \$25,675	
1000 DOVOGDINGIR. 420/070	
Part XI: The reconciliation of net asset is shown here and on Schedule D. Detailed notes about the indivi	dual components that make
up the elements of the reconciliation are listed in the notes on Schedule D.	
