efil	e GR	APHIC print - DO NOT PROCESS As Filed Data -		DLN	
	99	Return of Organization Exempt From I	ncome 1	Гах	OMBNo 1545-0047
Form	33	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C benefit trust or private foundation)			2011
		e Treasury e Service The organization may have to use a copy of this return to satisfy sta	te reporting	requirement	Open to Public Inspection
A Fo	r the 2	2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011		D Franksvar	idautification number
		pplicable C Name of organization UNIVERSITY CORPORATION FOR ADVANCED			identification number
	lress ch	Doing Business As	-	52-2060 E Telephone	
	ne char			(734)91	3-4250
	ıal retur	Number and succe (of F to box in main's not delivered to succet address) Room/succe	· ·		ots \$ 42,262,256
	minateo	a			
	ended r	ANN ARBOR, MI 48104			
l Abt	lication	n pending			
		F Name and address of principal officer H DAVID LAMBERT	H(a) Is thi affilia	s a group ret tes?	urn for 「Yes 「Vo
		1000 OAKBROOK DRIVE NO 300 ANN ARBOR, MI 48104	anna		
		ANN ARBOR, MI 48104		affiliates incl	
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	****** Signature of officer JAMES A PFLASTERER of Type or print name and			20. Da	12-11-14 te
Paid	Preparer's signature SCOTT W P	PRICE CPA	Check If self- employed 🕨 🦵	Preparer's taxpayer identification number (see instructions) P00188789	
Preparer's Use Only	If self-employed),	REHMANN ROBSON 555 BRIARWOOD CIRCLE STE 300	EIN 🕨 38-3635706		
		Phone no 🕨 (734) 761-2005			
May the IR	S dıscuss thıs return w	uth the preparer shown above? (s	see instructions) .		🔽 Yes 🔽 No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form	990 (2011)					Page 2
Par		f Program Serv Ile O contains a res		lishments uestion in this Part III		 घ
UNIC		- IE MISSIONS OF I PORTUNITIES TH	TS MEMBERS AT TOGETHE		LEADING-EDGE NETWO VELOPMENT, DEPLOYN	DRK CAPABILITIES AND 1ENT AND USE OF
2					which were not listed on	
	the prior Form 990 or 9 If "Yes," describe thes					└ Yes └ No
3		ease conducting, or	make sıgnıfıca	nt changes in how it co	nducts, any program	∏Yes 🔽 No
4	Describe the organizat expenses Section 501	ion's program servi L(c)(3) and 501(c)(ce accomplishr 4) organization	s and section 4947(a)	ree largest program servio 1) trusts are required to h program service reporte	report the amount of
4a	(Code NETWORK IS AN ADVANCE UNIVERSITIES AS THEY DE				269,739) (Revenue EGATION POINTS TO SUPPORT	,
4b	(Code MEMBERSHIP SERVICES S) (Expenses \$ JPPORT THE EXCHANGE	4,421,167 OF NEW IDEAS AI	including grants of \$ ND STRATEGIES FOR THE DE) (Revenue s VELOPMENT OF THE NEXT GEN	
4c	(Code MIDDLEWARE AND SECUR SERVICES SUCH AS IDENT				46,954) (Revenue THE NETWORK AND THE APPLI	\$ 1,855,038) CATIONS THIS SOFTWARE PROVIDES
	(Code MEETING SERVICES) (Expenses \$		including grants of \$) (Revenue \$	1,080,039)
4d	Other program servic (Expenses \$	-	nedule O) ludıng grants o	f\$) (Revenue \$	1,080,039)
4e	Total program service	expenses►\$	38,656,92	22		
						Form 990 (2011)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)? 🔁	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 🔂	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> " <i>Yes</i> ," <i>complete Schedule D, Part 1</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 🕏	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😨	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI. 🕏	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> 🔀	11b	Yes	
	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? <i>If "Yes," complete Schedule D, Part VIII</i> .	11c		No
	DId the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 🕏	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 🛣	11e	Yes	
f	DId the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 📆	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States? \ldots .	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Part II and IV</i> 🔞	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 US? <i>If</i> " <i>Yes," complete Schedule F, Part III and IV</i> .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Dıd the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Y <i>es," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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Page **3**

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? <i>If "Yes," complete Schedule I, Parts I and II</i> 😨	21	Yes				
22	2 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						
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? <i>If "Yes," complete Schedule J</i> .	23	Yes				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No			
b	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? \cdot .	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? <i>If</i> " <i>Yes," complete Schedule L, Part I</i>	25a		No			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> " <i>Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	26		No			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No			
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," complete Schedule L, Part IV	28b		No			
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> .	28c		No			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No			
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? <i>If "Yes," complete Schedule N,</i> Part I	31		No			
32	Dıd the organızatıon sell, exchange, dıspose of, or transfer more than 25% of ıts net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes				
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes				
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No			
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 😨	37		No			
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes				

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Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V		-٦.	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	_		
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> <i>Statements</i> filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
h	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	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 or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
Fa	Was the organization a party to a prohibited tay chalter transaction at any time during the tay year?	5a		No
5а ь	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		
d	file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year If "Yes," indicate the number of Forms 8282 filed during the year	7c		No
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		No
f	contract?	7e 7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	- j		
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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	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)			
12a	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 year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by		1	
	the states in which the organization is licensed to issue qualified health plans			
с	Enter the aggregate amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year? \ldots \ldots .	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or char O. See instructions. Check if Schedule O contains a response to any question in this Part VI	nges	in Sche	
Se	ction A. Governing Body and Management			
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
	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		No
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
1	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
5	Did the organization have members or stockholders?	6	Yes	
'a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
3	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	0-	Vee	
a	The governing body?	8a	Yes	
ь)	Each committee with authority to act on behalf of the governing body?	8b 9	Yes	
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule 0	9		No
	venue Code.)			
			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
.1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
.2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
L4 L5	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	14	Yes	
а	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	Yes	
b	O ther officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed \blacktriangleright 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 made these available. Check all that apply			
19	└ O wn website └ Another's website └ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of th	ie orga	nızatıor	n 🕨

KATHY JOHNSON 1000 OAKBROOK DRIVE SUITE 300 ANN ARBOR,MI 48104 (734)913-4250

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

Check if Schedule O contains a response to any question in this Part VII

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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, if any See instructions for definition of "key employee "

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (describe hours for related organizations in Schedule	Position (do not check more than one box, unless person is both an officer and a director/trustee) Q T R R Porta C R Porta from t organizati 2/1099-1		(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				
	0)	ustee	Irustee		99(ensated				
(1) MARY SUE COLEMAN BOARD CHAIRMAN	50	х						0	0	0
(2) JAMES BOTTUM TRUSTEE	50	х						0	0	0
(3) JOHN EVANS TRUSTEE	50	х						0	0	0
(4) JAMES HILTON TRUSTEE	50	х						0	0	0
(5) WILLIAM KIRWAN TRUSTEE	50	x						0	0	0
(6) JOHN KOLB TRUSTEE	50	х						0	0	0
(7) TIMOTHY LANCE TRUSTEE	50	х						0	0	0
(8) DAVID LEEBRON TRUSTEE	50	х						0	0	0
(9) JEFFREY LEHMAN TRUSTEE	50	x						0	0	0
(10) MICHAEL MCROBBIE TRUSTEE	50	х						0	0	0
(11) LARRY PETERSON TRUSTEE	50	х						0	0	0
(12) STEVEN RELYEA TRUSTEE	50	х						0	0	0
(13) JACK SUESS TRUSTEE	50	х						0	0	0
(14) ALAN WHITNEY TRUSTEE	50	х						0	0	0
(15) H DAVID LAMBERT PRESIDENT & CEO	40 00	х		х				418,323	0	30,607
(16) GARY BACHULA VICE PRESIDENT	40 00			х				83,714	0	1,817
(17) BARBARA NANZIG CHIEF OF STAFF	40 00			х				129,365	0	34,015

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

(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e thai	n on son er a	e bo is bo nd a	x, oth	_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estima amount o compens from t organizati	ited fother sation :he on and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	relate organıza	
(18) JAMES PFLASTERER CHIEF FINANCIAL OFFICER	40 00			х				153,219	0		36,339
(19) ROBERT VIETZKE EXECUTIVE DIRECTOR	40 00				x			183,908	0		38,570
(20) ANA PRESTON EXECUTIVE DIRECTOR	40 00				x			178,023	0		15,506
(21) STEPHEN WOLFF CHIEF TECHNOLOGY OFFICER	40 00				x			160,779	0		26,020
(22) KENNETH KLINGENSTEIN SR DIRECTOR	40 00					x		184,433	0		19,648
(23) MATTHEW ZEKAUSKAS SR RESEARCHER	40 00					x		165,656	0		24,377
(24) CHRIS ROBB DIRECTOR	40 00					x		163,671	0		0
(25) RANDALL BROGLE SR DIRECTOR	40 00					х		153,160	0		36,567
(26) BRIAN CASHMAN SR NETWORKING MANAGER	40 00					x		144,628	0		18,008
 1b Sub-Total											
1b Sub-Total .											
d Total (add lines 1b and 1c) .				•			•	2,118,879	0		281,474
2 Total number of individuals (inclu \$100,000 of reportable compens	-				ted a	above) who	o received more tha	n	Yes	

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
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 individual</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If</i> " <i>Yes," complete Schedule J for such person</i>	5	Yes	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
UNIVERSITY OF MICHIGAN 3003 S STATE STREET ANN ARBOR, MI 48109	PROFESSIONAL SERVICES	1,481,816
INDIANA UNIVERSITY PO BOX 66271 INDIANAPOLIS, IN 462666271	PROFESSIONAL SERVICES	978,729
ARENT FOX LLP PO BOX 644672 PITTSBURGH, PA 15264	PROFESSIONAL SERVICES	463,570
REHMANN ROBSON PO BOX 2025 SAGINAW, MI 48605	PROFESSIONAL SERVICES	221,248
KHALIL YAZDI 11919 SANDY HILL COURT SPOTSYLVANIA, VA 22553	PROFESSIONAL SERVICES	209,400
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 of compensation from the organization ►9) who received more than	

Form 990 (2011) Part VIII 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
its its	1a	Federated campaigns 1a				
ŭ al	Ь	Membership dues 1b	-			
am C	с	Fundraising events 1c	-			
Ť.	d	Related organizations 1d	-			
ې. Mi ^r o	e	Government grants (contributions) 1e 3,102,345	-			
ion Sil	f	All other contributions, gifts, grants, and 1f 194,010	-			
per la		similar amounts not included above	-			
d di	g	lines 1a-1f \$				
Contributions, gifts, grants and other similar amounts	h		• 3,296,355			
		Business Code				
nue	2a	NETWORK REVENUE 90005	26,748,828	26,748,828		
evel	ь	MEMBERSHIP 9000	-			
£ ع	c					
С. М			, ,	, ,		
સું	d	MEETING FEES 90009	786,544	786,544		
an	e		-			
Program Service Revenue	f	All other program service revenue				
소	g	Total. Add lines 2a-2f	38,543,555			
	3	Investment income (including dividends, interest				
		and other similar amounts) 🕨	71,438			71,438
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(I) Real (II) Personal	4			
	6a	Gross rents Less rental	-			
	Ь	expenses				
	с	Rental income or (loss)				
	d	Net rental income or (loss)				
		(I) Securities (II) Other				
	7a	Gross amount 7,06 from sales of	2			
		assets other than inventory				
	Ь	Less cost or 2,33	9			
		other basis and sales expenses				
	с	Gain or (loss) 4,72	3			
	d	Net gain or (loss)	4,723	4,723		
	8a	Gross income from fundraising				
Other Revenue		events (not including \$				
evi		of contributions reported on line 1c) See Part IV, line 18				
μ μ		а				
ĥe	b	Less direct expenses b				
ō	с	Net income or (loss) from fundraising events 🕨				
	9a	Gross income from gaming activities				
		See Part IV, line 19 a				
	ь	Less direct expenses b	-			
	с	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less				
		returns and allowances .				
		a	_			
	Ь	Less cost of goods sold b	-			
	c	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
	11a	00000	343,846	343,846		
		MISCELLANEOUS		5-5,0-0		───┤
	b					┨─────┤
	C I					<u> </u>
	d	All other revenue				<u> </u>
	e	Total. Add lines 11a-11d	343,846			
	12	Total revenue. See Instructions				+
			42,259,917	38,892,124		71,438 Form 990 (2011)

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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 co heck if Schedule O contains a response to any question in this Part IX	mplete columns		») Г				
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and organizations in the United States See Part IV , line 21	316,693						
2	Grants and other assistance to individuals in the United States See Part IV, line 22							
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,490,204	688,336	801,868				
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	5,827,281	5,375,632	451,649				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	434,403	397,324	37,079				
9	Other employee benefits	1,135,367	1,011,951	123,416				
10	Payroll taxes	381,213	332,998	48,215				
11	Fees for services (non-employees)							
а	Management							
b	Legal	550,904	394,096	156,808				
С	Accounting	348,489	24,645	323,844				
d	Lobbying							
e	Professional fundraising See Part IV, line 17 .							
f	Investment management fees	5,310		5,310				
g	Other	2,399,220	2,291,499	107,721				
12	Advertising and promotion	31,611	29,399	2,212				
13	Office expenses	417,696	333,273	84,423				
14	Information technology	426,851	424,833	2,018				
15	Royalties							
16	Occupancy	1,092,235	1,091,296	939				
17	Travel	1,065,054	841,660	223,394				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	968,252	856,214	112,038				
20	Interest	114,064	2,049	112,015				
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	5,188,084	5,178,376	9,708				
23	Insurance	155,844	155,844	<u> </u>				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f Ifline 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)							
a	NETWORK OPERATIONS	18,915,870	18,896,746	19,124				
Ь	CONTRIB,NET OF ALLOC EX	474,650	13,599	461,051				
с	MISCELLANEOUS	459	459					
d								
е								
f	All other expenses							
25	Total functional expenses. Add lines 1 through 24f	41,739,754	38,656,922	3,082,832	0			
26	Joint costs. Check here 🕨 🦵 If following							
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a							
	combined educational campaign and fundraising solicitation							
					rm 990 (2011)			

Form 990 (2011)

Part X Balance Sheet

					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments	•		12,031,438	2	15,968,552
	3	Pledges and grants receivable, net			501,188	3	663,568
	4	Accounts receivable, net			7,567,609	4	13,459,449
	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 c	4958(f)(1)) and				
6		Schedule L				6	
et	7	Notes and loans receivable, net	•			7	
Assets	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			1,433,772	9	2,623,017
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> <i>Part VI of Schedule D</i>	10a	96,473,060			
	Ь	Less accumulated depreciation	10b	39,175,658	19,959,967	10c	57,297,402
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11			3,559,301	12	8,111,956
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		0	15	15,337,729	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	•		45,053,275	16	113,461,673
	17	Accounts payable and accrued expenses .		3,583,495	17	10,151,687	
	18	Grants payable		18			
	19	Deferred revenue	23,620,132	19	70,948,231		
	20	Tax-exempt bond liabilities		20			
Ś	21	Escrow or custodial account liability Complete Part IV of Schedul			21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ab		persons Complete Part II of Schedule L			22		
Ξ	23	Secured mortgages and notes payable to unrelated third parties	•		2,609,547	23	1,747,511
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par					
					207,922		18,146,514
	26	Total liabilities. Add lines 17 through 25			30,021,096	26	100,993,943
lce s		Organizations that follow SFAS 117, check here ▶ 🔽 and comp through 29, and lines 33 and 34.	lete li	ines 27			
lan	27	Unrestricted net assets			15,032,179	27	12,467,730
Ba	28	Temporarily restricted net assets				28	
Ы	29	Permanently restricted net assets				29	
Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ┌─ ar lines 30 through 34.	id com	plete			
2	30	Capital stock or trust principal, or current funds	•			30	
Set	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	inds			32	
Net	33	Total net assets or fund balances			15,032,179	33	12,467,730
_	34	Total liabilities and net assets/fund balances			45,053,275	34	113,461,673
	-						Form 990 (2011)

Form 990 (2011)

Ра	rt XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI .			ন.	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		42.2	59,917
2	Total expenses (must equal Part IX, column (A), line 25)	2			39,754
3	Revenue less expenses Subtract line 2 from line 1	3			20,163
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			32,179
5	Other changes in net assets or fund balances (explain in Schedule O)	5			84,612
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		-	67,730
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			ম	
				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?		2b	Yes	
с	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t 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 is on a separate basis, consolidated basis, or both	ssued			
	🔽 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?	9	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits .	equired	Зb	Yes	

efi	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493319054312											
		OULE A or 990EZ)		Public C	Charity S	Status a	nd Publ	ic Suppo	ort	ОМ	B No 1545-0047	
Departr	ment of th	e Treasury		Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.						ZU11 Open to Public		
Interna	Revenue	e Service		🕨 Attach to I	Form 990 or l	Form 990-EZ	. 🕨 See sepa	rate instruct	ions.		Inspection	
UNIVE	RSITY	ie organizat CORPORATIO EVELOPMENT		ANCED			<u> </u>			identificatio	on number	
_			for D	blic Charity Sta		annations	must com	nlata thic n	52-2060			
	rt I			te foundation becaus						IIStructions		
1	сığum Г		•	ion of churches, or a	•		- ,	-	~)			
2	,			d in section 170(b)(1				-/(-/(-/(-/				
3	, L							on 170(b)(1)	(A)(iii).			
4	Γ	A medica	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
5	Г			perated for the benefi (A)(iv). (Complete P		e or universit	y owned or o	operated by a	governmen	ital unit desc	cribed in	
6	Γ	A federal	state, or	local government or	government	tal unit desc	rıbed ın sect	ion 170(b)(1)(A)(v).			
7	ন	described	ın	at normally receives		al part of its	support from	ı a governme	ntal unıt or f	from the gen	eral public	
8	Г			b)(1)(A)(vi) (Complete Part II) • trust described in section 170(b)(1)(A)(vi) (Complete Part II)								
9	Ē			at normally receives					outions, men	nbershıp fee	s, and gross	
		receipts f	rom activ	vities related to its e	xempt functi	ons—subject	t to certain e	exceptions, a	nd (2) no ma	ore than 331	/3% of	
		ıts suppo	rt from gr	oss investment inco	me and unre	lated busine	ss taxable ır	ncome (less s	section 511	tax) from bu	Isinesses	
		acquired	by the or	ganızatıon after June	30,1975 S	ee section 5	609(a)(2). (C	Complete Par	tIII)			
10	Γ	An organ	zatıon or	ganized and operated	d exclusively	/ to test for p	oublic safety	See section	509(a)(4).			
11	Г	one or mo the box th	re public	ganized and operated ly supported organiz ibes the type of supp b Type I	ations descr orting organ	ribed in secti li <u>za</u> tion and c	on 509(a)(1 complete line) or section 5	509(a)(2) S gh 11h	ee section 5		
e	Г		n foundat	ox, I certify that the ion managers and ot	-			•				
f g		If the org check thı	anization s box	received a written d						III supportı	ng organization, Г	
5		following	persons?									
				irectly or indirectly c				persons des	cribed in (ii)		Yes No	
				governing body of th		-	TION			110		
				er of a person descrı lled entıty of a perso			hove?			11g 11g		
h				ng information about						[119		
				(iii) Type of	(iv) Is the		(v)		(vi) Is th			
(i) Name suppor organıza		e of rted	n or IRC section		col (ı) lıst your gove	organization in col (i) listed in your governing document?		Did you notify the organization in col (1) of your support?		tion in ganized J S ?	(vii) A mount of support?	
	(see instructions)) Yes No Yes No Yes No											
Tota	I											
	-	I				1	1	1	1	1		

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule A	(Form 9	90 or	990-F7	2011
Schedule A	(101111.2	50.01	550-LZ	/2011

Page **2**

	Part II	Support Schedule (Complete only if y under Part III. If th	ou checked the	box on line 5, 3	7, or 8 of Part I	or if the organ	ization failed to	qualify	
S	ection A.	Public Support							
		(or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	membersh	ts, contributions, and ip fees received (Do any "unusual	11,295,048	3 11,266,579	11,397,176	11,043,067	12,504,574	57,506,444	
_	Tax revenu organizatio paid to or e behalf	ues levied for the on's benefit and either expended on its							
3	furnished b	of services or facilities by a governmental unit nization without							
4	Total. Add	lınes 1 through 3	11,295,048	3 11,266,579	11,397,176	11,043,067	12,504,574	57,506,444	
5	The portion by each pe governmer supported on line 1 th	n of total contributions rson (other than a ital unit or publicly organization) included nat exceeds 2% of the own on line 11, column							
6	Public Sup from line 4							57,506,444	
		Total Support	I	r					
Cal	endar year	(or fiscal year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
-		ginning in)	11,295,048						
7 8	A mounts f	me from interest,	11,295,048	11,266,579	11,397,176	11,043,067	12,504,574	57,506,444	
0	dıvıdends, on securıtı royaltıes a sımılar sou	payments received es loans, rents, nd income from irces	593,306	240,256	70,015	56,795	71,438	1,031,810	
9	business a not the bus carried on	e from unrelated ctivities, whether or siness is regularly							
10	IV) Do no	me (Explain in Part t include gain or loss ale of capital	208,538	227,514	323,227	154,368	343,846	1,257,493	
11	through 10							59,795,747	
12	Gross rece	eipts from related activit	ties, etc (See ins	tructions)			12	117,028,468	
13	check this	Years If the Form 990 is box and stop here	-		, thırd, fourth, or f	ifth tax year as a	501(c)(3) organiz	zation, ▶	
		Computation of Pu					1 1		
14	Public Sup	port Percentage for 201	L1 (line 6 column	(†) divided by line	11 column (f))		14	96 170 %	
15	Public Sup	port Percentage for 201	LO Schedule A, Pa	art II, line 14			15	94 210 %	
16a	33 1/3% s	upport test—2011. If th	e organızatıon dıd	not check the box	on line 13, and	line 14 is 33 1/3%	or more, check t	his box	
	 a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported 								
	15 is 10% Explain in supported	- and-circumstances tes or more, and if the orga Part IV how the organiz organization	anization meets th ation meets the "	e "facts and cırcu facts and cırcums	mstances" test, tances" test The	check this box an organization qua	d stop here. lifies as a publicly	, , , ▶□	
18	Private Fo	undation If the organıza ıs	ition did not checl	a box on line 13,	16a, 16b, 17a o	r 17b, check this	box and see	►	

Pa	rt III	Support Schedule for Organizations Described in IRC 509(a)(2)							
		(Complete only if you							
		Part II. If the organiz	ation fails to c	ualify under th	e tests listed be	elow, please co	omplete F	Part II.)
		Public Support		-			-		
Cale	ndar year	(or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
	Ciffe area	ın) nts, contributions, and							. ,
1		hip fees received (Do not							
		ny "unusual grants ")							
2		eipts from admissions,							
-		lise sold or services							
	performed	l, or facilities furnished in							
		ty that is related to the							
	-	ion's tax-exempt							
_	purpose								
3		elpts from activities that nunrelated trade or							
		under section 513							
4		nues levied for the							
-		on's benefit and either							
	paid to or	expended on its							
	behalf								
5		of services or facilities							
		by a governmental unit to							
		ization without charge							
6		d lines 1 through 5							
7a		Included on lines 1, 2, eived from disqualified							
	persons	eiveu nom uisquaimeu							
Ь		included on lines 2 and 3							
		from other than							
	dısqualıfı	ed persons that exceed							
	the greate	er of \$5,000 or 1% of the							
		n line 13 for the year							
С		7a and 7b							
8		pport (Subtract line 7c							
	from line (,							
		Total Support		1					
Cale	ndar year	(or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20)11	(f) Total
9	Amounts	from line 6							
, 10a		ome from interest,							
IVa		, payments received on							
		s loans, rents, royalties							
	and incon	ne from similar							
	sources								
b		l business taxable							
	•	ess section 511 taxes)							
	June 30,	nesses acquired after							
с		10a and 10b							
11		ne from unrelated							
		activities not included							
		b, whether or not the							
	business	is regularly carried on							
12		ome Do not include							
	5	ss from the sale of							
	Capital as IV)	ssets (Explain in Part							
13		port (Add lines 9, 10c,							
13	11 and 12								
14		Years If the Form 990 is f	or the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) organ	ızatıon,
	check this	s box and stop here							►
Se		Computation of Pub							
15	Public Su	pport Percentage for 2011	(lıne 8 column	(f) dıvıded by lıne	13 column (f))		15		
16	Public sup	oport percentage from 201	0 Schedule A, P	art III, line 15			16		
		· · · -	,				<u> </u>		
Se	ction D	Computation of Invo	estment Inco	me Percenta	ae				
17		nt income percentage for 2				ו (f))	17		
			-			N. 77			
18		nt income percentage from					18		
19a		support tests—2011. If the							
L		33 1/3%, check this box							1/20/4 and lung
Ь		support tests—2010. If the more than 33 1/3%, check							
20		oundation If the organizati							

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. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Schedule A (Form 990 or 990-EZ) 2011

Software ID:

Software Version:

EIN: 52-2060187

Name: UNIVERSITY CORPORATION FOR ADVANCED INTERNET DEVELOPMENT

Form 990, Special Condition Description:

	Special Condition Description									
Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)										
4d. Other program	4d. Other program services									
(Code) (Expenses \$	including grants of \$) (Revenue \$	1,080,039)						
MEETING SERVICES										

		PROCESS AS FILED Dat	a -	DLN	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493319054312							
SCHEDULE C		Political Campaign a	nd Lobbying	Activities	OMBN0 1545-0047							
(Form 990 or 990-EZ)	For Organiza	ations Exempt From Income Complete if the organ			2011							
Department of the Treasury nternal Revenue Service	,	Attach to Form 990 or Form 99			Open to Public Inspection							
-	swered "Yes,	" to Form 990, Part IV, Line 3,	or Form 990-EZ, Pa	art V, line 46 (Political Ca	mpaign Activities),							
 Section 501(c) (other to Section 527 organization 	than section 50 [°] ions Complete F	-	Parts I-A and C below	·								
 Section 501(c)(3) orga Section 501(c)(3) orga 	anızatıons that h anızatıons that h swered "Yes ,	" to Form 990, Part IV, Line 4, ave filed Form 5768 (election und ave NOT filed Form 5768 (electio " to Form 990, Part IV, Line 5 (tions Complete Part III	ler section 501(h)) C n under section 501(Complete Part II-A Do not cor (h)) Complete Part II-B Do n	mplete Part II-B ot complete Part II-A							
Name of the organizat UNIVERSITY CORPORATION INTERNET DEVELOPMENT	tion			Employer iden 52-2060187	tification number							
Part I-A Complet	te if the orga	anization is exempt unde	er section 501(d		organization.							
		nızatıon's dırect and ındırect po ublıc office ın Part IV	lıtıcal campaıgn act	ivities on behalf of or								
2 Political expendit3 Volunteer hours	tures			•	\$							
Part T-P Complet	a if the ora	anization is exempt unde	r section 501/	-)/2)								
		ax incurred by the organization			\$							
	•	ax incurred by organization man			\$							
		tion 4955 tax, did it file Form 4	-		✓ Yes □ No							
4a Was a correction		,	,		└ Yes └ No							
b If "Yes," describe					,							
		anization is exempt unde	er section 501(d	c) except section 501	.(c)(3).							
L Enter the amount	directly expen	ded by the filing organization for	section 527 exemp	ot function activities 🕨	\$							
2 Enter the amount exempt funtion ac		anızatıon's funds contributed to	other organizations	for section 527	\$							
3 Total exempt fund	ctıon expendıtu	res Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b 🕨 🕨	\$							
1 Did the filing orga	anızatıon file Fo	r m 1120-POL for this year?			└ Yes └ No							
organization mad amount of politica	e payments Fo al contributions	employer identification number r each organization listed, enter received that were promptly and olitical action committee (PAC)	the amount paid fro directly delivered	m the filing organization's f to a separate political orga	unds Also enter the nızatıon, such as a							
(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-							
		Act Notice, see the instructions for			Form 990 or 990-EZ) 2011							

Ρ	art II-A Complete if the organizatio under section 501(h)).	n is exempt under section 501(c)(3) a	nd filed Form 5768	(election					
	Check 🔽 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures) Check 🔽 if the filing organization checked box A and "limited control" provisions apply								
	Limits on Lobbying (The term "expenditures" means	(a) Filing Organization's Totals	(b) Affiliated Group Totals						
1a	Total lobbying expenditures to influence public								
b	Total lobbying expenditures to influence a legis	slatıve body (dırect lobbyıng)							
С	Total lobbying expenditures (add lines 1a and	1b)							
d	O ther exempt purpose expenditures								
е	Total exempt purpose expenditures (add lines								
f	Lobbying nontaxable amount Enter the amoun columns								
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:							
	Not over \$500,000	20% of the amount on line 1e							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000							
	Over \$17,000,000	\$1,000,000							
g	Grassroots nontaxable amount (enter 25% of	ine 1f)							
h	Subtract line 1g from line 1a If zero or less, er	nter -0 -							
i	Subtract line 1f from line 1c If zero or less, en	ter - 0 -							
j	If there is an amount other than zero on either section 4911 tax for this year?	line 1h or line 1i, did the organization file Form 47	20 reporting	∏Yes ∏No					

Schedule C (Form 990 or 990-EZ) 2011

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

	Lobbying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

Page 2

Schedule C (Form 990 or 990-EZ) 2011

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)).

legislation, inc through the us a Volunteers? b Paid staff or m c Media advertis d Mailings to me	r, did the filing organization attempt to influence foreign, national, state or local luding any attempt to influence public opinion on a legislative matter or referendum, e of anagement (include compensation in expenses reported on lines 1c through 11)?	Yes	No		Amour	1t
legislation, inc through the us a Volunteers? b Paid staff or m c Media advertis d Mailings to me	luding any attempt to influence public opinion on a legislative matter or referendum, e of		I			
 b Paid staff or m c Media advertis d Mailings to me 	anagement (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisd Mailings to me	anagement (include compensation in expenses reported on lines 1c through 1i)?		No			
d Mailings to me		Yes				
-	ements?		No			
a Dudali - Airis	mbers, legislators, or the public?	Yes				1,354
e Publications, o	r published or broadcast statements?		No			
f Grants to othe	r organizations for lobbying purposes?		No			
g Direct contact	with legislators, their staffs, government officials, or a legislative body?		No			
h Rallies, demon	strations, seminars, conventions, speeches, lectures, or any similar means?		No			
i Other activitie	s? If "Yes," describe in Part IV		No			
j Total lines 1c	through 11					1,354
2a Did the activit	es in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b If "Yes," enter	the amount of any tax incurred under section 4912					
c If "Yes," enter	the amount of any tax incurred by organization managers under section 4912					
d If the filing orc	anization incurred a section 4912 tax, did it file Form 4720 for this year?					
	<pre>iplete if the organization is exempt under section 501(c)(4), section 5 (c)(6).</pre>	501(c)(5),	or s		
1 Were substant	ally all (90% or more) dues received nondeductible by members?		ſ	1	Yes	No
	zation make only in-house lobbying expenditures of \$2,000 or less?		F	2		
-	zation agree to carryover lobbying and political expenditures from the prior year?		ŀ	3		
Part IIII-B Con 501 ans	plete if the organization is exempt under section 501(c)(4), section 5 (c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I wered "Yes".	11-À,			ectio	n
	nents and similar amounts from members	1				
) non-deductible lobbying and political expenditures (do not include amounts of political vhich the section 527(f) tax was paid).					
a Current year		2a				
b Carryover from	n last year	2b				
c Total		2c				
3 Aggregate amo	ount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
does the organ	sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year?	4				
•	nt of lobbying and political expenditures (see instructions)	5				
	plemental Information					

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

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	·····,	DRAFTED LETTER TO GOVERNOR OF WISCONSIN TO ADDRESS ISSUES SURROUNDING GRANT RELATED ACTIVITIES

efile GRAPHIC p	orint - DO NOT PROCESS	As Filed Data -			DLN: 9	3493319	054312
CHEDULE D					C	MBNo 154	45-0047
Form 990)		mental Financi				201	11
epartment of the Treasury temal Revenue Service	Part IV, line 6,		ered "Yes," to Form 990 11d, 11e, 11f, 12a, or 12 parate instructions.			Open to Inspec	
Name of the organi UNIVERSITY CORPORAT INTERNET DEVELOPMEN	TON FOR ADVANCED				loyer ident if i 2060187	cation numb	er
	izations Maintaining Dong ation answered "Yes" to Forr			unds	or Account	ts. Comple	ete if the
organiz	allon answered fes to for		o. r advised funds	((b) Funds and	other acco	unts
1 Total number at	t end of year						
2 Aggregate cont	ributions to (during year)						
Aggregate gran	ts from (durıng year)						
Aggregate valu	e at end of year						
	ation inform all donors and donor rganization's property, subject to			or advı	sed	∏ Yes	∏ No
used only for cl	ation inform all grantees, donors, haritable purposes and not for the ermissible private benefit					∏ Yes	∏ No
	rvation Easements. Comp	lete if the organizat	ion answered "Yes" t	o Forn	n 990, Part	IV, line 7.	
PreservatiProtectionPreservati	onservation easements held by to on of land for public use (eg, rec of natural habitat on of open space 2a-2d if the organization held a	reation or pleasure)	Preservation of an Preservation of a o	certified	d historic stru	-	ea
	ne last day of the tax year						
					Held at th	ne End of the	e Year
	f conservation easements			2a			
	restricted by conservation easem servation easements on a certifie		aludad in (a)	2b			
-	servation easements included in		. ,	2c 2d			
	servation easements modified, tra					n during	
	ar ▶	ansierieu, releaseu, ex	inguished, or terminate		le organizacio	n during	
Number of stat	es where property subject to con	servation easement is	located 🕨				
	ization have a written policy rega the conservation easements it h		ntoring, inspection, hand	dlıng of	violations, ai	nd 🔽 Yes	∏ No
Staff and volun	teer hours devoted to monitoring	, inspecting and enforc	ing conservation easem	nents du	uring the yeai	∙⊧	
A mount of expe	enses incurred in monitoring, insp	pecting, and enforcing	conservation easements	s durınç	g the year		
	servation easement reported on) and 170(h)(4)(B)(II)?	line 2(d) above satisfy	the requirements of sec	tion		∏ Yes	∏ No
balance sheet,	escribe how the organization repo and include, if applicable, the tex n's accounting for conservation e	<t footnote="" of="" td="" the="" the<="" to=""><td></td><td></td><td></td><td></td><td></td></t>					
	izations Maintaining Colle ete if the organization answe			or Otl	her Simila	r Assets.	
art, historical t	cion elected, as permitted under S reasures, or other similar assets c XIV , the text of the footnote to i	held for public exhibiti	on, education or researd	ch in fu			e,
historical treas	tion elected, as permitted under S sures, or other similar assets held owing amounts relating to these i	d for public exhibition,					
(i) Revenues ir	ncluded in Form 990, Part VIII, I	ine 1			►\$		
(ii) Assets incl	uded in Form 990, Part X						
If the organizat	cion received or held works of art, nts required to be reported under			or finan			
a Revenues inclu	ided in Form 990, Part VIII, line	1			►\$		
_	d in Form 990, Part X						
					· •		

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D Schedule D (Form 990) 2011

Sche	dule D (Form 990) 2011									Page 2
Part	Organizations Maintaining Co	llections of Art,	Hist	tori	cal Trea	sures, or (Othe	r Similar A	Assets	(continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any o	ofthe	e foll	owing that	are a signific	ant u	ise of its colle	ection	
а	Public exhibition		d	Γ	Loan or e	xchange prog	grams	i		
b			e	Γ	Other					
с	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and explain	how	they	/ further th	e organızatıo	n's e>	kempt purpos	e in	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							nılar	∏ Yes	∏ No
Par	t IV Escrow and Custodial Arrang					ion answere	ed "Y	'es" to Form	i 990,	
	Part IV, line 9, or reported an an									
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?		-			s or other as	sets	not	∏ Yes	∏ No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the fo	llowi	ng ta	able				•	
~							1-	,	Amount	
с с	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe		21?						∏ Yes	∏ No
	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		were Prior`				rt IV, line 10 Three Years Bac		r Years Back
1a	Beginning of year balance		(0)	FIIOT		Two rears back		Thee reals bac		T Tears back
b	Contributions									
с	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the yea	r end balance held as								
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
с	Term endowment 🕨									
3a	Are there endowment funds not in the posse organization by	ssion of the organizat	ion t	hat a	ire held an	d admınıstere	ed for	the	Ye	es No
	(i) unrelated organizations		•					3	la(i)	
	(ii) related organizations							3	a(ii)	
b	If "Yes" to 3a(11), are the related organizatio					• • •	• •	· · · [3b	
4	Describe in Part XIV the intended uses of th	-								
Par	t VI Land, Buildings, and Equipme	ent. See Form 990	, Pai	rt X	line 10.					
	Description of property				Cost or othe (investment			(c) Accumulat depreciation		Book value
1a	Land									
b	Buildings									
С	Leasehold improvements		.			1,25	8,396	389,	086	869,310

d Equipment	95,214,664	38,786,572	56
e Other			

57,297,402

56,428,092

95,214,664

Schedule D (Form 990) 2011			Page 3		
Part VII Investments-Other Securities. See	Form 990, Part X, line 12				
 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of v Cost or end-of-year			
		Cost of end-of-year			
(1)Financial derivatives					
(2)Closely-held equity interests (3)Other					
(A) SECURITIES AND MUTUAL FUNDS	8,000,000		F		
			-		
(B) RABBI TRUST	111,956		F_		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	0/11//00				
Part VIII Investments—Program Related. See	e Form 990, Part X, line 1		<u> </u>		
(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)					
Part IX Other Assets. See Form 990, Part X, lin	ie 15.				
(a) Descrip	tion	(b) Book value		
(1) EQUIPMENT DEPOSITS			15,337,729		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.			15,337,729		
Part XOther Liabilities.See Form 990, Part X1(a) Description of Liability					
	(b) A mount				
Federal Income Taxes					
DEFERRED LEASE EXPENSE	398,074				
CONTRACT ADVANCES	17,748,440				

Total. (Column (b) should equal Form 990, Part X, col (B) line 25) 18,146,514

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements 1 42,259,917 1 Total revenue (Form 990, Part VIII, column (A), line 12) 2 2 41,739,754 Total expenses (Form 990, Part IX, column (A), line 25) з 3 520,163 Excess or (deficit) for the year Subtract line 2 from line 1 4 4 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 6 Investment expenses 7 7 Prior period adjustments 8 8 -3,084,612 Other (Describe in Part XIV) 9 9 -3.084.612Total adjustments (net) Add lines 4 - 8 10 -2.564.449 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XII 1 Total revenue, gains, and other support per audited financial statements . . 1 42,259,917 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 а 2a Donated services and use of facilities 2b b Recoveries of prior year grants 2c С 2d d Other (Describe in Part XIV) e Add lines 2a through 2d 2e 0 3 42.259.917 3 Subtract line **2e** from line **1** 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a а 4b b **4**c С 0 Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12) 5 42.259.917 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial 41,739,754 1 statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25 2 Donated services and use of facilities . . . 2a а 2b b Prior year adjustments Other losses 2c С d Other (Describe in Part XIV) 2d Add lines 2a through 2d e . . . 2e Ω 3 41.739.754 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4 Investment expenses not included on Form 990, Part VIII, line 7b . 4a а b **4**b С **4**c 0 . . . Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18) 5 5 41.739.754 Part XIV Supplemental Information

Schedule D (Form 990) 2011

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
PART XI, LINE 8 - OTHER ADJUSTMENTS		PRIOR PERIOD RESTATEMENT -3,084,612

Page 4

reasury wrice organization (CORPORATION FO VEVELOPMENT General Informat "Yes" to Form 990, antmakers. Does th	► Complete ► Attac R ADVANCED	if the organizatio Part IV, line	Outside the Uni on answered "Yes" to Form 14b, 15, or 16. See separate instructions	n 990,	омв № 1545-0047 2011 Оров to Bublic
reasury wrice organization (CORPORATION FO VEVELOPMENT General Informat "Yes" to Form 990, antmakers. Does th	► Complete ► Attac R ADVANCED	if the organizatio Part IV, line	on answered "Yes" to Form 14b, 15, or 16.	n 990,	
organization (CORPORATION FOL EVELOPMENT General Informat "Yes" to Form 990, antmakers. Does th	RADVANCED	:h to Form 990. ►	See separate instructions	5.	Open to Dublic
(CORPORATION FO DEVELOPMENT General Informat "Yes" to Form 990, antmakers. Does th					Open to Public Inspection
DEVELOPMENT General Informat "Yes" to Form 990, antmakers. Does th				Employer ide	ntification number
"Yes" to Form 990, antmakers. Does th	ion on Activiti			52-2060187	
antmakers. Does th			he United States.	Complete if the organ	ization answered
ince, the grantees'			ls to substantiate the	amount of the grants	or
		-		tion criteria used to av	
States	-		-	e of grant funds outside	the
esperRegion (Use Pa					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a (f) Total expenditures for region/investments in region
ΡE	0	1	PROGRAM SERVICES	CONSULTING	6,500
E EAST AND NORTH A	0	1		CONSULTING SERVICES AND EXPENSE REIMBURSEMENT	3,492
tal		2			9,992
	om continuation sheet	om continuation sheets	om continuation sheets	om continuation sheets	

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal, othe
Enter total r tax-exempt	number of recipien by the IRS, or for	t organizations lis which the grante	ted above that are i e or counsel has pro	recognized as charit ovided a section 501	les by the foreign c .(c)(3) equivalency	ountry, recognized letter	as . 🕨	
Enter total r	number of other or	ganizations or en	tities				. 🕨	

Schedule F (Form 990) 2011

Page **2**

		the Tradition data to			<u> </u>		
Use Part V if a	other Assistance	to Individuais needed	Outside the Unit	:ed States. Complete	if the organization a	nswered "Yes" to Form	990, Part IV, line
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method o valuation (book, FMV, appraisal, othe
			L				
					1		
					1		
				<u> </u>	1		
				<u> </u>	1		
	+			+			+

Schedule F (Form 990) 2011 Page 4 Part IV Foreign Forms 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the Yes 5 No organization may be required to file Form 926 (see instructions for Form 926) 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be Yes ম No required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A) 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Yes 7 No Corporations. (see instructions for Form 5471) 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Yes ম No Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621) 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. Yes 7 No (see instructions for Form 8865) 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form **v** Yes Νo 5713).

Schedule F (Form 990) 2011

information.	Detum Defense en	E un la natura
Identifier	ReturnReference	Explanation

Schedule F (Form 990) 2011

Schedule I (Form 990)		Grants and Oth Governments an mplete if the organization	d Individuals i	n the United S Form 990, Part IV, line	tates		C	0MB No 1545-0047 2011 Open to Public
Department of the Treasury Internal Revenue Service			Attach to Form 9	90		Employ	er identif	Inspection ication number
UNIVERSITY CORPORATION	FOR ADVANCED					52-20		
Part I General Inform						· · · · · · · · · · · · · · · · · · ·		
 Does the organization ma the selection criteria used Describe in Part IV the or 	d to award the grants o	orassistance?						Ves Ves
Form 990, Part I	V, line 21 for any r	Governments and ecipient that received)) if additional space i	more than \$5,000	. Check this box if n	o one recipient rec	ceived more th	וan \$5,	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descript non-cash ass		(h) Purpose of grant or assistance
(1) UNIVERSITY OF MICHIGANPO BOX 223131 PITTSBURGH, PA 15251	38-6006309	501(C)(3)	86,226					FUNDING TO SUPPORT DEPLOYMENT OF A DISTRIBUTED VIRTUAL INSTRUMENT TO SUPPORT DATA INTENSIVE SCIENCE, FOCUSING ON LHC BUT AVAILABLE TO ALL ACADEMIC DISCIPLINES
(2) CALIFORNIA INSTITUTE OF TECHNOLOGYTREASURY SERVICES MAIL CODE 117-15 PASADENA,CA 91125	95-1643307	501(C)(3)	142,735					FUNDING TO SUPPORT DEPLOYMENT OF A DISTRIBUTED VIRTUAL INSTRUMENT TO SUPPORT DATA INTENSIVE SCIENCE, FOCUSING ON LHC BUT AVAILABLE TO ALL ACADEMIC DISCIPLINES
(3) UNIVERSITY OF WISCONSINPO BOX 500 MILWAUKEE, WI 53201	39-1805963	501(C)(3)	46,954					FUNDING TO SUPPORT EFFORTS TO ENHANCE GREATER USE WITHIN THE R&E COMMUNITY OF EXISTING AUTHENTICATION AUTHORIZATION TOOLS TO MANAGE IDENTITY AND ACCESS CONTROLS
(4)VANDERBILT UNIVERSITYOFFICE OF CONTRACT/GRANT ACCT PMB 401591 NASHVILLE,TN 37240	62-0476822	501(C)(3)	40,778					FUNDING TO SUPPORT DEPLOYMENT OF A DISTRIBUTED VIRTUAL INSTRUMENT TO SUPPORT DATA INTENSIVE SCIENCE, FOCUSING ON LHC BUT AVAILABLE TO ALL ACADEMIC DISCIPLINES
2 Enter total number of sect3 Enter total number of other		-						4

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2011

Schedule I (Form 990) 2011

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 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
			1	1	1

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S		SCHEDULE I, PART I, LINE 2 GRANT FUNDS ARE SUBJECT TO THE EXPENDITURE AND DISBURSEMENT POLICIES OF UCAID IN COMPLIANCE WITH OMB AND FUNDING AGENCY STANDARDS, INCLUDING ALLOWABILITY AND APPROPRIATENESS (BUSINESS PURPOSE, ADEQUATE DOCUMENTATION & PROPER APPROVALS) FURTHER MONITORING OF THE USE OF GRANT FUNDS IS PROVIDED BY THE SR MANAGER OF SPONSORED PROJECTS AND THE PRINCIPAL INVESTIGATOR OF THE PROGRAM WITH REGULAR EXPENDITURE REVIEW PROGRAMMATIC MONITORING IS MANAGED BY THE PI WITH REGULAR MEETINGS AND SUBMISSION OF REGULAR PROGRAM REPORTS

Schedule I (Form 990) 2011

efil	e GRAPHIC p	orint - DO NOT PROCESS	<u> As Filed Data -</u>	<u> </u>	DLN: 9	3493319	9054	312	
Sch	edule J	Со		OMBNo 1545-0047					
Forn	n 990)	For certain Officer	s, Directors, Trustees, Compensated Emp	Key Employees, and Highe loyees	st	20	11		
lonartm	ent of the Treasury	► Complete if		vered "Yes" to Form 990,	Open to	Dub	lic		
•	Revenue Service	► Attach	Part IV, question to Form 990. ► See se			Inspe			
	e of the organi	zation		•	Employer ident if	ication num	ber		
	'ERSITY CORPORAT RNET DEVELOPMEN	ION FOR ADVANCED			52-2060187				
Par	ti Touesti	ons Regarding Compensa	tion		52-2060187				
	Quebt.	one negarang compensa					Yes	No	
1a	Check the appr	opiate box(es) if the organization	provided any of the fo	llowing to or for a person li	sted ın Form				
		Section A, line 1a Complete Part	III to provide any re	evant information regardin	g these ıtems				
		or charter travel		allowance or residence for p					
		companions		s for business use of perso					
		ification and gross-up payments ary spending account		social club dues or initiation					
	Discretion	ary spending account	Personal	services (e g , maid, chauf	feur, cher)				
h	If any of the bo	xes in line 1a are checked, did th	e organization follow a	written policy regarding p	avment or				
-		orprovision of all the expenses d				1b			
2		ation require substantiation prior							
	officers, directo	ors, trustees, and the CEO/Execu	tive Director, regardır	ig the items checked in line	ela?	2			
3	,	, if any, of the following the organi		sh the compensation of the					
		CEO/Executive Director Check a	<u></u> .	maloumont contract					
		tion committee nt compensation consultant		mployment contract atıon survey or study					
		of other organizations		by the board or compensat	tion committee				
	,	or other of gamzations	i rippiotai						
4	During the year or a related org	r, dıd any person lısted ın Form 99 anızatıon	90, Part VII, Section /	۹, line 1a with respect to th	ne filing organizat	ion			
а	Receive a seve	rance payment or change-of-con	trol payment?			4a		No	
b	Participate in, o	or receive payment from, a supple	mental nonqualified re	etirement plan?		4b		No	
с	Participate in, o	or receive payment from, an equit	y-based compensatio	n arrangement?		4 c		No	
	If "Yes" to any	of lines 4a-c, list the persons an	d provide the applicab	le amounts for each item ir	n Part III				
	0 mby 501(c)(3)	and 501(c)(4) organizations only	must complete lines	5-0					
5		ted in form 990, Part VII, Section	=		١v				
-		contingent on the revenues of	,	,	• ,				
а	The organizatio	002				5a		No	
b	Any related org	janization?				5b		No	
	If "Yes," to line	5a or 5b, describe in Part III							
6		ted in form 990, Part VII, Sectior contingent on the net earnings of	h A, line 1a, did the or	ganızatıon pay or accrue ar	ıy				
а	The organizatio	on?				6a		No	
b	Any related org	janization?				6b		No	
	If "Yes," to line	e 6a or 6b, describe in Part III							
7		ted in Form 990, Part VII, Sectio lescribed in lines 5 and 6? If "Yes			n-fixed	7		No	
8		nts reported in Form 990, Part V nitial contract exception describe				8		No	
9		8 did the organization also follow	the rebuttable press	motion procedure decembe				110	
9	section 53 495	8, dıd the organızatıon also follov 58-6(c)?	v the reputtable presu	npriori procedure describe	u iii keyuidtions	9			

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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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported ın prıor Form 990 or Form 990-EZ
(1) H DAVID LAMBERT	(I) (II)	418,323 0	0 0	0	12,250 0	18,357 0	448,930 0	0 0
(2) BARBARA NANZIG	(I) (II)	129,365 0	0 0	0	0	34,015 0	163,380 0	0
(3) JAMES PFLASTERER	(I) (II)	153,219 0	0 0	0	15,810 0	20,529 0	189,558 0	0 0
(4) ROBERT VIETZKE	(I) (II)	183,908 0	0 0	0	17,600 0	20,970 0	222,478 0	0 0
(5) ANA PRESTON	(I) (II)	178,023 0	0 0	0	14,519 0	987 0	193,529 0	0
(6) STEPHEN WOLFF	(I) (II)	160,779 0	0 0	0	10,643 0	15,377 0	186,799 0	0 0
(7) KENNETH KLINGENSTEIN	(I) (II)	184,433 0	0 0	0	18,600 0	1,048 0	204,081 0	0 0
(8) MATTHEW ZEKAUSKAS	(I) (II)	165,656 0	0	0	16,078 0	8,299 0	190,033 0	0 0
(9) CHRIS ROBB	(I) (II)	0 0	0 0	163,671 0	0 0	0	163,671 0	0 0
(10) RANDALL BROGLE	(I) (II)	153,160 0	0 0	0	15,704 0	20,863 0	189,727 0	0 0
(11) BRIAN CASHMAN	(I) (II)	144,628 0	0 0	0 0	14,865 0	3,143 0	162,636 0	0 0

Schedule J (Form 990) 2011

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

Identifier	Ret urn Reference	Explanation
	3	THE BOARD CHAIR DIRECTS THE CHIEF OF STAFF ON ANY RESEARCH THEY WOULD LIKE COMPLETED THE BOARD THEN MEETS IN EXECUTIVE SESSION AND DISCUSSES THEIR PLAN FOR THE COMPENSATION OF THE CEO AND RELAYS THIS INFORMATION TO THE CEO AND CHIEF OF STAFF
SUPPLEMENTAL INFORMATION		PART II BARBARA NANZIG RECEIVED UNRELATED COMPENSATION OF \$163,380 FROM UNIVERSITY OF MICHIGAN, \$129,365 WAGES, \$34,015 NON TAXABLE BENEFITS CHRIS ROBB RECEIVED UNRELATED COMPENSATION OF \$163,671 FROM INDIANA UNIVERSITY

Schedule J (Form 990) 2011

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -		DLN: 93493319054312
SCHEDULE O				OMB No 1545-0047
(Form 990 or 990-EZ)	Supplementa	al Information to	o Form 990 or 990-EZ	2011
Department of the Treasury Internal Revenue Service		ide information for res 90 or to provide any ad ▶ Attach to Form 990		Open to Public Inspection
Name of the organization			Employ	ver identification number

52-2060187

INTERNET DEVELOPMENT

Identifier Return Explanation Reference FORM 990. THE CORPORATION HAS FOUR CLASSES OF MEMBERSHIP UNIVERSITY, NETWORK, AFFILIATE AND PART VI, INDUSTRY MEMBERS IN GOOD STANDING SHALL HAVE THE RIGHT TO VOTE FOR THE ELECTION OF SECTION A. TRUSTEES AND COMMITTEES OF THE BOARD OF TRUSTEES LINE 6 FORM 990, THE CORPORATION HAS FOUR CLASSES OF MEMBERSHIP UNIVERSITY, NETWORK, AFFILIATE AND PART VI, INDUSTRY EACH VOTING MEMBER IN GOOD STANDING IS ENTITLED TO ONE VOTE FOR THE ELECTION OF SECTION A. TRUSTEES AND COMMITTEES OF THE BOARD OF TRUSTEES LINE 7A FORM 990, THE OFFICERS OF INTERNET2 REVIEW THE FORM 990 PRIOR TO FILING PART VI, SECTION B. LINE 11 FORM 990, 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 PART VI. SECTION B. POSITIONS LINE 12C FORM 990, THE BOARD OF TRUSTEES MEET IN EXECUTIVE SESSION TO DISCUSS COMPENSATION OF THE CEO THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES PART VI, SECTION B, IS A BOARD COMMITTEE PROCESS, THE MEMBERS OF THE BOARD INVOLVED ARE ALL OUTSIDE LINE 15 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 GOALS FOR EACH YEAR SUPERVISORS CONDUCT ANNUAL EMPLOYEE REVIEWS ASSOCIATED WITH EMPLOYEES' ANNIVERSARY DATE. 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 2011 GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON FORM 990. PART VI. REQUEST SECTION C. LINE 19 CHANGES IN FORM 990, PRIOR PERIOD ADJUSTMENTS -3,084,612 NET ASSETS PART XI, LINE OR FUND 5 BALANCES

FORM 990, THE PROCESS FOR SELECTING AND OVERSEEING THE WORK OF THE INDEPENDENT AUDITOR HAS NOT PART XII, LINE CHANGED FROM THE PRIOR YEAR 2C

efile GRAPHIC print -	DO NOT PROCESS As Filed Da	nta -					DLN: 9349	33190	54312
SCHEDULE R (Form 990)		d Organizations a organization answered "Y MAttach to Form 990.		rt IV, line 33, 34,	-			• 1545-0 011	0047
Department of the Treasury Internal Revenue Service			-					to Pub pectior	
Name of the organization UNIVERSITY CORPORATION FOR AD INTERNET DEVELOPMENT	VANCED				Employer		tion number		
Part I Identificatio	on of Disregarded Entities (Com	plete if the organization	n answered "Yes"	on Form 990,	Part IV, line 33.)			
Name, address, and	(a) I EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Dıı	(f) rect controlling entity		
(1) NATIONAL RESEARCH & EDUC/ 1000 OAKBROOK DRIVE SUITE 300 ANN ARBOR, MI 48104 04-3750617		ACQUIRE INDEFEASIBLE RIGHTS OF USE OF FIBER OPTIC TELECOMM CAPACITY	DE	25,200	243,853	UCAID			
(2) INCOMMON LLC 1000 OAKBROOK DRIVE SUITE 300 ANN ARBOR, MI 48104 20-2995509)	FACILITATE SHARING OF PROTECTED NETWORK ACCESSIBLE RESOURCES	DE	1,856,705	1,103,771	UCAID			
(3) ADVANCED INFRASTRUCTURE 1000 OAKBROOK DRIVE SUITE 300 ANN ARBOR, MI 48104 20-3730423	FOR RESEARCH AND EDUCATION LLC	FACILITATE PROJECT COLLABORATION WHICH SHARE RESOURCES USING ADV TECHNOLOGY	DE	0	2,500	UCAID			
	on of Related Tax-Exempt Orga ed tax-exempt organizations during		the organization	answered "Ye	s" on Form 990,	Part IV,	line 34 becaus	e ıt had	one
Name, address, and I	(a) EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) tion Public charity st (if section 501(c		(f) Direct controlling entity	(g Section 5: contr organi	12(b)(13) rolled ization
(1) MICHIGAN INFORMATION TECH 1000 OAKBROOK DR STE 300 ANN ARBOR, MI 48104 75-3078459	HNOLOGY CENTER FOUNDATION	TO PROVIDE FUNDING FOR A TECHNOLOGICAL STATE-OF- THE-ART BUILDING, THE MITC,	MI	501(C)(3)				Yes	No No

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

	fication of Related e It had one or more									on ans	swere	d "Yes" o	n Form	990,	Part I	V, line 34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	al (d) Predominant income S cile Direct controlling (related, unrelated, e or entity excluded from tax ign under sections 512-		(f) Share of tota income	Share of total Share of end-of-		allocations		rtionate	Code V amount in Schedu	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		/—UBI Ge box 20 of ma le K-1 pa		j) ral or aging ner?	(k) Percentage ownership
										Yes	No			Yes	No		
line 34	fication of Related because it had one		e related organiza		reated as a	corporatio				tax ye		n answere	1		orm 9		
	(a) IN of related organization	(b) Primary activity			(stat fore			ect controlling Type entity (C cc		(e) Type of entity (C corp, S corp, or trust)		nare of total income	(g) Share of end-of-year assets			(h) rcentage vnership	

Page **2**

Part	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
1	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Dur	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	i		
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
Ь	Gift, grant, or capital contribution to related organization(s)	1b		No
с	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f		No
g	Purchase of assets from related organization(s)	1g		No
h	Exchange of assets with related organization(s)	1h		No
i L	ease of facilities, equipment, or other assets to related organization(s)	1 i		No
j L	ease of facilities, equipment, or other assets from related organization(s)	1j	Yes	
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		No
I P	Performance of services or membership or fundraising solicitations by related organization(s)	11		No
ms	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		No
n	Sharing of paid employees with related organization(s)	1n	Yes	
0	Reimbursement paid to related organization(s) for expenses	10		No
р	Reimbursement paid by related organization(s) for expenses	1p		No
q (O ther transfer of cash or property to related organization(s)	1q		No
rC	Other transfer of cash or property from related organization(s)	1r		No

2	If the answer to any of the above is "Yes," see the instructions for information on who must	complete this line, including covered	d relationships and transac	tion thresholds
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Schedule R (Form 990) 2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete of 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) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	ľ	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropitionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	man	j) aging ner?	(k) Percentage ow nership
			514)	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier	Ret urn Reference	Explanation
		THAT WILL ENABLE LEADING RESEARCH AND EDUCATIONAL HIGH TECHNOLOGY NONPROFIT 501(C)(3)ORGANIZATIONS TO OCCUPY SPACE AT RATES SIGNIFICANTLY BELOW MARKET RATES, AND TO LESSEN THE BURDEN OF GOVERNMENT

Schedule R (Form 990) 2011