

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Indiana University Foundation Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. Box 500 City or town, state or province, country, and ZIP or foreign postal code Bloomington, IN 47402 F Name and address of principal officer: Daniel Smith same as C above	D Employer identification number 35-6018940 E Telephone number 812-855-8311 G Gross receipts \$ 2,354,975,514. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ www.iuFoundation.iu.edu		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1936 M State of legal domicile: IN

Part I Summary

1	Briefly describe the organization's mission or most significant activities: <u>To maximize philanthropic support for Indiana University</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	589
	6 Total number of volunteers (estimate if necessary)	6	3500
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-1,184,620.
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	-1,184,620.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		134,762,439.	192,667,048.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		24,444,824.	26,197,314.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		123,703,434.	75,518,682.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,683,746.	8,205,835.
12		294,594,443.	302,588,879.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	151,053,694.	135,185,047.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	22,142,711.	23,179,233.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 24,696,379.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	35,279,894.	49,561,516.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	208,476,299.	207,925,796.
19 Revenue less expenses. Subtract line 18 from line 12	86,118,144.	94,663,083.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	2,625,026,845.	2,601,155,584.
	22 Net assets or fund balances. Subtract line 21 from line 20	439,050,545.	475,908,049.
22	2,185,976,300.	2,125,247,535.	

Part II Signature Block

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

Sign Here	Signature of officer 	Date 5-1-17	
	Daniel Smith, President & CEO Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Zack Fortsch	Preparer's signature 	Date 4-28-17
	Firm's name ▶ RSM US LLP Firm's address ▶ 1 S. Wacker Drive, Ste 800 Chicago, IL 60606	Check if self-employed <input type="checkbox"/> PTIN P00052725	Firm's EIN ▶ 42-0714325 Phone no. 312-634-3400

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: The Indiana University Foundation maximizes private support for Indiana University by fostering lifelong relationships with key stakeholders and providing advancement leadership and fundraising services for campuses and units across the university.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 43,521,085. including grants of \$ 43,521,085.) (Revenue \$ 4,745,892.) Student Scholarship and Financial Aid support - Indiana University (IU) undergraduate and graduate students received more than \$43.5 million in scholarships, fellowships, loans and awards from private gift support. Students received scholarship support across all programs and units of the University. With the University seeing record enrollment numbers, private gift support is critical to ensuring that all willing students are able to explore their educational opportunities, experience college life, and efficiently manage tuition costs and debt loads. In 2016, approximately 10,000 scholarships supporting IU students were funded by private gift support. (See Schedule O; page 59 for additional discussion)

4b (Code:) (Expenses \$ 36,991,688. including grants of \$ 36,991,688.) (Revenue \$ 4,033,874.) Faculty Support and Research - With nearly \$37 million from the IU Foundation, University faculty and staff received additional support allowing for increased research opportunities and improved classroom experiences for all students. Private gift support helps meet the University's goal to attract and retain world-class faculty, which ultimately attracts the best and brightest students. During 2016, the number of endowed faculty positions (chairs, professorships and fellowships) increased to more than 560.

4c (Code:) (Expenses \$ 30,929,250. including grants of \$ 30,929,250.) (Revenue \$ 3,372,777.) Academic & Student Program Support - The IU Foundation provided nearly \$31 million to the University to support academic & student programs. These funds enable dedicated students to develop skills and knowledge for growth and success by offering high-quality, responsive academic and student programs by employing best practices in teaching and learning; adding to the accumulated body of knowledge and creative work; enriching the community through cultural leadership and providing resources for problem solving.

4d Other program services (Describe in Schedule O.) (Expenses \$ 43,910,848. including grants of \$ 23,743,024.) (Revenue \$ 21,448,869.)

4e Total program service expenses 155,352,871.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows 1-19 detailing various organizational requirements and their completion status.

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O check

Main table with columns for question numbers (1a-14b), descriptions, and Yes/No columns. Includes sub-questions for various IRS forms and reporting requirements.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AK, CA, CO, DC, KY, MA, MD, ME, MI, MN, NH, NJ
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: Catherine L. Melvin - 812-855-8311 P.O. Box 500, Bloomington, IN 47402

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Michael McRobbie Board Chair, IUF Board Director	0.00	X		X				0.	0.	0.
Kathryn E. Booth IUF Board Director	0.00	X						0.	0.	0.
Clarence H. Doninger IUF Board Director	0.00	X						0.	0.	0.
David G. Elmore IUF Board Director	0.00	X						0.	0.	0.
Ann S. Harrison IUF Board Director	0.00	X						0.	0.	0.
Steven H. Henke IUF Board Director	0.00	X						0.	0.	0.
V. William Hunt IUF Board Director	0.00	X						0.	0.	0.
David H. Jacobs, Jr. IUF Board Director	0.00	X						0.	0.	0.
Dale Ellen Leff IUF Board Director	0.00	X						0.	0.	0.
Jane H. Martin IUF Board Director	0.00	X						0.	0.	0.
Randall C. Morgan, Jr. IUF Board Director	0.00	X						0.	0.	0.
Norman E. Pfau, Jr. IUF Board Director	0.00	X						0.	0.	0.
Lynn E. Reichle IUF Board Director	0.00	X						0.	0.	0.
Thomas D. Rush IUF Board Director	0.00	X						0.	0.	0.
Scott C. Schurz IUF Board Director	0.00	X						0.	0.	0.
Richard C. Searles IUF Board Director	0.00	X						0.	0.	0.
Patrick A. Shoulders IUF Board Director	0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Cynthia Simon Skjodt IUF Board Director	0.00	X						0.	0.	0.
Julie Inskeep IUF Board Director	0.00	X						0.	0.	0.
Stephen A. Stitle IUF Board Director	0.00	X						0.	0.	0.
Gregg T. Summerville IUF Board Director	0.00	X						0.	0.	0.
W. Michael Wells IUF Board Director	0.00	X						0.	0.	0.
Desmond C. Wong IUF Board Director	0.00	X						0.	0.	0.
S. Sue Aramian IUF Board Director	0.00	X						0.	0.	0.
Bill C. Brown IUF Board Director	0.00	X						0.	0.	0.
Gayle K. Cook IUF Board Director	0.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								5,531,663.	0.	1,520,097.
d Total (add lines 1b and 1c)								5,531,663.	0.	1,520,097.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 37

	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>		X
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>	X	
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 "Yes," complete Schedule J for such person</i>		X

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
Cambridge Associates PO Box 83232, Chicago, IL 60691	Investment Consultant	625,000.
Champlain Investment Partners 180 Battery Street, Burlington, VT 05401	Investment Manager	608,569.
Snyder Capital Management 101 Mission Street, San Francisco, CA 94105	Investment Manager	557,833.
Templeton Investment Counsel Drawer CS 198414, Atlanta, GA 30384	Investment Manager	492,687.
Cramer Rosenthal McGlynn, LLC 75 Remittance Drive, Chicago, IL 60675	Investment Manager	443,436.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 17

See Part VII, Section A Continuation sheets

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Ellen C. Gignilliat IUF Board Director	0.00	X						0.	0.	0.
Alan B. Gilman IUF Board Director	0.00	X						0.	0.	0.
P.A. Mack, Jr. IUF Board Director	0.00	X						0.	0.	0.
Robert H. McKinney IUF Board Director	0.00	X						0.	0.	0.
Joseph T. Morrow IUF Board Director	0.00	X						0.	0.	0.
John D. Peterson, Jr. IUF Board Director	0.00	X						0.	0.	0.
Harry L. Gonso IUF Board Director	0.00	X						0.	0.	0.
James T. Morris IUF Board Director	0.00	X						0.	0.	0.
Sandra E. Laney IUF Board Director	0.00	X						0.	0.	0.
Gary J. Anderson IUF Board Director	0.00	X						0.	0.	0.
Lacy M. Johnson IUF Board Director	0.00	X						0.	0.	0.
Michael D. Shumate IUF Board Director	0.00	X						0.	0.	0.
Randall L. Tobias IUF Board Director	0.00	X						0.	0.	0.
William Buckner IUF Board Director	0.00	X						0.	0.	0.
Jeffrey Fettig IUF Board Director	0.00	X						0.	0.	0.
Alan Graf, Jr. IUF Board Director	0.00	X						0.	0.	0.
Kathleen Ligocki IUF Board Director	0.00	X						0.	0.	0.
Rose Mays IUF Board Director	0.00	X						0.	0.	0.
Glen Scolnik IUF Board Director	0.00	X						0.	0.	0.
Randolph Seger IUF Board Director	0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Margaret Watanabe IUF Board Director	0.00	X						0.	0.	0.
Robert Zerbe IUF Board Director	0.00	X						0.	0.	0.
Jane M. Jorgensen IUF Board Director	0.00	X						0.	0.	0.
J. Robert Quigg, III IUF Board Director	0.00	X						0.	0.	0.
Richard L. Johnson, Jr. IUF Board Director	0.00	X						0.	0.	0.
Louis G. Jordan IUF Board Director	0.00	X						0.	0.	0.
MaryEllen Bishop IUF Board Director	0.00	X						0.	0.	0.
Alisa Hendrix IUF Board Director	0.00	X						0.	0.	0.
Richard E. Woosnam IUF Board Director	0.00	X						0.	0.	0.
James R. Hodge Treasurer	0.00	X		X				0.	0.	0.
Milton R. Stewart Vice Chairman	0.00	X		X				0.	0.	0.
Daniel C. Smith President & CEO	40.00	X		X				431,331.	0.	102,281.
Steven A. Martin Assistant Corp Secretary	0.00			X				0.	0.	0.
Richard Dupree Executive VP for Development	40.00			X				308,696.	0.	84,372.
Jeffrey D. Stumpf Exec VP for Fin & Oper & Asst Corp S	40.00			X				264,493.	0.	76,938.
Gary Stratten Executive VP & CIO	40.00			X				477,077.	0.	87,379.
Philippa Guthrie Exec. VP, Gen. Counsel & Corp Sec.	40.00			X				227,976.	0.	81,745.
Laurie Burns McRobbie Senior Advisor, IUF	40.00				X			160,556.	0.	46,667.
Sheila Decker Associate VP, Administration	40.00				X			189,029.	0.	66,881.
Gina M. Reel Associate VP, Finance	40.00				X			151,677.	0.	41,966.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	4,000.			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	192,663,048.			
	g Noncash contributions included in lines 1a-1f: \$		14,003,631.			
	h Total. Add lines 1a-1f		192,667,048.			
	Program Service Revenue	2 a Management Fees	Business Code 900099	18,859,737.	18,859,737.	
b Dev Service Fee		900099	4,923,219.	4,923,219.		
c Telefund Service Fee		900099	374,546.	374,546.		
d						
e						
f All other program service revenue		900099	2,039,812.	1,894,827.	144,985.	
g Total. Add lines 2a-2f			26,197,314.			
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		14,130,826.		14,130,826.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		1,409,473.		1,409,473.	
	6 a Gross rents	(i) Real	5,118,106.			
		(ii) Personal				
		b Less: rental expenses		2,277,003.		
		c Rental income or (loss)		2,841,103.		
	d Net rental income or (loss)		2,841,103.	2,841,103.		
	7 a Gross amount from sales of assets other than inventory	(i) Securities	2111232927.			
		(ii) Other		43,500.		
		b Less: cost or other basis and sales expenses		2049837348.	51,223.	
		c Gain or (loss)		61,395,579.	-7,723.	
	d Net gain or (loss)		61,387,856.	-7,723.	61,395,579.	
	8 a Gross income from fundraising events (not including \$ 4,000. of contributions reported on line 1c). See Part IV, line 18	a		645,237.		
		b Less: direct expenses		221,061.		
c Net income or (loss) from fundraising events			424,176.		424,176.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a Income/Loss from K-1's		525990	-1,184,620.	-1,184,620.		
	b					
	c					
	d All other revenue	900099	4,715,703.	4,715,703.		
e Total. Add lines 11a-11d		3,531,083.				
12 Total revenue. See instructions.		302,588,879.	33,601,412.	-1,184,620.	77,505,039.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	134,438,027.	134,438,027.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	21,470.	21,470.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	725,550.	725,550.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	6,086,392.		3,227,281.	2,859,111.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	18,922.		10,033.	8,889.
7 Other salaries and wages	10,897,668.		5,778,437.	5,119,231.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,987,341.		1,053,778.	933,563.
9 Other employee benefits	2,939,943.		1,558,891.	1,381,052.
10 Payroll taxes	1,248,967.		662,259.	586,708.
11 Fees for services (non-employees):				
a Management				
b Legal	85,377.		45,271.	40,106.
c Accounting	405,746.		215,145.	190,601.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	20,167,824.	20,167,824.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,514,934.		803,287.	711,647.
12 Advertising and promotion	235,414.		124,827.	110,587.
13 Office expenses	2,317,337.		1,228,758.	1,088,579.
14 Information technology	1,768,695.		937,842.	830,853.
15 Royalties				
16 Occupancy	1,946,235.		1,031,982.	914,253.
17 Travel	2,397,936.		1,271,494.	1,126,442.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	530,737.		281,421.	249,316.
20 Interest	186,582.		98,934.	87,648.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	372,422.		197,475.	174,947.
23 Insurance	736,108.		390,318.	345,790.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Pledge write offs	15,297,820.		8,111,597.	7,186,223.
b				
c				
d				
e All other expenses	1,598,349.		847,516.	750,833.
25 Total functional expenses. Add lines 1 through 24e	207,925,796.	155,352,871.	27,876,546.	24,696,379.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	182,412,222.	2	164,296,662.
	3 Pledges and grants receivable, net	154,818,658.	3	196,357,812.
	4 Accounts receivable, net	52,798,836.	4	96,606,303.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	659,691.	7	629,878.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 94,141,180.		
	b Less: accumulated depreciation	10b 25,419,399.	65,146,031.	10c 68,721,781.
	11 Investments - publicly traded securities	1,137,542,184.	11	1,146,648,696.
	12 Investments - other securities. See Part IV, line 11	1,031,649,223.	12	927,894,452.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,625,026,845.	16	2,601,155,584.	
Liabilities	17 Accounts payable and accrued expenses	37,197,886.	17	5,908,852.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	52,983.	23	549,632.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	401,799,676.	25	469,449,565.
	26 Total liabilities. Add lines 17 through 25	439,050,545.	26	475,908,049.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	54,613,900.	27	50,761,539.
	28 Temporarily restricted net assets	839,191,451.	28	831,736,474.
	29 Permanently restricted net assets	1,292,170,949.	29	1,242,749,522.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,185,976,300.	33	2,125,247,535.
34 Total liabilities and net assets/fund balances	2,625,026,845.	34	2,601,155,584.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	302,588,879.
2	Total expenses (must equal Part IX, column (A), line 25)	2	207,925,796.
3	Revenue less expenses. Subtract line 2 from line 1	3	94,663,083.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,185,976,300.
5	Net unrealized gains (losses) on investments	5	-153,875,134.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,516,714.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,125,247,535.

Part XII Financial Statements and Reporting

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

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

Form 990 (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization <p style="text-align:center">Indiana University Foundation</p>	Employer identification number <p style="text-align:center">35-6018940</p>
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	123,927,952.	128,889,858.	151,457,232.	134,762,439.	192,667,048.	731,704,529.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	123,927,952.	128,889,858.	151,457,232.	134,762,439.	192,667,048.	731,704,529.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						17,886,637.
6 Public support. Subtract line 5 from line 4.						713,817,892.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	123,927,952.	128,889,858.	151,457,232.	134,762,439.	192,667,048.	731,704,529.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	16,868,398.	15,543,579.	15,823,500.	14,090,479.	20,658,405.	82,984,361.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	3,573,688.	4,239,217.	5,028,159.	7,824,850.	4,715,703.	25,381,617.
11 Total support. Add lines 7 through 10						840,070,507.
12 Gross receipts from related activities, etc. (see instructions)					12	119,814,176.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	84.97 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	83.83 %
16a 33 1/3% support test - 2015. 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	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2015

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Name of the organization

Indiana University Foundation

Employer identification number

35-6018940

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization Indiana University Foundation	Employer identification number 35-6018940
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 5,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 11,385,580.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 7,840,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 4,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Indiana University Foundation	Employer identification number 35-6018940
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization Indiana University Foundation	Employer identification number 35-6018940
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization Indiana University Foundation **Employer identification number** 35-6018940

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a 1
b Total acreage restricted by conservation easements	2b 0.00
c Number of conservation easements on a certified historic structure included in (a)	2c 1
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d 1

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 10

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 0.

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

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

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

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

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

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

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

	Amount
c 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 Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,862,189,406.	1,823,484,366.	1,582,805,651.	1,417,184,598.	1,440,185,795.
b Contributions	86,651,476.	86,270,343.	95,292,491.	92,831,098.	79,964,190.
c Net investment earnings, gains, and losses	-98,475,896.	33,040,312.	233,535,693.	142,945,921.	-29,939,636.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	-85,861,188.	-80,605,615.	-88,149,469.	-70,155,966.	-73,025,751.
g End of year balance	1,764,503,798.	1,862,189,406.	1,823,484,366.	1,582,805,651.	1,417,184,598.

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

- a Board designated or quasi-endowment 1.60 %
- b Permanent endowment 63.90 %
- c Temporarily restricted endowment 34.50 %

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

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

- (i) unrelated organizations
- (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	24,821,821.	18,227,458.		43,049,279.
b Buildings		45,341,997.	21,148,945.	24,193,052.
c Leasehold improvements				
d Equipment		2,952,887.	2,196,333.	756,554.
e Other		2,797,017.	2,074,121.	722,896.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				68,721,781.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) Institutional Funds, Cash and Equiv &		
(B) Commercial Paper	29,506,146.	End-of-Year Market Value
(C) Private Equity	898,388,306.	End-of-Year Market Value
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	927,894,452.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Accumulated Trust Liability	33,172,208.
(3) Collateral Under Securities Lending Agreement	99,082,525.
(4) Due to Indiana University	209,925,290.
(5) Assets Held for University Affiliates	38,194,336.
(6) Due to Brokers	89,075,206.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	469,449,565.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	129,527,271.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-153,875,134.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-203,270.
e	Add lines 2a through 2d	2e	-154,078,404.
3	Subtract line 2e from line 1	3	283,605,675.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	18,983,204.
c	Add lines 4a and 4b	4c	18,983,204.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	302,588,879.

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

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

1	Total expenses and losses per audited financial statements	1	190,256,036.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	2,498,064.
e	Add lines 2a through 2d	2e	2,498,064.
3	Subtract line 2e from line 1	3	187,757,972.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	20,167,824.
c	Add lines 4a and 4b	4c	20,167,824.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	207,925,796.

Part XIII Supplemental Information.

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

Part II, line 9:

IUF reports its conservation easement on the income statement consistent with treatment for ordinary revenues and expenses on the financial statements. The building with the historical easement is being reported on the balance sheet at cost and is being depreciated over the life of the building.

Part V, line 4:

The intended uses of the organization's endowment funds are to support Indiana University as it carries out its missions of teaching, research and public service.

Part XIII Supplemental Information (continued)

Part X, Line 2:

Accounting Standards Codification (ASC) 740-10, Accounting for Uncertainty

in Income Taxes, prescribes a comprehensive model for how an organization

should measure, recognize, present, and disclose in its financial

statements uncertain tax positions that an organization has taken or

expects to take on a tax return. The Foundation is subject to routine

audits by taxing jurisdictions; however, there are currently no audits

for any tax periods in progress. The Foundation believes it is no longer

subject to income examinations for years prior to 2013. As of June 30,

2016 and 2015, the Foundation has no uncertain tax positions.

Part XI, Line 2d - Other Adjustments:

Rental Expense	2,277,003.
Fundraising Event Expenses	221,061.
Change in Value of Split Interest Agreements	-2,701,334.
Total to Schedule D, Part XI, Line 2d	-203,270.

Part XI, Line 4b - Other Adjustments:

Management Fees	20,167,824.
Income/Loss from K-1's	-1,184,620.
Total to Schedule D, Part XI, Line 4b	18,983,204.

Part XII, Line 2d - Other Adjustments:

Rental Expense	2,277,003.
Fundraising Event Expenses	221,061.
Total to Schedule D, Part XII, Line 2d	2,498,064.

Part XII, Line 4b - Other Adjustments:

Part XIII Supplemental Information (continued)

Management Fees

20,167,824.

Horizontal lines for supplemental information.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Central America and the Caribbean	0	0	Investment		291,156,844.
East Asia and the Pacific	0	0	Fundraising		19,084.
East Asia and the Pacific	0	0	University Partnership/Alumni Relations		6,835.
Europe (Including Iceland & Greenland)	0	0	Investment		74,790,341.
Europe (Including Iceland & Greenland)	0	0	Fundraising		26,391.
Europe (Including Iceland & Greenland)	0	0	University Partnership/Alumni Relations		45,160.
South America	0	0	University Partnership		4,226.
North America	0	0	Investment		1,684,665.
3 a Sub-total	0	0			367,733,546.
b Total from continuation sheets to Part I	0	0			725,550.
c Totals (add lines 3a and 3b)	0	0			368,459,096.

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

Schedule F (Form 990) 2015

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Russia and Neighboring States	0	0	Grantmaking		725,550.
Totals					725,550.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and Neighboring States - Armenia, Azerbaijan,	Operating Expenses	725,550.	Bank Draft	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 1

3 Enter total number of other organizations or entities 0

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

Part I, Line 2:

The grant and assistance payments are verified with internal documents to ensure donor intent and criteria have been met before the payments are made.

Schedule F, Part I, Line 3:

The foreign activities that the Indiana University Foundation has been able to reasonably identify for either direct or indirect (thru reimbursement) support have been listed in Schedule F. The Indiana University Foundation exists to support the activities of Indiana University. There are activities supported by Indiana University, both domestic and foreign, that are reimbursed from IUF accounts. The Indiana University Foundation does not have a reasonable means to determine precisely if expenses reimbursed to Indiana University are foreign or domestic in nature. Appropriate due diligence has been taken to identify those which may be reportable.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization **Indiana University Foundation** Employer identification number **35-6018940**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total				▶		

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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09-14-15

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		Little 500 Races (event type)	Fall Cycling (event type)	1 (total number)	
Revenue	1 Gross receipts	636,061.	8,016.	5,160.	649,237.
	2 Less: Contributions	4,000.			4,000.
	3 Gross income (line 1 minus line 2)	632,061.	8,016.	5,160.	645,237.
Direct Expenses	4 Cash prizes	0.			
	5 Noncash prizes	38,629.		0.	38,629.
	6 Rent/facility costs	137,383.	2,141.	1,453.	140,977.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	229,954.	7,708.	6,908.	244,570.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				424,176.
11 Net income summary. Subtract line 10 from line 3, column (d)				221,061.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a		%
b An outside facility	13b		%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization Indiana University Foundation Employer identification number 35-6018940

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Indiana University 401 E. 7th Street Bloomington, IN 47405	35-6001673	Gov't Entity	30,921,025.	0.			Academic and Student Program Support
Indiana University 401 E. 7th Street Bloomington, IN 47405	35-6001673	Gov't Entity	43,499,615.	0.			Student Scholarship and Financial Aid
Indiana University 401 E. 7th Street Bloomington, IN 47405	35-6001673	Gov't Entity	36,266,138.	0.			Faculty Support & Research
Indiana University 401 E. 7th Street Bloomington, IN 47405	35-6001673	Gov't Entity	23,743,024.	0.			Endowment and Capital Additions
University of Pittsburgh 128 North Craig Street Pittsburgh, PA 15260	25-0965591	Gov't Entity	8,225.	0.			Academic and Student Program Support

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

3 Enter total number of other organizations listed in the line 1 table 0.

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

Schedule I (Form 990) (2015)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships, general	7	21,470.	0.		

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

Part I, Line 2:

The grant and assistance payments are verified with internal documents to ensure donor intent and criteria have been met before the payments are made.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2015

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Indiana University Foundation

Employer identification number

35-6018940

Part I Questions Regarding Compensation

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

	Yes	No
1b	X	
2	X	
4a		X
4b	X	
4c		X
5a	X	
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Daniel C. Smith President & CEO	(i)	376,780.	0.	54,551.	74,195.	28,086.	533,612.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Richard Dupree Executive VP for Development	(i)	291,488.	0.	17,208.	34,196.	50,176.	393,068.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Jeffrey D. Stumpf Exec VP for Fin & Oper & Asst Corp S	(i)	248,690.	0.	15,803.	38,904.	38,034.	341,431.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Gary Stratten Executive VP & CIO	(i)	235,257.	221,998.	19,822.	37,730.	49,649.	564,456.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Philippa Guthrie Exec. VP, Gen. Counsel & Corp Sec.	(i)	187,070.	0.	40,906.	35,973.	45,772.	309,721.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Laurie Burns McRobbie Senior Advisor, IUF	(i)	157,223.	0.	3,333.	36,479.	10,188.	207,223.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Sheila Decker Associate VP, Administration	(i)	171,980.	10,000.	7,049.	24,509.	42,372.	255,910.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Gina M. Reel Associate VP, Finance	(i)	149,898.	0.	1,779.	18,553.	23,413.	193,643.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
John Keith (Thru 10/15) Associate VP, Individual Giving	(i)	137,202.	0.	24,938.	16,218.	10,151.	188,509.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Anne Wymore Associate VP, Marketing Advancement	(i)	182,690.	0.	1,629.	21,957.	35,063.	241,339.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Bryan Melvin Associate VP, Principal Gifts & Intn	(i)	149,903.	0.	1,629.	17,193.	21,437.	190,162.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Sarah Beggs Chief of Staff	(i)	176,750.	0.	1,929.	21,931.	10,502.	211,112.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Catherine Melvin Controller	(i)	153,090.	5,000.	1,629.	19,526.	34,777.	214,022.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
D. Abe Weldy Director, Alternative Investments	(i)	161,440.	124,355.	1,629.	45,856.	38,406.	371,686.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
James Bergstrom Director, Investments	(i)	161,380.	123,818.	52,412.	35,225.	47,113.	419,948.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Dorothy Metaj VP Indianapolis	(i)	229,790.	0.	14,780.	39,684.	25,141.	309,395.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Paula Jenkins	(i)	210,590.	0.	16,392.	41,112.	23,806.	291,900.	0.
VP Bloomington	(ii)	0.	0.	0.	0.	0.	0.	0.
Jeff Lindauer	(i)	200,500.	10,000.	2,316.	27,690.	12,627.	253,133.	0.
VP, Adv. Services, Mgr Capital Camp	(ii)	0.	0.	0.	0.	0.	0.	0.
Mary Bonk	(i)	203,030.	15,000.	2,440.	31,078.	28,542.	280,090.	0.
VP, Advancement Technology	(ii)	0.	0.	0.	0.	0.	0.	0.
Joyce Rogers	(i)	243,438.	0.	2,394.	31,806.	38,394.	316,032.	0.
External Relations for DEMA	(ii)	0.	0.	0.	0.	0.	0.	0.
Eric DeHaan	(i)	153,711.	0.	5,605.	18,251.	20,982.	198,549.	0.
Associate VP for International Devel	(ii)	0.	0.	0.	0.	0.	0.	0.
Jeff Lambright	(i)	140,674.	0.	1,646.	17,345.	42,609.	202,274.	0.
Associate VP, Internal Audit & Risk	(ii)	0.	0.	0.	0.	0.	0.	0.
John Wilhite	(i)	139,062.	3,000.	1,929.	17,294.	34,312.	195,597.	0.
Assistant VP, Real Estate	(ii)	0.	0.	0.	0.	0.	0.	0.
Brandon O'Leary	(i)	124,790.	13,500.	1,929.	16,301.	32,352.	188,872.	0.
Exec Dir, Mgmt Advisory Services	(ii)	0.	0.	0.	0.	0.	0.	0.
Brian Yeley	(i)	120,960.	0.	1,929.	14,083.	43,104.	180,076.	0.
AVP, Gift Planning Services	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 1a:

First Class or charter travel:

The Indiana University Foundation maintains a policy governing all business expenses including travel. Should a business need (e.g. length of flight time, security concerns, lack of commercial air options, etc.) require the use of first-class or charter travel, the IU Foundation Board of Directors has authorized the IU Foundation CEO to approve its use. Chartered travel was provided to IUF Chairman of the Board; Senior Advisor, IUF; two IUF Board Directors; President and CEO, IUF; Associate Vice President, Principal Gifts and International Advancement; Controller; and Events and Meetings Associate. These costs were not treated as taxable income because the travel was business related. In all cases, first-class and charter travel are considered in the Foundation's efforts to ensure compliance with the intermediate sanctions law.

Travel for Companions:

The Indiana University Foundation maintains a policy governing all business expenses which prohibits companion related expenses, except for the specifically defined role of Associate to the IU Foundation President. The

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

duties of this position, which are outlined in a formal policy and support

the organization's mission, are fulfilled by the IUF President & CEO's

spouse. The Associate to the IU Foundation President incurs business

related expenses on behalf of IUF, and those amounts are not treated as

taxable. In all cases, travel for companions is considered in the

Foundation's efforts to ensure compliance with the intermediate sanctions

law.

Tax indemnification and gross-up payments:

Tax indemnification and gross-up payments are only paid to staff in limited

circumstances, and must be approved in accordance with Indiana University

Foundation policies governing these types of payments. In the case of

disqualified persons, indemnification payments are considered in the

Foundation's efforts to ensure compliance with the intermediate sanctions

law. At least annually, the expenses incurred by all employees are

reviewed to ensure appropriate taxation and reporting.

Gross-up payments are established taking into account an estimated tax

rate. However, employees receiving the payment are not grossed up for

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

actual taxes incurred. The following gross-up payments were provided in 2015 in connection with the following items, and in all cases were treated as taxable income to the recipient:

With the approval by the Executive Vice President for Finance & Operations and Assistant Corporate Secretary:

*a wireless communication allowance for cell phone and data services is made available to those staff who demonstrate a business purpose for these types of payments, such as staff who need to have access via cell and data communication and information after hours. During 2015 one-hundred-fifteen(115) employees received a wireless communication allowance.

With the approval of the IUF Board of Directors:

*allowances are made available to the IU Foundation President & CEO for long-term disability and supplemental retirement payments to provide future retirement restoration.

*allowances for vehicles are made available to two Vice Presidents,

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

four Executive Vice Presidents, one Key Employee and the President & CEO of
the IU Foundation.

Part I, Line 4b:

Eligible executives participate in various non-qualified deferred
compensation plans organized under code section 457(f). The exact purpose
of each plan varies, but they include: compensation limitation make-up
plans, deferral of a portion of incentive bonus type plans and other
attributes of a deferred compensation plan. Any amount ultimately paid
under the program to the executive is reported as compensation on Form 990,
Schedule J, Part II, Column B in the year paid.

Payments made in 2015:

James Bergstrom \$50,483

Daniel Smith was credited with \$40,000 and Laurie Burns McRobbie was
credited with \$15,000 in contributions to their respective deferred
compensation accounts.

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 5:

The Indiana University Foundation Incentive Compensation Plan is available to key personnel in the Investment Department. The primary goal of the plan is retention of key investment staff who are responsible for helping the IU Foundation to achieve top quartile investment performance relative to its peers while reducing the volatility of performance over time. This plan is based on the premise of true value of dollars added by staff over an appropriate benchmark, IUF's Target Weighted Benchmark, and over a three-year period. The calculation of amount of bonus awarded is based on a formula similar to the industry standard and provides for a cap as a percentage of salary. This plan was developed and recommended by the Investment Committee of the IUF Board of Directors and approved by the Compensation Committee.

Part I, Line 7:

Management provides non-fixed payments in the form of bonuses available to all Indiana University Foundation staff from a discretionary fund. All bonuses are based on performance and merit.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2015

Department of the Treasury
Internal Revenue Service

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

Open To Public Inspection

Name of the organization Employer identification number
Indiana University Foundation 35-6018940

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

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

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

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

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

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

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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10-02-15

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Laurie Burns McRobbie	See Part V	207,223.	Employment		X
Molly Jorgensen	See Part V	76,954.	Employment		X
Arabella McRobbie	See Part V	18,922.	Employment		X
Bryan Melvin	See Part V	190,162.	Employment		X
Catherine Melvin	See Part V	214,022.	Employment		X

Part V Supplemental Information

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

Schedule L, Part IV, Business Transactions Involving Interested Persons:

(a) Name of Interested Person: Laurie Burns McRobbie

(b) Relationship Between Interested Person and the Organization: Wife

of Michael McRobbie, IUF Chairman of IUF Board

(c) Amount of Transaction: \$207,223

(d) Description of Transaction: Employment

(e) Sharing of Organization's Revenues? No

(a) Name of Interested Person: Molly Jorgensen

(b) Relationship Between Interested Person and the Organization:

Daughter of Jane M. Jorgensen, IUF Board Director, and is employed as

an IU Foundation staff member

(c) Amount of Transaction: \$76,954

(d) Description of Transaction: Employment

(e) Sharing of Organization's Revenues? No

(a) Name of Interested Person: Arabella McRobbie

(b) Relationship Between Interested Person and the Organization:

Daughter of Michael McRobbie, IUF Chairman of IUF Board, and Laurie

Burns McRobbie, IUF Key Employee, and is employed as an IU Foundation

Part V Supplemental Information

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

staff member

(c) Amount of Transaction: \$18,922

(d) Description of Transaction: Employment

(e) Sharing of Organization's Revenues? No

(a) Name of Interested Person: Bryan Melvin

(b) Relationship Between Interested Person and the Organization:

Husband of Catherine Melvin, IUF Key Employee

(c) Amount of Transaction: \$190,162

(d) Description of Transaction: Employment

(e) Sharing of Organization's Revenues? No

(a) Name of Interested Person: Catherine Melvin

(b) Relationship Between Interested Person and the Organization: Wife

of Bryan Melvin, IUF Key Employee

(c) Amount of Transaction: \$214,022

(d) Description of Transaction: Employment

(e) Sharing of Organization's Revenues? No

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization: **Indiana University Foundation** Employer identification number: **35-6018940**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	519	9,962,802.	Listed Values
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential	X	13	4,009,103.	Professional Appraisals
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	1	1,501.	Listed values
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (Travel Exp.)	X	15	27,925.	Actual costs
26 Other (Sports Tkts.)	X	8	2,300.	Listed values
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 35

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2015)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M, Part I, Column (b):

The number of contributions listed in column (b) of Part I are either the number of contributions or the number of items received, depending on the nature of the contribution.

Schedule M, Line 32b:

IUF hires realtors and auctioneers to assist with selling donated items.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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Form 990, Part III, Line 4a, Program Service Accomplishments:

IU Foundation emphasizes and incentivizes philanthropic support of scholarships. Matching funds incentivize donor gifts to endowed scholarships and fellowships at or above \$50 thousand. IU and IU Foundation development officers engage prospects with regard to the financial needs of students and are educated about student financial needs. The equivalent of 1,930 endowed scholarships and fellowships have been newly established through IU's Bicentennial Campaign match as of 09/30/2016.

Form 990, Part III, Line 4d, Other Program Services:

Endowment Capital Additions and Facilities

The IU Foundation provided more than \$23 million to the University in support of new building construction, renovation and equipment needs. State-of-the-art facilities help the University attract high-caliber faculty and students. These facilities provide space, environments, and technologies that promote the highest levels of teaching, learning and research.

Expenses \$ 23,743,024. incl grants of \$ 23,743,024. Revenue \$ 2,589,132.

Investment Management

The primary investment objective of the IU Foundation's asset management program is to achieve an annualized total return (net of fees and expenses), through appreciation and income, equal to or greater than the rate of inflation (as measured by the broad, domestic

Consumer Price Index) plus any spending and administrative expenses

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Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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thus, at a minimum, maintaining the purchasing power of those assets managed by the IU Foundation. The assets are to be managed in a manner that will meet the primary investment objective, and where possible, to seek growth above the objective, while at the same time attempting to limit volatility for year-to-year spending.

The IU Foundation has adopted endowment investment and spending policies that attempt to provide a purchasing power of endowment assets. Under this policy, endowment assets are invested in a manner that is intended to yield a long-term rate of return that exceeds the distribution rate, inflation, and administrative fees of the endowment, while assuming a prudent level of investment risk. Actual results may not be sufficient to achieve this over some shorter time frames.

Working with top-tier investment managers allows IU Foundation to appropriately diversify our investment portfolio to achieve target returns with less volatility than achieved with traditional investments. Reducing volatility is imperative to those who rely on annual endowment income, such as students receiving renewable scholarships or faculty receiving annual salary support.

Investment performance has historically exceeded our targets net of fees to managers. Over the past decade, we have outperformed our target weighted benchmark by 0.6% per annum.

Expenses \$ 20,167,824. including grants of \$ 0. Revenue \$ 18,859,737.

Form 990, Part VI, Section A, line 2:

Michael McRobbie, Board Chair and James T. Morris, IUF Board Director are

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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directors of OneAmerica Financial Partners, Inc.

Lacy M. Johnson, IUF Board Director and Harry L. Gonso, IUF Board Director

are partners at Ice Miller, LLP.

Michael McRobbie, Board Chair and Laurie Burns McRobbie, IUF Key Employee

are husband and wife.

William Buckner, IUF Board Director and James T. Morris, IUF Board Director

are Employee and Vice Chairman & Director, respectively, of Pacer Sports &

Entertainment.

Kate Melvin, IUF Key Employee and Bryan Melvin, IUF Key Employee are

husband and wife.

Form 990, Part VI, Section A, line 4:

Changes were made to the Indiana University Foundation Bylaws in October

2015 which included the exclusion of the status level of fiduciary and

non-fiduciary board directors. It introduced the Governance Committee as

the committee whose membership includes those directors with fiduciary

responsibilities and acts as the governing committee. Additionally, the

Bylaws were revised to be in compliance with the restructuring of the

Committee on Directors to include the Nominating Committee as a

subcommittee rather than a standing committee.

Form 990, Part VI, Section B, line 11:

The Form 990 is completed by Indiana University Foundation staff. A

management team comprised of the Executive Vice President for Finance and

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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Operations & Assistant Corporate Secretary; Executive Vice President,
General Counsel and Corporate Secretary; Executive Vice President and Chief
Investment Officer; Associate Vice President, Internal Audit and Risk
Management; Vice President for Advancement Services & Managing Director of
Capital Campaigns; Executive Vice President for Development; Controller;
Associate Vice President, Finance; and Chief of Staff review the Form 990,
including all schedules line-by-line to determine accuracy and validity.

The Indiana University Foundation engages an independent accounting firm to
review the Form 990. The President & CEO then reviews and signs the Form
990 and the independent accounting firm signs as preparer. The Indiana
University Foundation Audit Committee reviews the completed Form 990,
including all schedules, without redactions. Once signed, an electronic
version of the public disclosure copy of Form 990 is made available to the
Indiana University Foundation Board of Directors via the internet. The
public disclosure copy is provided in order to more thoroughly protect the
privacy of donors. The Form 990 is then filed electronically with the IRS.

Form 990, Part VI, Section B, Line 12c:

Each July, the Indiana University Foundation provides a copy of its
Conflicts of Interest Policy to all directors and officers. Directors and
officers are required to read and comply with the policy which requires, at
a minimum, annually disclosing the existence or non-existence of any
conflicts of interest, real or perceived, in writing to the Indiana
University Foundation Board Secretary. The disclosures are reviewed by
Indiana University Foundation staff including the Executive Vice President
for Finance and Operations & Assistant Corporate Secretary; Executive Vice
President, General Counsel and Corporate Secretary; Executive Vice
President and Chief Investment Officer; Board Secretary; Associate Vice

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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President, Internal Audit and Risk Management; Chief of Staff; and the Assistant Vice President, Real Estate to determine validity and completeness based on staff knowledge of Indiana University Foundation activities and transactions. The results of this review, along with every disclosure in its entirety, are provided to the Indiana University Foundation Audit Committee Chair and Vice Chair. A report is then made by the Audit Committee Chair to the full Audit Committee. When applicable, the Audit Committee Chair will also report any disclosure requiring action to the Indiana University Foundation Executive Committee and Committee on Directors and Governance. When applicable, the Audit Committee Chair will also report any disclosure requiring action to the Indiana University Foundation Board and all relevant Board committees.

In addition to the Conflicts of Interest Policy, each July the Indiana University Foundation provides a background survey and a request for information for Form 990 disclosures to all officers, directors and key employees. As with the Conflicts of Interest, disclosures related to the survey and Form 990 are reviewed by staff and provided verbatim to the Indiana University Foundation Audit Committee Chair and Vice Chair. A report is then made by the Audit Committee Chair to the full Audit Committee. When applicable, the Audit Committee Chair will also report any disclosure requiring action to the Indiana University Foundation Executive Committee and Committee on Directors and Governance. When applicable, the Audit Committee Chair will also report any disclosure requiring action to the Indiana University Foundation Board and all relevant Board committees.

Form 990, Part VI, Section B, Line 15:
Each June, the Indiana University Foundation Compensation Committee

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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approves the compensation arrangements for disqualified persons in accordance with IRS regulation section 53.4958-6 "Rebuttable presumption that a transaction is not an excess benefit transaction". Individuals defined as disqualified persons who receive compensation from the Indiana University Foundation include: the President & CEO; Executive Vice President for Finance and Operations & Assistant Corporate Secretary; Executive Vice President for Development; Executive Vice President and Chief Investment Officer; Vice President Bloomington; Executive Vice President, General Counsel and Corporate Secretary; Associate Vice President, Finance; Board Secretary; Vice President Indianapolis; Associate Director, Regional Advancement; Senior Advisor, IUF; and the Events and Meetings Associate.

The compensation arrangement for each individual is approved in advance for the upcoming fiscal year period July 1 thru June 30 by the Compensation Committee which is an authorized body of the Indiana University Foundation Board of Directors. The Compensation Committee is composed entirely of independent directors who do not have a conflict of interest (within the meaning of paragraph (c)(1)(iii) of section 53.4958-6) with respect to the compensation arrangement for each disqualified person.

The Compensation Committee determines if each compensation arrangement in its entirety is reasonable through the use of relevant information including, but not limited to, compensation levels paid by similarly situated organizations, both taxable and tax-exempt, for functionally comparable positions; the availability of similar services in the geographic area of the applicable tax-exempt organization; current compensation surveys compiled by independent firms; and actual written

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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offers from similar institutions competing for the services of the disqualified person.

Upon approval of the compensation arrangement for each disqualified person, the Compensation Committee provides written documentation noting the terms of the transaction that was approved and the date it was approved; the members of the Committee who were present during review of the arrangement that was approved and those who voted on it; the comparability data obtained and relied upon by the Committee and how the data was obtained; and, if applicable, any actions taken with respect to consideration of the arrangement by anyone who is otherwise a member of the Committee but who had a conflict of interest with respect to the arrangement.

The Compensation Committee's most recent review and approval of compensation arrangements for all disqualified persons was July 11, 2016.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AK, CA, CO, DC, KY, MA, MD, ME, MI, MN, NH, NJ, NY, OH, OR, SC, UT, WA, WV, WI, NV, IN

Form 990, Part VI, Section C, Line 18:

We recognize that good governance practices provide safeguards to help ensure that our funds are consistently used in accordance with our mission, tax-exempt purpose, and donor intent. Copies of the IU Foundation's Forms 990 and Form 990T can be requested through the IU Foundation office. The current year 990 tax return is available through the IU Foundation's website @ www.iufoundation.iu.edu. Form 990 and 990T are available upon request for the past three years in accordance with IRC Section 6104(d) through the IU Foundation's office.

Name of the organization Indiana University Foundation	Employer identification number 35-6018940
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Form 990, Part VI, Section C, Line 19:

We recognize that good governance practices provide safeguards to help ensure that our funds are consistently used in accordance with our mission, tax-exempt purpose, and donor intent. Copies of all the IU Foundation's governing documents and conflict of interest policy can be requested through the IU Foundation office. The audited financial statements (past four years), conflict of interest policy and other specific governance documents are available through the IU Foundation's website @ www.iufoundation.iu.edu.

Form 990, Part XI, line 9, Changes in Net Assets:

Change in Value of Split Interest Agreement	-2,701,334.
Income/Loss from K-1's	1,184,620.
Total to Form 990, Part XI, Line 9	-1,516,714.

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

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

Name of the organization <p style="text-align: center;">Indiana University Foundation</p>	Employer identification number <p style="text-align: center;">35-6018940</p>
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Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CVI GVF Holdings 8 Ltd PO Box 309 Grand Cayman, CAYMAN ISLANDS KY1-1104	Investment	Cayman Islands	IU Foundation	C CORP	214,753.	6,291,206.	99.00%	X	
Charitable Remainder Trusts (101)	Trust	IN							X

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CVI GVF Holdings 8 Ltd	R	3,308,442	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

