

Return of Organization Exempt From Income Tax

2007

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 6/1/2007, and ending 5/31/2008

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return
 - Amended return
 - Application pending

C Name of organization
WILLAMETTE UNIVERSITY

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
900 State Street

City or town, state or country, and ZIP + 4
Salem, OR 97301

D Employer identification number
93 0386972

E Telephone number
(503) 370-6985

F Accounting method: Cash Accrual
 Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H and I are not applicable to section 527 organizations.**
- H(a)** Is this a group return for affiliates? Yes No
- H(b)** If "Yes," enter number of affiliates ▶
- H(c)** Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
- H(d)** Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ **www.willamette.edu**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number ▶

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **232,526,092**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:					
	a Contributions to donor advised funds	1a			0	
	b Direct public support (not included on line 1a)	1b			14,537,688	
	c Indirect public support (not included on line 1a)	1c			0	
	d Government contributions (grants) (not included on line 1a)	1d			1,730,842	
	e Total (add lines 1a through 1d) (cash \$ 13,741,465 noncash \$ 2,527,065)					1e 16,268,530
	2 Program service revenue including government fees and contracts (from Part VII, line 93)					2 87,617,714
	3 Membership dues and assessments					3 0
	4 Interest on savings and temporary cash investments					4 785,832
	5 Dividends and interest from securities					5 4,142,546
	6a Gross rents	6a			0	
	b Less: rental expenses	6b			0	
c Net rental income or (loss). Subtract line 6b from line 6a					6c 0	
7 Other investment income (describe ▶)					7 0	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other			
	123,215,197	8a		0		
	b Less: cost or other basis and sales expenses	114,713,507	8b		0	
	c Gain or (loss) (attach schedule) Stmt 1	8,501,690	8c		0	
	d Net gain or (loss). Combine line 8c, columns (A) and (B)					8d 8,501,690
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ 0 of contributions reported on line 1b)	9a			0		
	b Less: direct expenses other than fundraising expenses	9b		0		
	c Net income or (loss) from special events. Subtract line 9b from line 9a					9c 0
10a Gross sales of inventory, less returns and allowances	10a			0		
	b Less: cost of goods sold	10b		0		
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a					10c 0	
11 Other revenue (from Part VII, line 103)					11 496,273	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11					12 117,812,585	
Expenses	13 Program services (from line 44, column (B))				13 106,997,927	
	14 Management and general (from line 44, column (C))				14 2,514,633	
	15 Fundraising (from line 44, column (D))				15 2,856,282	
	16 Payments to affiliates (attach schedule)				16 0	
	17 Total expenses. Add lines 16 and 44, column (A)					17 112,368,842
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12				18 5,443,743	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))				19 377,758,078	
	20 Other changes in net assets or fund balances (attach explanation) Stmt 2				20 -8,935,974	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20					21 374,265,847

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
22b	Other grants and allocations (attach schedule) (cash \$ 30,693,376 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	30,693,376	30,693,376		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	530,000	0	530,000	0
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	0	0	0	0
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	36,915,102	33,928,310	1,091,393	1,895,399
27	Pension plan contributions not included on lines 25a, b, and c	3,300,606	2,990,618	142,918	167,070
28	Employee benefits not included on lines 25a - 27	5,355,369	4,852,400	231,890	271,079
29	Payroll taxes	2,734,346	2,477,540	118,399	138,407
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	92,400	92,400	0	0
32	Legal fees	35,410	0	28,543	6,867
33	Supplies	1,335,544	1,281,779	28,870	24,895
34	Telephone	272,401	248,015	8,289	16,097
35	Postage and shipping	310,473	221,102	18,764	70,607
36	Occupancy	0	0	0	0
37	Equipment rental and maintenance	410,883	403,837	3,886	3,160
38	Printing and publications	858,422	787,969	8,335	62,118
39	Travel	2,312,274	2,037,749	80,789	193,736
40	Conferences, conventions, and meetings	0	0	0	0
41	Interest	2,301,870	2,301,870	0	0
42	Depreciation, depletion, etc. (attach schedule)	4,666,149	4,666,149	0	0 Stmt 4
43	Other expenses not covered above (itemize): See Statement 5	20,244,217	20,014,813	222,557	6,847
a	-----				
b	-----				
c	-----				
d	-----				
e	-----				
f	-----				
g	-----				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	112,368,842	106,997,927	2,514,633	2,856,282

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► Higher education	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a See Statement 6 (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
b (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). ►	106,997,927

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	19,920,280	45	17,424,933
	46 Savings and temporary cash investments	0	46	0
	47a Accounts receivable	47a 2,147,970		
	b Less: allowance for doubtful accounts	47b 368,198	1,555,327	47c 1,779,772
	48a Pledges receivable	48a 15,298,434		
	b Less: allowance for doubtful accounts	48b 299,430	13,038,626	48c 14,999,004
	49 Grants receivable	0	49	0
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)	349,916	50a	0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	50b	0
	51a Other notes and loans receivable (attach schedule) See Statement 7	51a 10,079,549		
	b Less: allowance for doubtful accounts	51b 0	9,551,372	51c 10,079,549
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	1,552,137	53	1,037,188
	54a Investments—publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	281,373,499	54a 285,007,560
	b Investments—other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54b 0
	55a Investments—land, buildings, and equipment: basis	55a 0		
	b Less: accumulated depreciation (attach schedule)	55b 0	0	55c 0
	56 Investments—other (attach schedule) Stmt 8	2,057,151	56	2,228,294
	57a Land, buildings, and equipment: basis	57a 186,206,664		
b Less: accumulated depreciation (attach schedule) Stmt 9	57b 62,986,082	112,020,214	57c 123,220,582	
58 Other assets, including program-related investments (describe ▶)	0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58	441,418,522	59	455,776,882	
Liabilities	60 Accounts payable and accrued expenses	11,774,701	60	14,106,867
	61 Grants payable	0	61	0
	62 Deferred revenue	1,538,665	62	1,774,967
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64a Tax-exempt bond liabilities (attach schedule) See Statement 10	27,276,333	64a	50,321,469
	b Mortgages and other notes payable (attach schedule) Stmt 11	7,872,212	64b	209,228
	65 Other liabilities (describe ▶ See Statement 12)	15,198,533	65	15,098,504
66 Total liabilities. Add lines 60 through 65	63,660,444	66	81,511,035	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	197,423,171	67	44,555,425
	68 Temporarily restricted	67,848,868	68	208,481,757
	69 Permanently restricted	112,486,039	69	121,228,665
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	377,758,078	73	374,265,847
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	441,418,522	74	455,776,882

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		✓
	b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b _____		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
	b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b _____		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	c Dues, assessments, and similar amounts from members		
	85c _____		
	d Section 162(e) lobbying and political expenditures		
	85d _____		
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e _____		
	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f _____		
	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	85g _____		
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	85h _____		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
	86a _____		
	b Gross receipts, included on line 12, for public use of club facilities		
	86b _____		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
	87a _____		
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	87b _____		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		✓
	b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ _____ 0 ; section 4912 ▶ _____ 0 ; section 4955 ▶ _____ 0		
	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		✓
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
	e <i>All organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		✓
	f <i>All organizations.</i> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		✓
	g <i>For supporting organizations and sponsoring organizations maintaining donor advised funds.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
	89g _____		
90a	List the states with which a copy of this return is filed ▶ OR		
	b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b _____	1566
91a	The books are in care of ▶ Robert N Olson Telephone no. ▶ 503-370-6985		
	Located at ▶ 900 State Street, Salem, OR ZIP + 4 ▶ 97301		
	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	No
	If "Yes," enter the name of the foreign country ▶ See Statement 16	✓	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	91b _____		

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** |

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Tuition and fees					74,997,409
b Room and board					9,981,221
c Auxiliary income					2,639,084
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	785,832	
96 Dividends and interest from securities			14	4,142,546	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	8,501,690	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Other income			03	1,141,083	
b Adjustment related to trusts and annuities			36	-644,810	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		13,926,341	87,617,714
105 Total (add line 104, columns (B), (D), and (E))					101,544,055

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 17

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a				
b				
c				
Totals					

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a				
b				
c				
Totals					

108 Did the organization have a binding written contract in effect on August 17, 2007, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here

Signature of officer: _____ Date: _____

Robert Olson, VP Financial Affairs
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ EIN: _____

Preparer's SSN or PTIN (See Gen. Inst. X): _____ Phone no.: _____



SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2007

Name of the organization WILLAMETTE UNIVERSITY	Employer identification number 93 0386972
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Symeon Symeonides 900 State Street, Salem, OR 97301, US	Dean of Law School 40	270,000	42,680	8,400
Debra Ringold 900 State Street, Salem, OR 97301, US	Dean Atkinson School 4	200,000	37,930	0
Ron Korvas 900 State Street, Salem, OR 97301, US	Vice President 40	195,500	37,350	0
Peter Letsou 900 State Street, Salem, OR 97301, US	Prof. College of Law 40	193,880	37,150	0
Carol Long 900 State Street, Salem, OR 97301, US	Dean Col Lib Arts 40	181,000	35,410	0
Total number of other employees paid over \$50,000 ▶	273			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
KPMG LLC PO Box 120001, Dallas, TX 75312-0771, US	Audit	92,400
Zimmer Gunsul Frasca 320 SW Oak, Portland, OR 97204, US	Architects	65,229
.....		
.....		
.....		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
LCG Pence LLC 2747 Pence Loop SE, Salem, OR 97302, US	Building contractor	1,192,346
Nifelle Design 1125 SE 55th Avenue, Portland, OR 97215, US	Interior designers	88,005
White Glove Building Maintenance PO Box 3108, Salem, OR 97302, US	Building maintenance	60,318
SNL Design 2451 Crestmont Circles, Salem, OR 97302, US	Interior designers	50,719
.....		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III **Statements About Activities** (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>0</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	✓
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	✓
b Lending of money or other extension of credit?	2b	✓
c Furnishing of goods, services, or facilities?	2c	✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	✓
e Transfer of any part of its income or assets?	2e	✓
See Form 990, Pt. V		
3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	✓
b Did the organization have a section 403(b) annuity plan for its employees?	3b	✓
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	✓
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	✓
4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	✓
b Did the organization make any taxable distributions under section 4966?	4b	✓
c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	✓
d Enter the total number of donor advised funds owned at the end of the tax year ▶		
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶		0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: **(1) more than 33½%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33½%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) .					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose . .					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 .					
19 Net income from unrelated business activities not included in line 18.					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶					27c
d Add: Line 27a total _____ and line 27b total _____ ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . ▶ 27f					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	✓	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	✓	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) See Statement 19	✓	

32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	✓	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	✓	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	✓	
d Copies of all material used by the organization or on its behalf to solicit contributions?	✓	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		

33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		✓
b Admissions policies?		✓
c Employment of faculty or administrative staff?		✓
d Scholarships or other financial assistance?		✓
e Educational policies?		✓
f Use of facilities?		✓
g Athletic programs?		✓
h Other extracurricular activities?		✓
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		

34a Does the organization receive any financial aid or assistance from a governmental agency?	✓	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. Stmnt 20		✓
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	✓	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is— The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40	} 41	
	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		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

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 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Statement 1

Form: 990

Page: 1

Part: I

Question: 8

WILLAMETTE UNIVERSITY

93-0386972

Sales of Assets Other than Inventory

Publicly Traded Securities

Description:

Sold To:

Sales Price:	\$123,215,197.00	Date Sold:
Expense of Sale:	\$1,182,633.00	Date acquired:
Cost or value when acquired:	\$113,530,874.00	How acquired:
Depreciation since acquisition:	\$0.00	
Net Sale:	\$8,501,690.00	

Statement 2

Form: 990

Page: 1

Part: I

Question: 20

WILLAMETTE UNIVERSITY

93-0386972

Other changes in Net Assets or Fund Balances

Explanation	Amount
Unrealized net losses	-\$8,935,974.00
Total:	-\$8,935,974.00

Statement 3

Form: 990

Page: 2

Part: II

Question: 22b

WILLAMETTE UNIVERSITY

93-0386972

Grants and Allocations

Classification Scholarships Various students
Date:
Type: Cash **Address:** 900 State Street
Grant Amt \$30,693,376.00 Salem, OR 97301-3930
United States

Purp of payment to affiliate
Relationship: Student
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Total Grants: **\$30,693,376.00**

Statement 4

Form: 990

Page: 2

Part: II

Question: 42

WILLAMETTE UNIVERSITY**93-0386972****Depreciation and Depletion**

Asset	Current Deprec.
University depreciation	\$4,666,149.00
Total	\$4,666,149.00

Statement 5

Form: 990

Page: 2

Part: II

Question: 43

WILLAMETTE UNIVERSITY**93-0386972****Attachment listing other expenses for Part II**

Description	Total:	Pgm Services	Mgt and General	Fundrasing
Designated and restricted expenses	\$5,367,295.00	\$5,367,295.00	\$0.00	\$0.00
Programming	\$2,816,101.00	\$2,765,420.00	\$50,681.00	\$0.00
Food service	\$2,621,183.00	\$2,621,183.00	\$0.00	\$0.00
Utilities	\$2,484,718.00	\$2,484,718.00	\$0.00	\$0.00
Bookstore	\$1,460,442.00	\$1,460,442.00	\$0.00	\$0.00
Special programs	\$1,429,553.00	\$1,315,596.00	\$113,957.00	\$0.00
Study abroad programs	\$1,290,916.00	\$1,290,916.00	\$0.00	\$0.00
Property insurance	\$678,818.00	\$678,818.00	\$0.00	\$0.00
Athletic teams	\$570,667.00	\$570,667.00	\$0.00	\$0.00
Contracted Services	\$500,726.00	\$453,089.00	\$47,637.00	\$0.00
Books, equip and furniture	\$419,012.00	\$409,817.00	\$2,348.00	\$6,847.00
Leases	\$352,613.00	\$344,679.00	\$7,934.00	\$0.00
Software and computer licenses	\$252,173.00	\$252,173.00	\$0.00	\$0.00
Total:	\$20,244,217.00	\$20,014,813.00	\$222,557.00	\$6,847.00

Statement 6

Form: 990

Page: 3

Part: III

Question:

WILLAMETTE UNIVERSITY**93-0386972****Program Services**

Achievement	Pgm. Svc. Exp.
Higher Education: Research for faculty and students. (2325 students)	\$1,308,360.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Higher Education: Student Services: Includes the offices of Financial Aid, Registrar, Counseling, Health Center and Athletics. (2325 students)	\$9,085,191.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Higher Education: Financial aid is offered for need and merit purposes. (2325 students)	\$30,693,376.00
Grants and Allocations: \$30,693,376.00 This amount includes foreign grants: No	
Higher Education: Academic Support: Libraries at the College of Liberal Arts and the Law School. Also includes academic computer services, as well as the Deans offices. (2325 students)	\$14,081,467.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Higher Education: General Institutional Support - These offices include the campus safety, mail center, purchasing, copy center and various other campus support offices. (2325 students)	\$5,186,525.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Higher Education: Auxiliary functions - Includes room and board (for 1350 students), bookstore, and summer conferences. (2325 students)	\$12,039,518.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Higher Education: Instruction: 1749 students in CLA, 380 students in Law, 117 in MBA programs and 79 in MAT. (2325 students)	\$34,603,490.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Total:	\$106,997,927.00

Statement 7

Form: 990

Page: 4

Part: IV

Question: 51

WILLAMETTE UNIVERSITY

93-0386972

Schedule of Other Notes and Loans Receivable

Borrower's Name: Notes receivables and other assets

Borrower's Title:

Original Amount: \$1,610,902.00

Balance Due: \$1,610,902.00

Date of Note:

Maturity Date:

Repayment Terms:

Interest Rate:

Security Provided by Borrower:

Purpose of Loan:

Description of Consideration:

FMV of Consideration:

Relationship of Borrower/Lender:

Borrower's Name: Student loan receivables

Borrower's Title:

Original Amount: \$8,468,647.00

Balance Due: \$8,468,647.00

Date of Note:

Maturity Date:

Repayment Terms:

Interest Rate:

Security Provided by Borrower:

Purpose of Loan:

Description of Consideration:

FMV of Consideration:

Relationship of Borrower/Lender:

Total Due: \$10,079,549.00

Statement 8

Form: 990

Page: 4

Part: IV

Question: 56

WILLAMETTE UNIVERSITY

93-0386972

Other Investments

Investment	Valuation Type	Amount
Remainder trusts held by others	Cost	\$2,228,294.00
Total:		\$2,228,294.00

Statement 9

Form: 990

Page: 4

Part: IV

Question: 57

WILLAMETTE UNIVERSITY

93-0386972

Schedule of Land, Buildings and Equipment

Description	Cost	Depreciation	Book Value
Plant facilities	\$186,206,664.00	\$62,986,082.00	\$123,220,582.00
Total:	\$186,206,664.00	\$62,986,082.00	\$123,220,582.00

Statement 10

Form: 990

Page: 4

Part: IV

Question: 64a

WILLAMETTE UNIVERSITY**93-0386972****Tax Exempt Bond Liabilities**

Purpose:	New residential commons and other facility upgrades	
Issue Date:	08/01/2005	
Original Amount:	\$13,558,973.00	
Amount of issue outstanding:	\$13,208,078.00	
Unexpended Proceeds:	\$0.00	
Facility used by 3rd Party:	No	
Percent used by 3rd Party:		
Obligation is a Mortgage:	No	
Maturity Date:		
Repayment Terms:		
Interest Rate:		
Security Provided by Borrower:		
Contingent Liability:	No	<i>If 'Yes', this record will not be included in the total returned to the Form 990:</i>

Purpose:	Refund outstanding bonds and addl projects	
Issue Date:	06/16/2004	
Original Amount:	\$15,235,692.00	
Amount of issue outstanding:	\$4,973,519.00	
Unexpended Proceeds:	\$0.00	
Facility used by 3rd Party:	No	
Percent used by 3rd Party:		
Obligation is a Mortgage:	No	
Maturity Date:		
Repayment Terms:		
Interest Rate:		
Security Provided by Borrower:		
Contingent Liability:	No	<i>If 'Yes', this record will not be included in the total returned to the Form 990:</i>

Purpose:	New academic building, building renovations and property acquisitions	
Issue Date:	06/15/2007	
Original Amount:	\$32,409,522.00	
Amount of issue outstanding:	\$32,139,872.00	
Unexpended Proceeds:	\$0.00	
Facility used by 3rd Party:	No	
Percent used by 3rd Party:		
Obligation is a Mortgage:	No	
Maturity Date:		
Repayment Terms:		
Interest Rate:		
Security Provided by Borrower:		
Contingent Liability:	No	<i>If 'Yes', this record will not be included in the total returned to the Form 990:</i>

Total Due:	\$50,321,469.00
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Statement 11

Form: 990

Page: 4

Part: IV

Question: 64b

WILLAMETTE UNIVERSITY**93-0386972****Mortgages and Other Notes Payable**

Type:	Non-Mortgage
Lender's Name:	Mahoney and DeLynn
Original Amount:	\$295,269.00
Balance Due:	\$209,228.00
Date of Note:	10/04/2004
Maturity Date:	10/01/2012
Repayment Terms:	Monthly
Interest Rate:	6
Security Provided by Borrower:	property
Purpose of Loan:	purchase property
Description of Consideration:	property
FMV of Consideration:	\$0.00
Relationship:	none

Total Due:	\$209,228.00
-------------------	---------------------

Statement 12

Form: 990

Page: 4

Part: IV

Question: 65

WILLAMETTE UNIVERSITY

93-0386972

Other Liabilities

Liability Description	BOY Amount	EOY Amount
US Govt loan advances, refundable	\$6,635,885.00	\$6,724,557.00
Annuity and trusts payable	\$8,562,648.00	\$8,373,947.00
Total:	\$15,198,533.00	\$15,098,504.00

Statement 13

Form: 990

Page: 5

Part: IV-A

Question: d(2)

WILLAMETTE UNIVERSITY

93-0386972

Revenue Audit Line d(2)

Description	Amount
Student financial aid	\$30,693,376.00
Total:	\$30,693,376.00

Statement 14

Form: 990

Page: 5

Part: IV-B

Question: d(2)

WILLAMETTE UNIVERSITY

93-0386972

Expense Audit Line d(2)

Description	Amount
Student financial aid	\$30,693,376.00
Total:	\$30,693,376.00

Statement 15

Form: 990

Page: 5

Part: V

Question:

WILLAMETTE UNIVERSITY**93-0386972****Officers, Directors, Trustees, and Key Employees**

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
M Lee Pelton Title: President Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States	40	\$316,500.00	\$390,090.00	\$67,695.00
Jeffrey G Eisenbarth Title: Treasurer Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States	40	\$213,500.00	\$39,710.00	\$0.00
Alex Mandl Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States	0	\$0.00	\$0.00	\$0.00
Dale Hermann Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States	0	\$0.00	\$0.00	\$0.00
Donald Brown Title: Vice Chairman Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States	0	\$0.00	\$0.00	\$0.00
Eric FriedenwaldFishman Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States	0	\$0.00	\$0.00	\$0.00

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Guy Stephenson	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Heather Dempsey	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
James Albaugh	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
James Fitzhenry	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
John Wittmayer	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Jonathan Carder	0	\$0.00	\$0.00	\$0.00
Title: Secretary Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Julie Branford	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Country: United States				
Katherine Conolly	0	\$0.00	\$0.00	\$0.00
Title: Board Member				
Addr 1: 900 State Street				
Addr 2:				
CSZ: Salem, OR 97301				
Country: United States				
Kerry Tymchuk	0	\$0.00	\$0.00	\$0.00
Title: Assistant Secretary				
Addr 1: 900 State Street				
Addr 2:				
CSZ: Salem, OR 97301				
Country: United States				
Lila Schmidt	0	\$0.00	\$0.00	\$0.00
Title: Board Member				
Addr 1: 900 State Street				
Addr 2:				
CSZ: Salem, OR 97301				
Country: United States				
Margaret Moreland	0	\$0.00	\$0.00	\$0.00
Title: Board Member				
Addr 1: 900 State Street				
Addr 2:				
CSZ: Salem, OR 97301				
Country: United States				
Mark Teppola	0	\$0.00	\$0.00	\$0.00
Title: Board Member				
Addr 1: 900 State Street				
Addr 2:				
CSZ: Salem, OR 97301				
Country: United States				
Mary Hughes	0	\$0.00	\$0.00	\$0.00
Title: Board Member				
Addr 1: 900 State Street				
Addr 2:				
CSZ: Salem, OR 97301				
Country: United States				
Melvin HendersonRubio	0	\$0.00	\$0.00	\$0.00
Title: Board Member				
Addr 1: 900 State Street				
Addr 2:				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
CSZ: Salem, OR 97301 Country: United States				
Patricia Smullin	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State St Addr 2: CSZ: Salem, OR 97301 Country: United States				
Paul DeMuniz	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Peter Kremer	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Punit Renjen	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Robert Hoshibata	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Robert Nunn	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Robert Packard	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Addr 2: CSZ: Salem, OR 97301 Country: United States				
Roderick Wendt	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Steven Wynne	0	\$0.00	\$0.00	\$0.00
Title: Chairman Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Stewart Butler	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Stuart Hall	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Susan Hammer	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
A Brian Gard	0	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
Bradley King	0	\$0.00	\$0.00	\$0.00
Title: Board Member				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Addr 1: 900 State Street Addr 2: CSZ: Salem, OR 97301 Country: United States				
TOTALS		\$530,000.00	\$429,800.00	\$67,695.00

Statement 16

Form: 990

Page: 7

Part: VI

Question: 91b

WILLAMETTE UNIVERSITY

93-0386972

Foreign Accounts

Foreign Account List

United Kingdom (England, N. Ireland, Scotland, and Wales)

Statement 17

Form: 990

Page: 8

Part: VIII

Question:

WILLAMETTE UNIVERSITY

93-0386972

Relationship of Activities

Line No Relationship of Activities to the Accomplishment of Exempt Purposes

93 c Auxiliary income

93 b Room and board for students in higher education

93 a Tuition and fees for higher education

Statement 18
Form: Schedule A
Page: 2
Part: III
Question: 3a

WILLAMETTE UNIVERSITY
93-0386972

Explanation of Grant Determination

Explanation of grant qualifications

The University awards scholarships based upon superior academic achievement and financial need.

Statement 19
Form: Schedule A
Page: 5
Part: V
Question: 31

WILLAMETTE UNIVERSITY
93-0386972

Publicize Racially Nondiscriminatory Policy

Explanation/Description

The University publicizes this information in the Oregonian newspaper and in student catalogs.

Statement 20
Form: Schedule A
Page: 5
Part: V
Question: 34

WILLAMETTE UNIVERSITY
93-0386972

Financial Assistance

Explanation

The University receives Title IV funds for financial aid purposes, as well as occasional federal and state grants for faculty research and programming purposes.