$_{\text{Form}}990$

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

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_	ress ch	pplicable Pleas nange use I	RS INT	IVERSITY CORPORATION ERNET DEVELOPMENT	N FOR ADVANCED				60187				
┌ Nar	ne char	nge label print type.	or Inte	ng Business As ernet2				E Telepho	(734) 913-4250 G Gross receipts \$ 34,971,411				
┌ Inıt	ıal retur		ific Nur	mber and street (or P O		elivered to street addr	ess) Room/	suite					
Ter	mınated	d tions		00 oakbrook drive No 30	00			G Gloss le	ceipts \$	34,971,411			
	ended r			or town, state or county NARBOR, MI 48104	try, and ZIP + 4		•						
Mpp.	lication	n pending		,			_						
			Name and Irbara Nan	d address of princip zia	al officer			Is this a group affiliates?	return f	for ┌Yes ┍No			
		10	000 Oakbr	ook drive suite 300)			aiiiiiates		j tes je No			
		an	in arbor, Mi	1 48104	Are all affiliates i								
Ta	x-exem	npt status 🔽	501(c) (3)	◀ (Insert no)	47(a)(1) or	7		If "No," attach Group exempti		see instructions) iber Þ -			
	ebsit e	: ► www.inter	net2 edu				''(')						
K Forr	n of ord	ganization 🔽 Co	prporation	Trust Association	Other 🕨		L Yea	r of formation 199	97 M S	State of legal domicile DC			
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Activities &	2	Check this bo	x দ ıf th	ne organization disc	ontinued its ope	rations or dispose	d of more	than 25% of its	net as				
χ			-	ers of the governing		•			3 _	17			
ă				voting members of t ees (Part V, line 2a			.b)		4 ₋ 5	16			
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	ь	Net unrelated	business	taxable income fror	m Form 990-T, I	ine 34			7b	C			
g _i		Cambribilitian		-t- /Dt-\/TTT 1	1			Prior Year	F 4	Current Year			
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Part III Statement of Program Service Accomplishments 1 Briefly describe the organization's mission

Internet2 promotes the missions of its members by providing both leading-edge network capabilities and unique partnership opportunity	rtunities
that together facilitate the development, deployment and use of revolutionary Internet technologies	

4e	Total program serv	rice expenses►\$	33,193,357											
4d	Other program ser (Expenses \$	vices (Describe in Sch incl	edule O) uding grants of \$) (F	evenue \$)								
	O + h - v - v - c - v - c - v		adula O)											
		inty support THE PROGRAM [rization, directories and secui	DEVELOPMENT OF SOFTWARE E	BETWEEN THE network	and the applications this sof	tware provides services such								
4c	(Code) (Expenses \$	2,870,300 including gi	ants of \$) (Revenue \$	215,350)								
	MEMBERSHIP SERVICES	S SUPPORT THE EXCHANGE C	F NEW IDEAS AND STRATEGIE	5 FOR THE DEVELOPM	ENT OF THE NEXT GENERALIC	JN INTERNET								
4b	(Code) (Expenses \$	2,938,466 including gi	·) (Revenue \$	9,823,914)								
		CED BACKBONE NETWORK TH CONTRACT OF CONTRACT OF CONTRA	AT CONNECTS REGIONAL NET NET APPLICATIONS	WORK AGGREGATION	POINTS TO SUPPORT THE WO	ORK OF INTERNET2								
4a	(Code) (Expenses \$	27,384,591 including gi	·) (Revenue \$	22,278,818)								
4	Section 501(c)(3) a	ind 501(c)(4) organizat	s for each of the organiza ons and section 4947(a) nd revenue, if any, for eac	(1) trusts are requ	ured to report the amour									
	If "Yes," describe th	iese changes on Schedi	ile O											
3			nake significant changes		, any program · · · · · .	Yes 🔽 No								
	If "Yes," describe th	iese new services on Sc	hedule O											
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?													

	•			
Part IV	Che	cklist of	f 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? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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? <i>If "Yes," complete Schedule D, Part II</i>	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νo
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide 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 term, permanent,or quasi- endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III</i>	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		Νο
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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2009)

roim 990 (.	,2009)	
Part V	Statements Regarding Other IRS Filings and Tax Compliance	

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 57			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	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			
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 this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
ь	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		Νο
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and 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? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
5a	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?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	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)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			

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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

Sa	processes, or changes in Schedule O. See Instructions. ection A. Governing Body and Management			
36	ction A. Governing Body and Management	1	Yes	No
				110
1a	Enter the number of voting members of the governing body 1a 1	7		
ь	Enter the number of voting members that are independent 1b 1	6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	. 7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	. 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	· ———	103	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	evenue Code.)			
	•		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10Ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form	11		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	e 12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	. 14	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
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?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► MI , IN			
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 make these available. Check all that apply Own website. Another's website.			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the oras	nization	n ▶ -
	KATHY 10 HNSON			-

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees 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

(A) Name and Title A verage hours per week A	Check this box if the organization did		sate any	/ curi	rent	or fo	rmer c	ffice	r, director, trustee	or key employee		
week or director o		A verage hours		tion (ched		I		Reportable compensation	Reportable compensation	Estimated amount of other	
See add'l data			Individual trustee or director	Officer Institutional Trustee		Key employee	Highest compensated employee	Former	organization (W-	organizations (W- 2/1099-	from the organization and related	
	See add'l data											
											-	
	,											

1b	Total .					-	 -	-			Ŧ	1,590,965	0	304,347

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶23

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such</i>			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5	Yes	

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
UNIVERSITY OF MICHIGAN 1015 LSA BUILDING ANN ARBOR, MI 481091382	PROFESSIONAL SERVICES	1,983,380
indiana university po box 66271 indianapolis, IN 462666271	PROFESSIONAL SERVICES	1,221,388
university of maryland room 4101 chesapeake bldg college park, MD 20742	proFESSIONAL SERVICES	207,497
wright griffin davis & co 555 briarwood circle ste 300 ann arbor, MI 48108	PROFESSIONAL SERVICES	177,416
Michigan technological university 1400 townsend drive houghton, MI 49931	pROFESSIONAL SERVICES	153,899
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►14) who received more than	

Page 8

Part v	7444	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ \$2	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	Ь	Membership dues 1b					
56							
ર્જુ ₹	c	Fundraising events 1c					
<u>≅,</u> ह	d	Related organizations 1d					
<u>آ</u> س E	e	Government grants (contributions) 1e	1,021,940				
등등	f	All other contributions, gifts, grants, and 1f	551,323	ŀ	ŀ		
音を	'	similar amounts not included above					
≘意	g	Noncash contributions included in					
벌		lines 1a-1f \$					
ပြီး	h	Total. Add lines 1a-1f	►	1,573,263			
		Busine	ss Code				
E E	2a	network REVENUE	900,099	22 270 010	22 270 010		
ě				22,278,818	22,278,818		
22	Ь	membership	900,099	9,823,914	9,823,914		
o G	c	MEETING FEES	900,099	583,595	583,595		
ž	d	PROJECT REVENUE	900,099	307,822	307,822		
చ	e		-,		· ,		
Program Service Revenue	f	All other program service revenue					
<u>~</u>	g	Total. Add lines 2a-2f	. •	32,994,149			
	3	Investment income (including dividends, intere					
		and other similar amounts)	`` ▶	70,015			70,015
	4	Income from investment of tax-exempt bond proceeds					
			· ·				
	5	Royalties					
	_		ersonal				
	6a	Gross Rents					
	Ь	Less rental expenses					
	l c	Rental income					
		or (loss)					
	d	Net rental income or (loss)	· · •				
		(ı) Securities (ii)	Other				
	7a	Gross amount from sales of	10,757				
		assets other					
	_	than inventory	3,435				
	Ь	Less cost or other basis and	3,433				
		sales expenses	7 222				
	C	Gain or (loss)	7,322				
	d	Net gain or (loss)	▶	7,322	7,322		
an	8a	Gross income from fundraising events (not including					
Other Revenue		\$ of contributions reported on line 1c)					
<u>\$</u>		See Part IV, line 18					
<u>.</u>		а					
<u>a</u>	ь	Less direct expenses b					
5	c	Net income or (loss) from fundraising events					
_	9a	Gross income from gaming activities					
	- "	See Part IV, line 19					
		a					
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming activities .					
		Gross sales of inventory, less	· · ·				
	lou	returns and allowances .					
	ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of inventory .	. ▶				
			ss Code				
	11a	MISCELLANEOUS	900,099	323,227	323,227		
		MISCELLANEOUS	,	,	-,		
	b						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	.				
			▶	323,227			
	12	Total revenue. See Instructions	▶	24.067.07	22.224.525	_	70.04=
	I			34,967,976	33,324,698	0	70,015

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.								
	ll other organizations must complete column (A) but are not required to		(B), (C), and (B)	(D). (C)	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	34,851	34,851					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22							
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16							
4	Benefits paid to or for members]				
5	Compensation of current officers, directors, trustees, and key employees	1,895,312	942,569	952,743				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	5,051,203	4,314,788	736,415				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	323,823	272,720	51,103				
9	Other employee benefits	1,092,352	908,182	184,170				
10	Payroll taxes	338,149	264,613	73,536				
11	Fees for services (non-employees)							
а	Management							
b	Legal	119,326	47,648	71,678				
c	Accounting	227,495	841	226,654				
d	Lobbying	60,000		60,000				
e	Professional fundraising See Part IV, line 17							
f	Investment management fees	8,810		8,810	_			
g	Other	1,860,403	1,527,330	333,073				
12	Advertising and promotion	19,894	4,957	14,937				
13	Office expenses	242,121	172,062	70,059				
14	Information technology	324,538	320,249	4,289				
15	Royalties							
16	Occupancy	858,646	858,598	48				
17	Travel	823,553	606,986	216,567				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	990,730	870,236	120,494				
20	Interest	13,617	5,241	8,376				
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	5,492,422	5,492,188	234				
23	Insurance	101,135	101,135					
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)							
а	NETWORK OPERATIONS	16,397,026	16,397,026					
Ь	contributions,net of al	775,765	28,586	747,179				
c	bad debt expense	503,211	22,551	480,660				
d	RENT SUBSIDY	327,823		327,823				
e	miscellaneous	375		375				
f	All other expenses							
25	Total functional expenses. Add lines 1 through 24f	37,882,580	33,193,357	4,689,223	0			
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			5,824,456	2	7,051,005
	3	Pledges and grants receivable, net			397,009	3	194,370
	4	Accounts receivable, net			5,274,824	4	6,495,474
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of					
		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use				8	
٧	9	Prepaid expenses and deferred charges			1,583,014	9	1,683,256
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	48,542,283			
	ь	Less accumulated depreciation	10b	32,018,713	19,653,776	10c	16,523,570
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11	3,535,621	12	3,571,823		
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	17,575	15	21,175		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			36,286,275	16	35,540,673
	17	Accounts payable and accrued expenses .	1,060,107	17	1,242,062		
	18	Grants payable		18			
	19	Deferred revenue			14,938,211	19	15,602,287
_	20	Tax-exempt bond liabilities				20	
es es	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
7		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 Complete Part X of Schedule D			3,130,906	25	4,448,465
	26	Total liabilities. Add lines 17 through 25			19,129,224	26	21,292,814
Fund Balances		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and comp through 29, and lines 33 and 34.	lete li	ines 27			
anı	27	Unrestricted net assets			17,157,051	27	14,247,859
B3	28	Temporarily restricted net assets			28		
þι	29	Permanently restricted net assets			29	_	
큔		Organizations that do not follow SFAS 117, check here ▶ ┌ an	d com	plete			
<u>-</u>		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			17,157,051	33	14,247,859
_	34	Total liabilities and net assets/fund balances	36,286,275	34	35,540,673		

			Yes	No		
1	Accounting method used to prepare the Form 990					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes			
b	Were the organization's financial statements audited by an independent accountant?					
С	If "Yes," to 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	2c	Yes			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both					
	Separate basis Consolidated basis Both consolidated and separated basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes			

Form **990** (2009)

Employer identification number

SCHEDULE A Public

(Form 990 or 990EZ)

Name of the organization

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

2009

Open to Public Inspection

	JNIVERSITY CORPORATION FOR ADVANCED NTERNET DEVELOPMENT 52.										
Pa	rt I	Reas	on for Pul	olic Charity Stat	us (All organizations i	nust complete this par	52-2060187 t.) See instruc	ctions			
The c	rganı					h 11, check only one box					
1	Г				sociation of churches se						
2		A scho	ol described	ın section 170(b)(1)	(A)(ii). (Attach Schedule	e E)					
3	Г	A hospi	tal or a coop	erative hospital serv	vice organization describ	ed in section 170(b)(1)(A)(iii).				
4	Γ	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	Γ	_	•	rated for the benefit	=	owned or operated by a g	overnmental uni	t describe	_ ed in		
6	Γ	A feder	al, state, or l	ocal government or	governmental unit descri	bed in section 170(b)(1)(A)(v).				
7	্ব	An orga describ	nization tha ed in		a substantial part of its si	upport from a government		e general	public		
8	Г	A comn	nunity trust	described in section	170(b)(1)(A)(vi) (Comp	lete Part II)					
9	Γ	Anorga	nızatıon tha	t normally receives	(1) more than 331/3% of	its support from contribu	tions, membersh	ııp fees, aı	nd gros	ss	
		receipt	from activi	ties related to its ex	empt functions—subject t	o certain exceptions, and	l (2) no more tha	ın 331/3%	of		
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses									
		acquire	d by the orga	anızatıon after June 3	30, 1975 See section 50	9(a)(2). (Complete Part I	II)				
10	\sqcap	A n orga	nızatıon org	anızed and operated	exclusively to test for pu	blic safety See section 50	9(a)(4).				
11	Γ	one or r	nore publicly	supported organiza	tions described in sectio orting organiz <u>a</u> tion and co	it of, to perform the functi n 509(a)(1) or section 50 mplete lines 11e through Functionally integrated	9(a)(2) See sec 11h		a)(3).	Check	
e	Γ	other th				lled directly or indirectly l cly supported organizatio					
f		If the o check t	rganization r his box			that it is a Type I, Type I		pporting o	rganız	ation,	
g		followin	g persons?	,		r contribution from any of					
	(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes							No			
	and (III) below, the governing body of the the supported organization?							├──			
	(ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)										
I-								11g(iii)		<u> </u>	
h 		Provide	tne followin	g information about t	he supported organizatio	n(s)					
				(iii) Type of	(iv)	(v)	(vi)				

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		Did you notify the Is to organization in col (i) of your col (i) or		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

<u> </u>	(Complete only if yo	ou cnecked the	DOX ON line 5, 7	, or 8 of Part I	.)			
	ection A. Public Support endar year (or fiscal year beginning		T				Т	
Care	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	11,713,005	10,925,217	11,295,048	11,266,579	11	.,397,176	56,597,025
2	grants ") Tax revenues levied for the organization's benefit and either							
3	paid to or expended on its behalf The value of services or facilities							
•	furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	11,713,005	10,925,217	11,295,048	11,266,579	11	,397,176	56,597,025
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							
6	(f) Public Support. Subtract line 5 from line 4							56,597,025
	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
7	beginning in) A mounts from line 4	11,713,005	1,256,864	11,295,048	11,266,579	11	,397,176	56,597,025
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	897,344	1,256,864	593,306	240,256			3,057,785
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	220,282	304,988	208,538	227,514		323,227	1,284,549
11	Total support (Add lines 7 through 10)							60,939,359
12	Gross receipts from related activiti					12		103,003,139
13	First Five Years If the Form 990 is check this box and stop here			thırd, fourth, or fı	fth tax year as a !	501(c)(3	3) organız	ation, ▶☐
	ection C. Computation of Pul							
14	Public Support Percentage for 200	•		11 column (f))		14		92 870 %
15	Public Support Percentage for 200					15		92 740 %
b	33 1/3% support test—2009. If the and stop here. The organization qua 33 1/3% support test—2008. If the box and stop here. The organization	alifies as a public organization did n qualifies as a pu	ly supported organ not check the box ublicly supported o	nization on line 13 or 16 organization	a, and line 15 is 3	3 3 1/3%	or more,	▶ ▼
	10%-facts-and-circumstances test is 10% or more, and if the organiza in Part IV how the organization mee organization	tion meets the "fa ets the "facts and	acts and circumst circumstances" 1	ances" test, chec est The organiza	k this box and st ation qualifies as	op here. a publicl	Explain y support	ed ►
18	10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see							
	instructions		- /	, ,	,			▶ □

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

	(Complete only if you	ı checked the l	box on line 9 o	f Part I.)			
	ction A. Public Support	T	T	T	T		
Cale	ndar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	ın) Gıfts, grants, contributions, and					1	
1	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	A mounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons A mounts included on lines 2 and 3						
D	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	tion B. Total Support						
	ndar year (or fiscal year beginning						
	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
_	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated 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						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is f	or the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) orga	
	check this box and stop here						▶□
	ation C Community (F. 1)	i - Communication					
	Ction C. Computation of Publ			12! (0)		<u> </u>	
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	8 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inve						
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	2008 Schedule	A , Part III , line 1	.7		18	
	33 1/3% support tests—2009. If the				l line 15 is more		d line 17 is not
	more than 33 1/3%, check this box organization					a.i 55 1/5/0 dii	c 17 13 110t

33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493253006050

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

• Se	ction 501(c)(4), (5), or (6) organizations Complete Part III	,	•	Ū	. , ,	,
		mployer	ıden	tıfıca	tion numbe	er
	VERSITY CORPORATION FOR ADVANCED ERNET DEVELOPMENT 5	2-2060	187			
ar	t I-A Complete if the organization is exempt under section 501(c) or is a so	ection	527	org	anizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV				
2	Political expenditures	.		\$		
3	Volunteer hours			_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955		Þ	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955		 -	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	┌ No
4a	Was a correction made?				☐ Yes	┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	501	.(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ivities	-	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27				
	exempt funtion activities	ı		\$		
3	Total exempt function expenditures $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	7 b	-	\$		
4	Did the filing organization file Form 1120-POL for this year?				┌ Yes	┌ No

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

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

	(election under section 501(h)).					
		(;	a)	(b)		
		Yes	No	A	moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo			
С	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?	Yes			6	50,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities? If "Yes," describe in Part IV		Νo			
j	Total lines 1c through 1i				6	0,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
Ь	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(5), c	or se	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	T	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

Current year
Carryover from last year
Carryover from last year
Carryover from last year
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

3

4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

5 Taxable amount of lobbying and political expenditures (see instructions)

5

Part IV Supplemental Information

1

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	Activities	The representatives of a consulting firm communicated with public officials with respect to administrative legislative action affecting internet2 and its members

1

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DLN: 93493253006050

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

ernal	I Revenue Service	⊨ Attach to Fo	orm 990. ► See separate instructions.		In	spect	ion
	me of the organiz			Employer	ident if icat ion	numbe	ī
	IVERSITY CORPORATI ERNET DEVELOPMEN			52-2060	187		
Pa			lvised Funds or Other Similar Fu			mplet	e if the
	organız	ation answered "Yes" to Form 99					
	T-4-1		(a) Donor advised funds	(b) Fu	ınds and other	accoun	its
	Total number at	·					
		ributions to (during year) ts from (during year)					
	Aggregate value	`					
		· .					
	funds are the or	rganization's property, subject to the o	sors in writing that the assets held in don organization's exclusive legal control?		Г	Yes	☐ No
	used only for ch	- , , , , , , , , , , , , , , , , , , ,	donor advisors in writing that grant funds efit of the donor or donor advisor, or for ar	•	oose	Yes	┌ No
a	rt III Conser	vation Easements. Complete	ıf the organızatıon answered "Yes" to	Form 990), Part IV, lin	ie 7.	
	Purpose(s) of c	onservation easements held by the or	ganızatıon (check all that apply)				
	_		on or pleasure) Preservation of an	-		nd area	I
	_	of natural habitat	Preservation of a c	ertified hist	oric structure		
	Preservation	on of open space					
	•	2a-2d if the organization held a quali le last day of the tax year	fied conservation contribution in the form -	of a conser	vation		
				Н	eld at the End	of the	Year
а		f conservation easements		2a			
b	_	estricted by conservation easements		2b			
C		servation easements on a certified his	` ′	2c			
d	Number of cons	servation easements included in (c) ac	equired after 8/17/06	2d			
			rred, released, extinguished, or terminate	d by the org	anızatıon durır	ng	
	the taxable yea	r >					
	Number of state	es where property subject to conserva	ition easement is located ►				
		ızatıon have a wrıtten policy regardıng the conservation easements it holds?	the periodic monitoring, inspection, hand	lling of viola		Yes	┌ No
	Staff and volunt	eer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during	the year ►		
	A mount of expe	nses incurred in monitoring, inspectir	ng, and enforcing conservation easements	during the	year ► \$		
		servation easement reported on line 2 and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	Г	Yes	Г No
	balance sheet,	- · · · · · · · · · · · · · · · · · · ·	onservation easements in its revenue and he footnote to the organization's financial	•	•	5	
ar	t IIII Organi	zations Maintaining Collectio	ns of Art, Historical Treasures, (Yes" to Form 990, Part IV, line 8.	or Other S	Similar Ass	ets.	
a	If the organizat art, historical tr	ion elected, as permitted under SFAS reasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or research ancial statements that describes these it	h in furthera			ı
b	If the organizat historical treas	ion elected, as permitted under SFAS	116, to report in its revenue statement a public exhibition, education, or research in	nd balance :			
	(i) Revenues in	ncluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets incli	uded ın Form 990, Part X			► \$		
	If the organizat	·	orical treasures, or other similar assets fo S 116 relating to these items				
а		ded in Form 990, Part VIII, line 1			► \$		

Assets included in Form 990, Part X

ar	Till Organizations Maintaining Co	ilections of Art	t, His	<u>tori</u>	<u>cai ir</u>	<u>easu</u>	res, or C	tne	<u>r Simila</u>	<u>r Asse</u>	ets (co	ntinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	owing tl	nat are	a significa	ant u	se of its c	ollectio	n	
а	Public exhibition		d	Γ	Loan o	rexch	ange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
1	Provide a description of the organization's co Part XIV	ollections and expla	ıın hov	vthey	y furthei	the o	rganızatıor	ı's ex	cempt purp	ose in		
5	During the year, did the organization solicite assets to be sold to raise funds rather than			,					nılar	Г	Yes	┌ No
Pai	t IV Escrow and Custodial Arrang						answere	d "Y	es" to Fo	rm 99	0,	
	Part IV, line 9, or reported an ar				•							
la	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ions o	rotherass	ets	not	Γ	Yes	☐ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	able		Г		Ī	-		
_							-			A mo	unt	
C C	Beginning balance						-	1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance						L	1f				
а	Did the organization include an amount on F	orm 990, Part X, lin	e 21?							Г	Yes	│ No
	If "Yes," explain the arrangement in Part XI\											
a	rt V Endowment Funds. Complete						orm 990, Years Back		t IV, line ^{Three Years}		-\Faus Va	a va Da ale
3	Beginning of year balance	(a)Current Year	(0)	Prior \	rear	(c)Iwo	Tears back	(a)	Tillee fears	Dack (e	e)rour te	ears Back
a b	Contributions							+				
c	Investment earnings or losses							+				
d	Grants or scholarships							+				
e	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
	Provide the estimated percentage of the year	r end balance held a	as									
а	Board designated or quasi-endowment 🕨	%										
b	Permanent endowment 🕨 %											
c	Term endowment ► %											
a	Are there endowment funds not in the posse	ssion of the organiz	atıon t	hata	re held	and a	dmınıstere	d for	the			
	organization by									2-/:)	Yes	No
	(i) unrelated organizations			•				•		3a(i) 3a(ii)		
ь	(ii) related organizations If "Yes" to 3a(ii), are the related organization							٠.		3b	1	
	Describe in Part XIV the intended uses of th							-				
ar	t VI Investments—Land, Building					0, Pa	rt X, line	10.				
	Description of investment			(a)) Cost or (is (investi	other	(b) Cost or o basis (othe	ther	(c) Accumu depreciat		(d) Boo	k value
.a	Land							\neg				
ь	Buildings											
c	Leasehold improvements				1,1	11,817		\neg	28	38,168		823,649
d	Equipment				47,43	30,466			31,7	30,545	1	5,699,921
e	Other											

16,523,570

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	od of valuation f-year market value
Financial derivatives		,
Closely-held equity interests		
Other		_
LETTER OF CREDIT	35,674	F
INVESTMENTS - securities and mutual funds	3,440,835	F
INVESTMENT - RABBI TRUST	95,314	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	3,571,823	
Part VIII Investments—Program Related. See		
		od of valuation
(a) Description of investment type	(b) Book value	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
		. ,
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
ACCRUED EXPENSES	1,726,161	
ACCRUED VACATION	202,402	
ACCRUED COMPENSATION AND RELATED	281,613	
Lease obligation current	805,160	
lease obligation long term	1,306,849	
deferred lease expense	126,280	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	4,448,465	

Par	t XI Reconciliation of 0	<u>Change in Net Assets from For</u>	<u>n 990 to Fin</u>	ancial Statemer	nts	
1	Total revenue (Form 990, Par	t VIII, column (A), line 12)			1	34,967,976
2	Total expenses (Form 990, Pa	art IX, column (A), line 25)			2	37,882,580
3	Excess or (deficit) for the year	r Subtract line 2 from line 1			3	-2,914,604
4	Net unrealized gains (losses)	on investments			4	5,411
5	Donated services and use of f	acılıtıes			5	
6	Investment expenses				6	
7	Prior period adjustments				7	
8	Other (Describe in Part XIV)				8	1
9	Total adjustments (net) Add I	lines 4 - 8			9	5,412
10		r per financial statements Combine line	s 3 and 9		10	-2,909,192
Par		Revenue per Audited Financial		With Revenue r	er R	eturn
1		ner support per audited financial statemo			1	34,973,387
2	A mounts included on line 1 b	out not on Form 990, Part VIII, line 12				
а	Net unrealized gains on inves	stments	. 2a	5,411		
b	Donated services and use of	facilities	. 2b			
c	Recoveries of prior year gran	ts	. 2c			
d	Other (Describe in Part XIV))	. 2d			
e	Add lines 2a through 2d				2e	5,411
3	Subtract line 2e from line 1				3	34,967,976
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line 1				
а	Investment expenses not inc	cluded on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIV))	4b			
c	Add lines 4a and 4b				4c	0
5		nd 4c. (This should equal Form 990, Par			5	34,967,976
Part		Expenses per Audited Financia	l Statements	s With Expenses	per	
1	Total expenses and losses pe	er audited financial			1	37,882,580
2		ut not on Form 990, Part IX, line 25				
а	Donated services and use of		2a			
ь	Prior year adjustments		. 2b			
с	Other losses		. 2c			
d	Other (Describe in Part XIV)		. 2d			
e	Add lines 2a through 2d .				2e	0
3	Subtract line 2e from line 1 .				3	37,882,580
4	Amounts included on Form 99	90, Part IX, line 25, but not on line 1:				
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)		. 4b			
c	Add lines 4a and 4b				4c	0
5	Total expenses Add lines 3 a	and 4c. (This should equal Form 990, Pa	rt I, line 18)		5	37,882,580
Par	t XIV Supplemental In	formation				
Part		escriptions required for Part II, lines 3, 8, Part XII, lines 2d and 4b, and Part XI				•
	Ident if ier	Return Reference		Explanat	ion	
Part 2	(I, Line 8 - Other Adjustments		rounding differe	-		

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No 1545-0047

2009

DLN: 93493253006050

Department of the Treasury Internal Revenue Service	Complete if the organization answered "Yes," to Form 990, Part 1V, line 21 or 22. Mark 10, Part 1V, line 21 or 22.							
Name of the organization								
UNIVERSITY CORPORATION INTERNET DEVELOPMENT						52-2060187		
Part I General Inform	mation on Grants	and Assistance						
Does the organization mathemathemathemathemathemathemathemathe	d to award the grants o	orassistance?		·	· -	•	┌ Yes	
Form 990, Part 1	IV, line 21 for any r	Governments and ecipient that received of the state of th	l more than \$5,000.	Check this box if n	io one recipient recei	ved more than \$5,	000. Use	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
EDUCAUSE4772 Walnut Street suite 206 boulder, CO 80301	841455437	501(c)(3)	34,851				educause planned and executed CAMP workshops to disseminate information on how to implement middleware	

	, ,	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to	o Form 990, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Suppleme	ental Information. Complete t	his part to provide the information required in Part I, line 2, and any other additional information.
Ident if ier	Return Reference	Explanation
·		
•		Caladata T (Farma 2001) 2000

DLN: 93493253006050

OMB No 1545-0047

Schedule J

Compensation Information

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization UNIVERSITY CORPORATION FOR ADVANCED INTERNET DEVELOPMENT

(Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

52-2060187

Рa	Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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 orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?			
	officers, directors, trustees, and the ego/Exceditive Director, regulating the Items effected in fine 14.	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations A pproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization			
	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	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) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		Νo
ь	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
ь	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs-section 53 4958-4(a)(3)? If "Yes," describe in Part III			N -
_		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	,	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	incentive reportable		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
douglas Van Houweling	(I) (II)	148,133 0	0	175,080	0 0	70,198 0	393,411	,
gary bachula	(I) (II)	209,882	0	`	0 0	23,479 0	233,361	,
barbara nanzıg	(I) (II)	0	0	/	0	1	5 151,675 0 0	,
james pflasterer	(I) (II)	140,124	0 0	- 1	0 0	/	3 174,297 0 0	,
kenneth klingenstein	(I) (II)	62,403 0	0	1	0	1	205,277	,
matthew zekauskas	(I) (II)	167,811 0	0	1	0 0	22,306 0	190,117 0 0	,
michael mcgill	(I) (II)	159,623 0	0	·	1	1	189,141 0 0	ı
george brett	(I) (II)	152,029 0	0	·	0 0	1	176,985 0 0	,
Robert Vietzke	(I) (II)	148,939	0 0	·	0 0	1	181,048	
	'		 	 		 		1
				<u> </u>				
	'			<u> </u>		+		
		+	 	 	 	<u> </u>		

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Supplemental Information		Part II Douglas VanHouweling received unrelated compensation of \$213,865 from University of Michigan, \$175,080 wages, \$38,785 non taxable benefits Barbara Nanzig received unrelated compensation of \$151,675 from University of Michigan, \$120,000 wages, \$31,675 non taxable benefits Kenneth Klingenstein received unrelated compensation of \$136,564 from University of Colorado, \$106,941 wages, \$29,623 non taxable benefits

Schedule J (Form 990) 2009

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DLN: 93493253006050

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

NonCash Contributions

Name of the organization UNIVERSITY CORPORATION FOR ADVANCED
INTERNET DEVELOPMENT **Employer identification number**

De	Tunos of Bronosti				52-2060187			
Pa	Types of Property	(a) Check	(b) Number of Contributions	(c) Revenues reported on	(d Method of d	-	nına	
		ıf applicable	Number of Contributions	Form 990, Part VIII, line	rever		illig	
1	Art—Works of art	аррисави		- 3				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .							
	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							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	computer		1	127 500	faır market value			
	Other ► (<u>equipment</u>) Other ►()	X	1	137,300	iaii iliaiket value			
28	Other ► () Other ► ()							
29	Number of Forms 8283 received	l by the ora	anization during the tay ve	ar for contributions				
23	for which the organization compl		=		29			
							Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
ь	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif			review of any non-standard	contributions?	31		Νο
32a	Does the organization hire or us	e third part	ies or related organizations	to solicit, process, or sell i	non-cash			
	contributions?					32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page **2**

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

OMB No 1545-0047

SCHEDULE 0

Department of the Treasury
Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

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

▶ Attach to Form 990.

2009
Open to Public

Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ADVANCED
INTERNET DEVELOPMENT

Employer identification number
52-2060187

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The officers of Internet2 review the Form 990 prior to filing
Form 990, Part VI, Section B, line 12c		All staff are trained and indoctrinated upon joining the organization. All Board members must agree to and sign a conflict of interest statement when installed in their positions
Form 990, Part VI, Section B, line 15		Board committee process, the members of the Board involved are all outside members. Before hiring, the HR Manager conducts a salary benchmarking process for each position based on duties, industry, and area of the country. Then, staff have established "Critical Success Factors" (CSF's) for each year. Supervisors conduct annual employee reviews and meet each year with each staff member at least two times. This part of the process identifies the basis for merit pay changes. The HR Manager also annually conducts surveys of the industry to establish guidelines for changes in market-based salary conditions. This process was most recently performed in 2008.
Form 990, Part VI, Section C, line 19		Governing documents and financial statements are made available to the public upon request
		The organization has not changed its oversight or selection process from the prior year

DLN: 93493253006050

2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

(FOITH 990)

Department of the Treasury

Internal Revenue Service

75-3078459

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ★ Attach to Form 990.
 ★ See separate instructions.

Related Organizations and Unrelated Partnerships

Name of the organization UNIVERSITY CORPORATION FOR ADVANCED INTERNET DEVELOPMENT Employer identification number

52-2060187

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
NATIONAL RESEARCH & EDUCATION FIBER COMPANY LLC 1000 oakbrook drive SUITE 300 ANN ARBOR, MI 48104 04-3750617	Acquire indefeasible rights of use of fiber optic telecomm capacity	DE	147,134	123,705	
INCOMMON LLC 1000 oakbrook drive SUITE 300 ANN ARBOR, MI 48104 20-2995509	facilitate sharing of protected network accessible resources	DE	215,350	263,566	
advanced infrastructure for research and education llc 1000 oakbrook drive SUITE 300 aNN ARBOR, MI 48104 20-3730423	Facilitate project collaboration which share resources using adv technology	DE	2,000	2,500	

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
michigan information technology center foundation					
1000 oakbrook dr suite 300	provide to benefit of other 501(c)(3) organizations to	MI	501(c)(3)	170(b)(1)(A)(vı)	
ann arbor, MI 48104	occupy building space				

Part III	Identification of Related Organizations Taxab	ble as a Partnership (Co	mplete if the organization answered	d "Yes" on Form	990, Part IV	/, line 34
	because it had one or more related organizations tr	reated as a partnership dur	ing the tax year.)			
	(c)	(-)		(h)	(i)	

(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 512514)

(f) Share of total income (g) Share of end-of-year assets (h) (i)
Disproprtionate allocations? Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

(j) General or managing partner?

Yes No

Yes

No

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) of Percentage year ownership

(6)

Part V Transactions With Related Organizations (Complete if t	ne organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)
---	---

	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	Ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		1	1
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b		No
С	Gift, grant, or capital contribution from other organization(s)	1c	Yes	
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e	\perp	No
f	Sale of assets to other organization(s)	1f	+	No
g	Purchase of assets from other organization(s)	1 g	1	No
h	Exchange of assets	1h	1	No
i	Lease of facilities, equipment, or other assets to other organization(s)	1 i	\perp	No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j	Yes	+
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	,	No
n	Sharing of paid employees	1n	Yes	
0	Reimbursement paid to other organization for expenses	10	+-	No
р	Reimbursement paid by other organization for expenses	1р	\perp	No
q	O ther transfer of cash or property to other organization(s)	1q	+-	No
-	O ther transfer of cash or property from other organization(s)	1r		No

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) michigan information technology center foundation	С	327,823
(2) michigan information technology center foundation	J	980,311
(3) michigan information technology center foundation	К	50,000
(4) michigan information technology center foundation	N	172,750
(5)		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity (b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)

section 501(c)(3) organizations? Yes No (e) Share of end-of-year assets (f) Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

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Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493253006050

OMB No 1545-0172

Department of the Treasury

► See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service Business or activity to which this form relates Identifying number Name(s) shown on return UNIVERSITY CORPORATION FOR ADVANCED INTERNET DEVELOPMENT Form 990 Page 10 52-2060187 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 800.000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (b) Cost (business use (a) Description of property 6 (c) Elected cost only) 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 **10** Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **15** Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (business/investment (e) Convention (f) Method period deduction property service use only—see instructions) **19a** 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27 5 yrs ММ S/L property 27 5 yrs ММ S/L MMS/L i Nonresidential real 39 yrs property MMS/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L S/L c 40-vear 40 vrs ММ Non-Res Prop Type 1 count 0 Non-Res Prop Type 2 count 0 Non-Res Prop Totals count 0 **Summary** (see instructions) 21 Listed proper 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 5.492.422 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the

23

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A—Depreci		2 <i>4a, 240,</i> 0 1 d O ther I														
24a Do you have evidence	to support t	the business/in	vestment ι	ise claimed	_{d?} ┌ Yes	Гпо		2	4b If "Y	es," is	the ev	dence	written?	Г	s Г	No
								•								
(a) Type of property (list vehicles first)	(b) te placed in service	(c) Business/ investment use percentage	(d Cost o ba	rother	(busines	(e) depreck s/investr e only)		(f) Recove period	γ Me	(g) thod/ vention			(h) Depreciation/ deduction		(i) Elect section cos	ed 179
25Special depreciation allowar 50% in a qualified busines	·-		erty placed	ın service o	during the	tax year	and u	sed mo	re than	25						
26 Property used more th	han 50% ı	n a qualified	business	use						-	•			<u> </u>		
		%														
		%									+-					
27 Property used 50% o	rless in a		siness us	e							<u> </u>					
		%							S/L -							
		%							S/L -							
38 Add amazınta in aalı:	(-) !:	% S 2 5 + b = 2	- h 27 F=			21		4	S/L -	28	+					
28 Add amounts in colu			-			ne ZI,	page	1 .								
29 Add amounts in colu	mn (i), line							£ \/_					29			
Complete this section fo	rvehicles		ction B								relati	ad nar	son			
if you provided vehicles to you	ur employee	es, first answer	the question	ns in Sectio	n C to see	if you n	neet a	n excep	tion to c	ompleti	ng this	section	for thos	e vehi	les	
30 Total business/inves	tment mil	es driven dii	rına the		a)	1 .	b)		(c)		•	1)	(€	•	1	(f)
year (do not include				Vehi	cle 1	Vehi	Vehicle 2 Ve		ehicle	3	Vehi	cle 4	4 Vehicle		5 Vehicle 6	
21 Total commuting mil		duma the u						+							1	
31 Total commuting mil								-								
32 Total other personal	•							+								
33 Total miles driven du through 32			s 30		T											
34 Was the vehicle avai	•	ersonal use		Yes	No	Yes	No	Ye	s N	ю	Yes	No	Yes	No	Yes	No
during off-duty hours																
35 Was the vehicle used owner or related pers		by a more t	han 5 %													
36 Is another vehicle as	vaılable fo	r personal us	se? .													
Section Answer these questions one owners or related pe	to determ	•	et an exc												not m	ore thar
37 Do you maintain a wr employees?	ritten polic	y statement	that prof	nibits all i	personal •	use of	vehic	cles, ır	ıcludın •	g com	mutın	g, by y	our.		'es	No
38 Do you maintain a wr	ritten polic	v statement	that prob	nibits per	sonal us	e of ve	hicles	s.exce	ept com	nmutin	a. bv	vour		-		
employees? See the	ınstructio	ns for vehicl	es used b	y corpor	ate office											
39 Do you treat all use o	of vehicles	by employe	es as per	sonal us	e? .			•		•	•	•				
40 Do you provide more vehicles, and retain t				oyees, ol	otain info	rmatio •	n fror	n your •	emplo	yees a	bout •	the us	e of the			
41 Do you meet the requ	uırements	concerning	qualified a	automobi	le demoi	nstratio	n us	e? (Se	e instri	uctions	;)					
Note: If your answer	to 37, 38	, 39, 40, or 4	11 is "Ye:	s," do not	t comple	te Sect	tion B	for th	e cove	red ve	hicles	5				
Part VI Amortiza																
•		(b)		(c				(d)		(e)				(f)		
(a) Description of cos	ts	Date amortizatio	n	A morti amo	zable		C	ode ection		mortiz period	or				on for ar	
43 A mortization of cost		begins		tay 2007	(coc in-	tructic	ac)		l b	ercent	aye					
42 A mortization of cost	s inal beg	ins during yo	Jui 2009	ıax year	(See INS	11 uc (101	15)									
43 A mortization of costs	e that bos	an hofore we	ur 2000 4	-27 7005						T	43					
Amortization of Costs	_	(f) See the i				•	•		•	·	44					

george loftus

michael mcrobbie

truSTEE

truSTEE jack suess

truSTEE alan whitney

truSTEE stephen wolff

truSTEE gary bachula

vice president barbara nanzig

chief of staff james pflasterer

director

director michael mcgill

dırector george brett

dırector Robert Vıetzke

Director

chief Financial Officer kenneth klingenstein

matthew zekauskas

Software ID: Software Version:

EIN: 52-2060187

Name: UNIVERSITY CORPORATION FOR ADVANCED

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209,882

120,000

140,124

169,344

167,811

159,623

152,029

148,939

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23,479

31,675

34,173

35,933

22,306

29,518

24,956

32,109

INTERNET DEVELOPMENT Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (A) (C) (D) (E) (F) Reportable Name and Title Average Position (check all Reportable Estimated that apply) compensation amount of other hours compensation per from the from related compensation Highest compensated organization (Worganizations from the week Institutional Trustee or director Individual tiustee 2/1099-MISC) 憂 (W-2/1099organization and MISC) related Former Q# 10€ emplo)ee organizations jeffREY LEHMAN 0 0 0 50 Χ board chairman james Bottum 0 0 0 50 Χ truSTEE ıean-Lou Chameau 0 0 50 Χ TRUSTEE iared cohon 0 50 Χ 0 TRUSTEE marY SUE COLEMAN 0 0 0 50 Χ TRUSTEE davıd frohnmayer 50 Χ 0 0 0 TRUSTEE tımothy lance 0 O 50 Χ 0 TRUSTEE larry peterson 0 0 0 50 Х trUSTEE steven relyea 0 0 50 Х truSTEE peter siegel 50 0 Х trUSTEE douglas Van Houweling 323,213 0 70,198 40 00 Х Х president & ceo William Kirwan 50 Х 0 0 0 TruSTEE

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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	1	tion at Institutional Trustee	pply	′)	Highest compensated employee	Former	(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	
mıCHAEL M CROW former trustee	50						Х	0	0	0	
raymond ford former trustee	50	50		Х		Х	0	0	0		
david jent former trustee	50						Х	0	0	0	
mıchael nelson former trustee	50						х	0	0	0	

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
NETWORK OPERATIONS	16,397,026	16,397,026		
contributions,net of al	775,765	28,586	747,179	
bad debt expense	503,211	22,551	480,660	
RENT SUBSIDY	327,823		327,823	
mıscellaneous	375		375	