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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

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

Inspection

A r	or the	e 2009 c	aien	dar year, or tax year beginning 0 //01 , 2009, and endin	9		06/30), 20	10						
Вс	heck if app	olicable P	lease	C Name of organization GEORGIA TECH FACILITIES, INC.		D Employer ide	antificatio	n numb	er						
	Addre	ss us	se IRS	Doing Business As		52-1442	293								
\vdash	chang	1	nnt or		n/suite										
\vdash	+	t	type			•		7							
-	Initial		See pecific	225 NORTH AVENUE, LYMAN HALL		(404) 385	<u> </u>	′							
\vdash	Termi	nated In:	struc-	City or town, state or country, and ZIP + 4	i	_									
	Amen	4	ions	ATLANTA, GA 30332-0257		G Gross receipt		13,4	128,	306.					
	Applic pendir	ation	F Na	me and address of principal officer AMIR RAHNAMAY-AZAR		H(a) Is this a group affiliates?	return for	\sqcup	Yes	X No					
			25 1	NORTH AVE NW ATLANTA, GA 30332		H(b) Are all affiliate	es included	, []	Yes	No					
ī	Tax-ex	empt statu	ıs	X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527		If "No," attach	a list (see	ınstructio	ns)	_					
	Websi	te 🕨 WI	พพ	AFF-ORG.GATECH.EDU/GTFI		H(c) Group exempt	tion number	•	N/	Ά					
		· ·				on 1985 M				GA					
_		of organizat		A Corporation Trust Association Other Life of	n torman	011 1903 W	State of le	gai uon	iche	—GA					
Ρa	rt I	Sumr	mary												
	1	•		e the organization's mission or most significant activities											
(1)	ŀ	TO PR	OMO	TE AND SUPPORT THE GEORGIA INSTITUTE OF TECHNOLO	GY V	IA 									
Ę	ľ	ERECT	RECTING SUITABLE BUILDINGS AND OTHER FACILITIES AS NEEDED TO ACHIEVE THE GOALS OF THE INSTITUTE.												
~ <u>₽</u>		THE G													
~ <u>\$</u>	2	Check th	ns bo	if the organization discontinued its operations or disposed of more than	25% of	its net assets									
~ @ @	3						3			6					
∠ಜಿ				land the state of the second bank (Dott M. Ing. 4b)		·	4			4					
೪	-			(0.11110)		• • • • • • •				0					
⋛≤	5			of employees (Part V, line 2a)			5								
⊃્ઁ	6			of volunteers (estimate if necessary)			6								
7	7a	Total gro	oss ur	related business revenue from Part VIII, column (C), line 12			7a								
<u></u>	b	Net unre	lated	business taxable income from Form 990-T, line 34	<u></u>		7b			0.					
₹	1					Prior Year		Curre	nt Ye	ar					
Revenue Activities	8	Contribu	itions	and grants (Part VIII, line 1h)	. L		0.	1,	765,	000.					
בֻּעוּ	9	Program	servi	ce revenue (Part VIII, line 2g)		11,373,97	3.	11,6	341,	654.					
ě	10			come (Part VIII, column (A), lines 3, 4, and 7d)		771,11	7.		21,	652.					
œ	11			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1		0.			0.					
	12			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		12,145,09	0.	13,4	28,	306.					
	+-	Cronto o	and su	miles emounts need (Pert IV, column (A) Unes 1.7			0.		<u>-</u>	0.					
	14	Renefits	naıd	to or for members (Part IX, column (A), line 4) RECEIVED	•		0.			0.					
	4-				•		0.								
Ses	16 -			r compensation, employee benefits (Part IX column (A), lines 5-10)	•		0.			<u>0.</u>					
Expenses	lo a				-		 		~						
Ä	D D			(3)	-+	12 701 77	+	21 1	1.0						
	1	Otner ex	pens	es (Part IX, column (A), lines 11a-11d, 11f-24)	• –	13,791,77				822.					
	18	Total exp	pense	s Add lines 13-17 (must equal Part IX column Gin 25 N . 17	. —	13,791,77				822.					
	19	Revenue	e less	expenses Subtract line 18 from line 12	_	-1,646,68		-7,8	888,	516.					
200						leginning of Yea			of Yea						
sets	20	Total ass	sets (Part X, line 16)	. 2	96,717,46	3. 3	310,5	59,	654.					
Net Assets or Fund Balances	21	Total liab	bilities	(Part X, line 26)	. 3	07,365,47	9. 3	323,9	57,	837.					
S.F	22	Net asse	ets or	fund balances Subtract line 21 from line 20	.	10,648,01	6	-13,3	98,	183.					
Pa	art II	Sign	atur	Block											
		Under p	enaltie	es of perjury, declare that I have examined this return, including accompanying scheduling	ules and	statements and	to the b	est of r	nv kni	owledge					
		and beli	ief, it	is true correct, and complete Declaration of preparer (other than officer) is based on	all infor	mation of which	preparer	has ar	ıý kno	wledge					
S	Sign		($\sim 10^{-10}$		1 21	15/2	11 1							
	lere	Sig	gnatur	e of officer on X		Date	13	A 11							
				mir Rahnamay-Azar. Treasurer			•								
		→ T v		mir Rahnamay-Azar, 1 reasule		_	-								
_		 		·	neck if	Pren	arer's iden	tifyina a	umber						
Paid	i	Prepare		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	lf-	(see	instruction	is)							
	parer's	I —			nployed	<u> </u>		7468							
	Only	Firm's na		d).		EIN ►		1250							
		address			63	Phone no 🕨	404	-874	-62	14					
Ma	y the IF	RS discus	ss this	return with the preparer shown above? (see instructions)	<u>.</u>	. <u></u>	X	Ye	<u>s</u>	No.					

Form 990 (2009)

Part	IV. Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes, "complete Schedule C, Part III	5		l
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have		_	
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	1		l
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes, "complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			İ
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes, "complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI		570	, " ` 'e'
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more	. ~		40
	of its total assets reported in Part X, line 16? If "Yes, "complete Schedule D, Part VII	į	· .4	
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	* يُجِينه الله	, "	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			-
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	,		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		, 1	1,327
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	w.		ŝ
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			- ار
	the organization's liability for uncertain tax positions under FIN 48? If "Yes, "complete Schedule D, Part X	,		À.
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			لكر
	complete Schedule D, Parts XI, XII, and XIII	12	Х	
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	٠.		
		ý,		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes, "complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes, "complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16]	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
4-	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes, "complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		_X_

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	}		
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	_21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes, "complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	İ		
	24b through 24d and complete Schedule K If "No," go to question 25	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	 		.,
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes, "complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes, "complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	1		
	If "Yes, "complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			1
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			.,
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete]]		v
22	Schedule N, Part II	32		X
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		
54	III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
••	Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

rai	Statements Regarding Other INS Filings and Tax Compilance	1		
	5 · · · · · · · · · · · · · · · · · · ·	794	Yes	No 1
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	sty		7 %
-	o amormation returns Effect of met applicable		4	100
	Effect the number of 7 offins 44-20 included in line to Effect -0-17 flot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	- <u>1882</u>	/ X	لسنسا
_	gaming (gambling) winnings to prize winners?	1c		4 1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	the state of the s	1	4.75	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	2b		7
	instructions)			Ž _O ,
2 2	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		-	
Ja	this return?	3a		X
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country	72	7.4	*** ****
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank	1 100	Ì	
	and Financial Accounts		٠ ٢٠ <u>١٢-١</u>	100
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		1
	Organizations that may receive deductible contributions under section 170(c).	15,3	٠. (and the
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			2
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	,		v
	required to file Form 8282?	7c		X 1
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			. }
E	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	_	X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			İ
	Initiation fees and capital contributions included on Part VIII, line 12		:	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	amounts due or received from them)	42=		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Eom.	990	(2009)
		L OILL	J J U	(2003)

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

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 6			1
b	Enter the number of voting members that 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?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Χ
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	Χ	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9a		Х
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code)		_	
			Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	X	
11 A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Χ	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			!
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	-		- :
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			,
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			<u> </u>
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \(\bigstyle=\text{GA},			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)		
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization AMY HERRON 221 UNCLE HEINIE WAY, LYMAN HALL, RM 325 ATLANTA, GA 30: 404-385-8337	332_		

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, 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

X Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B)			(((D)	(E)	(F)
Name and Title -	Average hours per week	ndividual trustee or director	nstitutional trustee	heck Officer	Key employee	ਲੂ Highest compensated ਜ਼ੁ employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
THOMAS H. HALL III										-
DIRECTOR	1.00	X						0.	0	0
JACK FAUSSEMAGNE DIRECTOR	1.00	Х						0.	0	0
JOSEPH P. IRWIN DIRECTOR	1.00	Х						0.	184,735.	33,695.
N. ALLEN ROBERTSON DIRECTOR	1.00							0.	0	0
OLIVER SALE DIRECTOR	1.00	Х						0.	0	0
STEVE SWANT DIRECTOR	1.00	х						0.	285,433.	38,630.
PATRICK MCKENNA EXECUTIVE DIRECTOR	4.00			х				0.	191,107.	29,277.
JOEL HERCIK TREASURER	4.00			х				0.	191,724.	35,035.
THOMAS JAMES PIERCE III ASSISTANT TREASURER	4.00			Х				0.	115,178.	26,456.
DEBORAH GREENE SECRETARY	1.00			х				0.	144,009.	22,548.
							:		-	
								<u> </u>		

Part V	Section A. Officers, Directors, Tr	ustees, K	ey En	npl	oye	es,	and	Hig	hest Compensa	ted Empl	oyees(c	ontinue	d)	
	(A) Name and title	(B) Average		_	checl	_	hat app		(D) Reportable	(E) Reporta	ble		(F) imated	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compens from rela organiza (W-2/1099-	ated tions	comp fro orga and	ount on other densation the inization related nization	on on d
				L										
													_	
		<u> </u>						Ļ			100			
1b Tot									0.	1,112	,186.	1	85,6	<u>. 41</u>
	al number of individuals (including but not lim ortable compensation from the organization	► The to thos		eo a	DOV	e) w	no re	ceiv	ved more than \$100	,000 in				
	the organization list any former office												Yes	¥2
	ployee on line 1a? If "Yes, "complete Sched							-				3		X ₩
the	any individual listed on line 1a, is the organization and related organizations ividual	greater th	an \$	150	,000)?	If "Y	es,	" complete Sched	ule J for	such	4	·. 	
5 Did	any person listed on line 1a receive vices rendered to the organization? If "Yes,"	e or accr	ue c	omp	ens	atio	n fro	m	any unrelated o	rganization	for	5		X
	n B Independent Contractors	complete	30/100	uic .	0 101	. 30	on pe	301	<u>,</u>		· · · ·			
1 Co	mplete this table for your five highest mpensation from the organization	compensat	ed in	dep	end	lent	conf	tract	tors that received	I more th	an \$100	0,000	of	
-	(A) Name and business add	ress							(B) Description of ser	vices	С	(C) ompens	ation	
ATTA	ACHMENT 4							-				-		
								-						
								+						
	tal number of independent contractors (in the state of th				nited	d to	thos	se l	listed above) who	received				
	. ,				-		<u> </u>							

	990 (20 t VIII				52-1442293		Page 9
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns	1,765,000				
	h	Total. Add lines 1a-1f				***	Ÿ. i
Program Service Revenue	2a b c d	MANAGEMENT FEES REIMBURSEMENT OF PROGRAM EXPENSES RENTAL INCOME	Business Code 561000 561000 531190	32,311 863,755 10,745,588	32,311 863,755 10,745,588		
Progran	e f g	All other program service revenue Total Add lines 2a-2f		11,641,654	11 50 00		, 1 or 1
	3 4 5	Investment income (including dividends, inte other similar amounts) ATTACHMENT Income from investment of tax-exempt bond Royalties	proceeds			(本) 全	21,652
	6a b c d	Gross Rents		0			
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(ii) Other				
eni	c d 8a	Ret gain or (loss)		0		3.4	
Other Revenu	С	events (not including \$ of contributions reported on line 1c) See Part IV, line 18	ь	·	N B		
	9a b	Gross income from gaming activities See Part IV, line 19					
	10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	<u> </u>	0			
		Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue		0			
	11a b c d	All other revenue					
	e 12	Total Add lines 11a-11d		1	11,641,654		21,652

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) but are not required to complete columns (B), (C), and (D).											
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1 Grants and other assistance to governments and				·							
organizations in the U.S. See Part IV, line 21	0.			· · · · · · · · · · · · · · · · · · ·							
2 Grants and other assistance to individuals in	0			· · · · · · · · · · · · · · · · · · ·							
the U.S. See Part IV, line 22	0.		*' · · ·	29. 1 2 12							
3 Grants and other assistance to governments,											
organizations, and individuals outside the			, i								
U S See Part IV, lines 15 and 16	0.		100								
4 Benefits paid to or for members	0.										
5 Compensation of current officers, directors,											
trustees, and key employees	0.										
6 Compensation not included above, to disqualified											
persons (as defined under section 4958(f)(1)) and	_										
persons described in section 4958(c)(3)(B)	0.										
7 Other salaries and wages	- 0.										
8 Pension plan contributions (include section 401(k)											
and section 403(b) employer contributions)	0.										
9 Other employee benefits	0.										
10 Payroll taxes	0.										
11 Fees for services (non-employees)											
a Management	0.										
b Legal	85,010.		85,010.								
c Accounting	44,500.		44,500.								
d Lobbying	0.	_									
e Professional fundraising services See Part IV, line 17	0.	,		-							
f Investment management fees	0.										
g Other	0.		İ								
12 Advertising and promotion	0.										
13 Office expenses	21,952.		21,952.								
14 Information technology	0.		, , , ,								
15 Royalties	0.										
16 Occupancy	193,750.	193,750.									
17 Travel	0.			-							
18 Payments of travel or entertainment expenses											
for any federal, state, or local public officials	0.										
19 Conferences, conventions, and meetings	0.										
	12,625,460.	12,625,460.									
20 Interest	0.	12,020,400.									
21 Payments to affiliates22 Depreciation, depletion, and amortization	431,717.	431,717.									
•	0.	131, 111.									
23 Insurance			· · · · · · · · · · · · · · · · · · ·								
24 Other expenses Itemize expenses not covered above (Expenses grouped together											
and labeled miscellaneous may not exceed											
5% of total expenses shown on line 25 below)											
a INTEREST RATE SWAP TERMINATI	5,555,000.	5,555,000.									
b INSURANCE AND BONDING	455,104.	401,576.	53,528.								
	141,627.	701,376.	141,627.	 -							
c REIMBURSED ADMIN COSTS - GT		1 620 622	141,021.								
d WRITE OFF BOND ISSUANCE COST	1,628,623.	1,628,623.									
e BANK LOC FEE	64,953.	64,953.	0.405								
f All other expenses	69,126.	59,701.	9,425.								
25 Total functional expenses Add lines 1 through 24f	21,316,822.	20,960,780.	356,042.								
26 Joint Costs Check here ► If following											
SOP 98-2 Complete this line only if the organization reported in column (B) joint costs											
from a combined educational campaign and											
fundraising solicitation	<u> </u>			Form 990 (2009							

Pa	rt X₌	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,986,729.	1	27,483,474.
	2	Savings and temporary cash investments	12,939,442.	2	12,794,665.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	424,833.	4	447,100.
	5	Receivables from current and former officers, directors, trustees, key			· 10 多数数
		employees, and highest compensated employees Complete Part II of		31.	
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section		1 8 _c	
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		W.	
, 0		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	5,000,000.
Ass	8	Inventories for sale or use		8	
_	9	Prepaid expenses and deferred charges	5,497,967.	9	5,249,572.
	10 a	Land, buildings, and equipment cost or 10a 4,554,244.			
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation	3,940,258.	10c	3,834,244.
	11	Investments - publicly traded securities	0.	11	0.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11	243,443,275.	13	234,403,196.
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	22,484,959.	15	21,347,403.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	296,717,463.	16	310,559,654.
	17	Accounts payable and accrued expenses	2,685,436.	17	1,321,145.
	18	Grants payable		18	
	19	Deferred revenue	811,338.	19	475,744.
	20	Tax-exempt bond liabilities	284,803,178.	20	304,809,768.
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	/% x x x x x x
Liabilities	22	Payables to current and former officers, directors, trustees, key	,	, V	
ia		employees, highest compensated employees, and disqualified		·-	الدهامية المالية المساسات
_		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	10 005 507	24	17 251 100
	25	Other liabilities Complete Part X of Schedule D	19,065,527.	25	17,351,180.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here	307,365,479.	26	323,957,837.
w		Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34.	` *		
seo	27	Unrestricted net assets	-19,787,016.	27	-23,964,289.
ā	28	Temporarily restricted net assets	9,139,000.	28	10,566,106.
ä	29	Permanently restricted net assets	9,139,000.	29	10,300,100.
핕	23	Organizations that do not follow SFAS 117, check here		25	
or Fund Balanc		and complete lines 30 through 34.			<u> </u>
0	30	Capital stock or trust principal, or current funds	ē	30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund	,	31	
AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets	33	Total net assets or fund balances	-10,648,016.	33	-13,398,183.
~	34	Total liabilities and net assets/fund balances	296,717,463.	34	310,559,654.
	· - ·				, ===,===,

Form **990** (2009)

Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

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

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

X Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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** (2009)

3a

Χ

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury ► Attach to Form 990 or Form 990-EZ. See separate instructions. Internal Revenue Service Name of the organization Employer identification number GEORGIA TECH FACILITIES, INC 52-1442293 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(ı) Χ (II) A family member of a person described in (I) above? Х (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (III) Type of organization (IV) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col above or IRC section. governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2009

Total

Sche	dule A (Form 990 or 990-EZ) 2009			52	-1442293		Page
_	Support Schedule for Or (Complete only if you check	ganizations D ked the box or	escribed in S n line 5, 7, or 8	Sections 170(I B of Part I.)	o)(1)(A)(iv) aı	nd 170(b)(1)(A	
Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,756,243	10,495,416	631,000	. 0	1,765,000	16,647,659
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	3,756,243	10,495,416	631,000	0	1,765,000	16,647,659
5	The portion of total contributions by each	state the second					
	person (other than a governmental unit or publicly supported organization) included						
	on line 1 that exceeds 2% of the amount			***	<u></u>		
	shown on line 11, column (f)	A Comment				. 350, 141	
6	Public support. Subtract line 5 from line 4			2010 1877 184	The second	5246	16,647,659
	tion B. Total Support			V.M 1	.55		10/04//033
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	3,756,243	10,495,416.	631,000	0	1,765,000	16,647,659
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	2,680,160	1,584,245	2,162,932	771,117	21,652	7,220,106
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 IV) . ATCH. 1	4,000	5,937	1,022			10,959
11	Total support Add lines 7 through 10		Mil win with	and to the state of the state o	وتد الخاصيات والدار	<u></u>	23,878,724
12	Gross receipts from related activities, etc. (se	ee instructions) .				12	37,860,539
13	First five years. If the Form 990 is f organization, check this box and stop here						
Sec	ction C. Computation of Public Sup	port Percenta	ige				
14	Public support percentage for 2009 (line	e 6, column (f) d	ivided by line 11	, column (f))		14	69.72 %
15	Public support percentage from 2008 S	chedule A, Part	II, line 14			15	62.73 %
16a						33 1/3 % or mor	e, check
	this box and stop here. The organization	on qualifies as a	a publicly suppo	rted organization	n		▶ X
b	33 1/3 % support test - 2008. If the						
	check this box and stop here. The org.	-					
17a	10%-facts-and-circumstances test - 2 or more, and if the organization me	009. If the orga	anization did not	t check a box or	line 13, 16a o	r 16b, and line 1	4 is 10%
	Part IV how the organization meets					-	•
	organization	ine racis-and-c	incumstances t	est the organi.	zanon quannes	as a publicity Si	
	VIGUIILGUVII						

b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2009

Page 3

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)

<u>Sec</u>	tion A. Public Support						
C	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						l.
3	Gross receipts from activities that are not an			T			
-	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		··· -				
	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						ļ
	\$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		,*				
_	line 6)						
Sec	tion B. Total Support			-l <u>-</u> -	1		<u> </u>
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6			, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , ,	,,
	Gross income from interest, dividends,				1		
	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 IV)			i			
13	Total support. (Add lines 9, 10c, 11,			1			
	and 12)			<u>L</u> .			
14	First five years If the Form 990 is for						
	organization, check this box and stop here.		<u></u>	<u> </u>		<u></u>	▶
Sec	tion C. Computation of Public Sup	<u>port Percent</u>	age			,	
15	Public support percentage for 2009 (line 8, co					15	%
16	Public support percentage from 2008 Schedu				<i>.</i>	16	%
<u>Sec</u>	tion D. Computation of Investment						
17	Investment income percentage for 2009 (lin	e 10c, column (f) divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2008 S	ichedule A, Part	III, line 17			18	%
19 a	33 1/3 % support tests - 2009 If the org	ganization did i	not check the bo	ox on line 14, an	nd line 15 is mo	re than 33 1/3 %,	and line
	17 is not more than 33 1/3 %, check th	is box and sto	op here The org	ganization qualifie	es as a publicly	supported organi	ization 🕨 📘
b	33 1/3 % support tests - 2008 If the orga	inization did no	t check a box on	line 14 or line 1	9a, and line 16	s more than 331/	3 %, and
	line 18 is not more than $331/3$ %, check	this box and s	stop here The or	rganization qualifi	es as a publicly	supported organi	ization 🕨 📗
20	Private foundation. If the organization of	tid not check	a box on line	14, 19a, or 19t	o, check this b	ox and see instr	uctions ►

Part II, line 17a or						
			-		ATTACHMENT	1
SCHEDULE A, PART II - OTHER INC	OME					
DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
OTHER INCOME	4,000	5,937	1,022			10,959.
TOTALS		5, 937	1,022			10,959

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Open to Public

OMB No 1545-0047

Department of the Treasury ► Attach to Form 990. ► See separate instructions. Inspection Internal Revenue Service Name of the organization Employer identification number GEORGIA TECH FACILITIES, INC. 52-1442293 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete of the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised <u>.</u> . funds are the organization's property, subject to the organization's exclusive legal control? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an 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 Year 2a Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 <u>2</u>d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > ... Number of states where property subject to conservation easement is located

__ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, 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

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

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

Assets included in Form 990, Part X

following amounts required to be reported under SFAS116 relating to these items

Schedule D (Form 990) 2009

Par	tella Organizations Maintaini	ng Colle	ections o	of Art, H	istorical	Treasure	es, or	Other Similar	Assets(co	ntınue	<i>∋d)</i>	
3	Using the organization's acquisition,	acces si	on and o	ther reco	rds checl	cany of the	follov	wing that are a sig	inificant use	of its		
•	collection items (check all that apply		ion, and o	ther reco	rus, crica	carry or the	101101	ining that are a sig	innoant asc	, 01 113		
а	Public exhibition	,		d		l nan or ev	chano	je programs				
b	Scholarly research			e	\vdash	Other	Citarig	je programs				
c	Preservation for future gen	orations		e		— —						—
	Provide a description of the organization		allactions	and oval	our hour th	ov furthor i	tho or	aanization's avan	ant nurnoco			
4	Part XIV	allon's G	onections	and expi	aiii iiow ti	iey iuitilei i	ine or	ganization's exem	ipi puipose	111		
_	During the year, did the organization	s color to	or rocomio	denetion	o of ort h	interioral tro	001150	a ar athar aimilar				
5	assets to be sold to raise funds rath									7		٦
										Yes		No
Par	Escrow and Custodial A IV, line 9, or reported an						ans\	wered tes to	-onn 990, 	Part		
1a	Is the organization an agent, trustee	. custo d	ian or oth	er interm	ediary for	contribution	ns or o	other assets not				
	included on Form 990, Part X?								[Yes		No
b	If "Yes," explain the arrangement in								L	J		
					J			Д	mount			
С	Beginning balance						1c					
	Additions during the year						-				-	
	Distributions during the year						\rightarrow					
f	Ending balance						\rightarrow					
2a	Did the organization include an amo									Yes		No
b	If "Yes," explain the arrangement in			•							•	
Par				tion ans	wered "\	es" to Fo	rm 99	90. Part IV. line	10			
			ent Year		or year	(c) Two ye				(e) Four	years	back
1a	Beginning of year balance		•									
b	Contributions							(بد				-
С	Net investment earnings, gains,						-					
	and losses											
d	Grants or scholarships											
е	Other expenditures for facilities .											
	and programs											
f	Administrative expenses											
g	End of year balance					-						
2	Provide the estimated percentage o	f the v ea	ar end bal	ance held	d as	ı						
а	Board designated or quasi-endowm			%								
b	Permanent endowment >	<u>~</u>										
С		%										
3a	Are there endowment funds not in the	- neposs	ession of	the organ	nization th	at are held	and a	dministered for th	ne			
	organization by	•		J						ſ	Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		i —
b	If "Yes" to 3a(ii), are the related orga									3b		
4	Describe in Part XIV the intended us			-					ļ			
Par	t VI Investments - Land, Bui						rt X, I	ine 10			•	
	Description of investment	<u> </u>	(a) Cost	or other bases	sis (b) Cost or other basis (other)		(c) Accumulated depreciation	(d)	Book va	lue	
1a	Land											
b	Buildings					1,798,3	81.	720,000.		1,07	8,3	81.
С	Leasehold improvements]					
d	Equipment											
е	Other	<u>.</u>				2,755,8	63.			2,75	55,8	63.
Tota	I. Add lines 1a through 1e (Column	(d) must	equal For	rm 990, F				c)) ⊳		3,83		
						-			Schodule			

Part VII Investments - Other Securities. See Fo	orm 990, Part X, line	12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
Financial derivatives			
Closely-held equity interests			
Other			
	-		
			····
	-	~	
			
			· · · · · · · · · · · · · · · · · · ·
Total (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related. See F	orm 990. Part X. line		\$\$\$\frac{1}{2}\cdot\tau_1\tau_2\tau_2\tau_1\tau_2\tau_2\tau_1\tau_2\tau_
(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
DIRECT FINANCING LEASES	234,403,196.	COST	
BINDET FINANCING BUILDED	234,403,190.	C031	
			<u> </u>
			
	-		
			-
			
Total (Column (b) must equal Form 990, Part X, col (B) line 13)	234,403,196.		<u> </u>
Part IX Other Assets. See Form 990, Part X, III			<u> </u>
	Description		(b) Book value
LEASE PAYMENT RECEIVABLE	-		3,037,406.
BOND ISSUANCE COST	**		7,743,890.
INTEREST RECEIVABLE			0
CONTRIBUTION RECEIVABLE			10,566,107.
			
			
Total (Column (b) must equal Form 990, Part X, col (B) line 15)			. > 21,347,403.
Part X Other Liabilities. See Form 990, Part X			
1. (a) Description of liability	(b) Amount	, as	, , ,
Federal income taxes			
DUE TO PRIMARY GOVERNMENT	5,747,938.		
CONTRACT RETAINAGE PAYABLE	106,767.		
INTEREST RATE SWAP	0.		
LEASE PAYABLE	2,952,417.	-	
ACCRUED BOND INTEREST	2,252,700.	,	
ACCRUED BOND ISSUANCE PREMIUMS	6,291,358.		
	15 05 5		-
Total (Column (b) must equal Form 990, Part X, col. (B) line 25.)	17,351,180.		

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

Schedule D (Form 990) 2009 52-1442293 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) 13,428,306. 21,316,822. 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 $-7,888,5\overline{16}$. Net unrealized gains (losses) on investments 4 4 Donated services and use of facilities 5 5 6 6 7 7 Other (Describe in Part XIV) 5,138,352. 8 8 Total adjustments (net) Add lines 4 through 8 5,138,352. 9 9 -2,750,164 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 13,445,852. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments Recoveries of prior year grants _______2c d Other (Describe in Part XIV) 2d 17,546. 2e 13,428,306. 3 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 b Other (Describe in Part XIV) 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . 13,428,306. Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 16,196,016. Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 17,546.

b	Prior year adjustments 2b		
С	Other losses 2c	7	
d	Other (Describe in Part XIV) 2d 416,648	.]	
	Add lines 2a through 2d	2e	434,194
3	Subtract line 2e from line 1	3	15,761,822
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV) 4b 5,555,000	.]	
	Add lines 4a and 4b	4c	5,555,000
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		21,316,822
Part .	XIV Supplemental Information		
Compl	lete this part to provide the descriptions required for Part II. lines 3.5, and 9. Part III. lines 1a and 4. Part IV.	lines 1	b

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

SEE PAGE 5

 		 _
 	•	

FIN 48

PART IX, PART X

THE ORGANIZATION HAS RECEIVED A RULING FROM THE INTERNAL REVENUE SERVICE THAT IT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(A) AS AN ORGANIZATION DESCRIBED IN SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE.

THE ORGANIZATION ANNUALLY EVALUATES ALL FEDERAL AND STATE INCOME TAX
POSITIONS. THIS PROCESS INCLUDES AN ANALYSIS OF WHETHER THESE INCOME TAX
POSITIONS THE ORGANIZATION TAKES MEET THE DEFINITION OF AN UNCERTAIN TAX
POSITION UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING
STANDARDS CODIFICATION.

PART XI, LINE 8

SCHEDULE D

SUM.....5,138,352

Part XIV Supplemental Information (continued)

PART XIII, LINE 2D

CHANGE IN VALUE OF INTEREST RATE SWAP 416,648

PART XIII, LINE 4B

COST TO TERMINATE INTEREST RATE SWAP..... 5,555,000

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

GEORGIA TECH FACILITIES, INC.

Employer identification number 52-1442293

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form	~ £**	1	•
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		-	1
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	-41		´.
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	,		1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment			
D	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	3		
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			1
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
_	Indicate which of any of the fallowing the appropriate was to establish the consequence of the			1
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			*
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee	1 1		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
_	organization or a related organization			
	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		- <u>^</u>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	The second times 44-c, list the persons and provide the applicable amounts for each item in Part in			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			·
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			l .
•	compensation contingent on the revenues of			
а	The organization?	5a		X ,
b	Any related organization?	5b		X
~	If "Yes" to line 5a or 5b, describe in Part III	"		 -
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			:
-	compensation contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III	"		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization or 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)(t)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown c	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	O Potromont and	eldevetoold (O)	(E) Total of columns	(E) Company
(A) Name	8	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported in prior Form 990 or Form 990-EZ
		0			0	0	0	0.
PATRICK MCKENNA	(E)	191,107.	0.	.0	18,496.	10,781.	220,384.	.0
					0.	0	0	0.
JOEL HERCIK	i I	191,724.		0	18,806.	16,229.	226,759.	.0
		0.		0.	.0		0	
DEBORAH GREENE	(II)	144,009.	0.0	0.	14,096.	8,452.	166,557.	
		0	0.	0.			0	
JOSEPH P. IRWIN		184,735.			17,779.	15,916.	218,430.	.0
	1			0.		0	0	0.
STEVE SWANT	Ξ	285,353.	.0	.08	22, 638.	15,992.	324,063.	.0
	Ξ							
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SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

2009OMB No 1545-0047

Inspection

► Attach to Form 990. See separate instructions.

Employer identification number 52-1442293

janization								akorduna	Ξ (u number
GEORGIA TECH FACILITIES, INC.								52-1442	142293	
Part I Bond Issues					•					
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	brice .	Q (J)	(f) Description of purpose	se	(g) Defeased	(h) On behalf of issuer
									Yes No	Yes No
A DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	NONE	04/01/2008	17, 17	17, 170, 000 F	REFUNDED 199	REFUNDED 1997B BONDS FOR IBB BUILD	TBB BUILD	×	×
B DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	359900PR2	08/21/2003	72,01	72,011,595	CONST OF FA	OF FAMILY HOUSING COMPL	COMPL	×	×
	58-1506878	3599000VZ	06/29/2004	75.62	75.624.497	CONST MOLEC	MOLECULAR SCIENCE FACIL	ACIL	×	×
	010001-03	5 0000000000000000000000000000000000000	בטטכי וכי בט	2 30		1 6	AK REGON GOS SOSOO		: >	: >
U DEVELOCATION AUTHORITI OF FOUTION COUNTY	0/00001-0	CHOOLEGE	1002/15/10	56,63	T	Verensiance escrib	SCAUM FOR NOR	A	<	<
E DEVELOPMENT AUTHORITY OF FULTON COUNTY PARTIL Proceeds	58-1506878	3599002F7	08/13/2009	16,29	16, 299, 275	KEFUNDED 200	REFUNDED 2008D NORTH AVE APARTMENT	APARTMENT	×	×
		A		8		ပ	٥		ш	
1 Total proceeds of issue	17	,170,000	. 73,3	68,827.	78,	706,969.	25,386	6,385.	16,2	99,275.
2 Gross proceeds in reserve funds										
3 Proceeds in refunding or defeasance escrows	17	,034,726	-				24,170	0,494.	16,08	88,231.
4 Other unspent proceeds						- 1				
5 Issuance costs from proceeds		135,274	1,4	135,896.	1,	537,035.	. 67	5,890.	2	11,044.
6 Working capital expenditures from proceeds		-								
7 Capital expenditures from proceeds	:		71,9	932,931.	,77,	77,169,934.				
8 Year of substantial completion	1	666	2006	9(2007	07	2008		2008	8
	Yes	N _O	Yes	8	Yes	Š	Yes	No	Yes	No
9 Were the bonds issued as part of a current refunding issue?	×			×		×		×	×	
10 Were the bonds issued as part of an advance		:								
refunding issue?	-	×		×		×	×			×
11 Has the final allocation of proceeds been made?	× :		×		×		×		×	
							_			
힐	×		×		×		×		×	
Part III Private Business Use								-		
and and and an analysis of southern south of the cold		A		8		ပ	۵		Ш	
	Yes	8 N	Yes	No	Yes	Š	Yes	٥ N	Yes	Š
tax-exempt bonds?	-	×		×		×		×		×
2 Are there any lease arrangements with respect to the financed property which may result in private business use?	··	×		×		×		×		×

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Schedule K (Form 990) 2009

SCHEDULE K (Form 990)

Department of the Treasury

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

2009 OMB No 1545-0047

► Attach to Form 990. See separate instructions.

Open to Public Inspection

(h) On behalf of issuer Yes No Employer identification number ŝ ŝ (g) Defeased ш ŝ 52-1442293 Yes Yes Yes CONST OF CNES, NAA-DINING, 14TH ST ŝ ŝ REFUNDED 2008A AND 2008B BONDS (f) Description of purpose ۵ Δ Yes Yes REFUNDED 2008C BONDS 10,539,841 10,350,000 189,841 ŝ × × ŝ × × ပ 1994 O Yes Yes 68,693,197 28,041,103 10,539,841 × × (e) Issue price 555,539. 28,041,103. 27,429,691. 302,265 ŝ ŝ × \times \times × × മ ω (d) Date issued 08/13/2009 359900G27 06/23/2010 359900J40 06/23/2010 Yes Yes × 68,693,197. 67,796,811. .986,386. 359900YP6 (c) CUSIP# ŝ ŝ × \times × 2008 ⋖ ⋖ Yes Yes × × × (b) Issuer EIN 58-1506878 58-1506878 58-1506878 Year of substantial completion 9 Were the bonds issued as part of a current refunding issue? financed property which may result in private business use? Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?.......... Are there any lease arrangements with respect to the Does the organization maintain adequate books and records to support the final allocation of proceeds? Has the final allocation of proceeds been made? Proceeds in refunding or defeasance escrows 10 Were the bonds issued as part of an advance Working capital expenditures from proceeds Gross proceeds in reserve funds INC. A DEVELOPMENT AUTHORITY OF FULTON COUNTY B DEVELOPMENT AUTHORITY OF FULTON COUNTY C DEVELOPMENT AUTHORITY OF FULTON COUNTY (a) Issuer name Private Business Use GEORGIA TECH FACILITIES, Issuance costs from proceeds 1 Total proceeds of issue . . **Bond Issues** Proceeds refunding issue? Internal Revenue Service Name of the organization Part III PartII Partl

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Schedule K (Form 990) 2009

	e (Continued)
5009	te Business Use
Schedule K (Form 990) 2	Part III Priva

	•			8		U		٥		
3a Are there any management or service contracts with	Yes	oN O	Yes	No	Yes	ę.	Yes	ş	Yes	S _N
private business use?		×		×	×			×		×
b Are there any research agreements with respect to the financed property which may result in private business use?		×		X		×		×		×
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	×		×		×		×		×	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	:	0.000%		0.0000%		0.0000%		0.000.0		0.0000 %
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carned on by your organization, another section 501(c)(3) organization, or a state or local government ▶	J	0.000%		0.0000%		0.000.0	0	0.0000 %		% 0000.0
6 Total of lines 4 and 5		0.0000%		0.0000%		0.0000%		0.000.0		0.0000
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	×		×		×		×		×	
	A			В		0		0		E
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction	Yes	S.	Yes	8	Yes	S.	Yes	£	Yes	No
with respect to the bond issue?		×		×		×		×		×
		X		X		×		×		×
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		×		×		×		×		×
b Name of provider										
c Term of hedge	•									
4a Were gross proceeds invested in a GIC?		×	×		×			×		×
b Name of provider			CITIGROUP	GLOBAL MKT	ITIGROUP	GLOBAL MKT				
c Term of GIC	•			2.300		2.800				
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?			×		×					
5 Were any gross proceeds invested beyond an available temporary period?		×		×		×		×		×
A Did the bond recus auslify for an expension to rehate?	×		×			×	×		×	
							:	Sci	hedule K (F	Schedule K (Form 990) 2009

	(Continued)
Form 990) 2009	Private Business Use
Schedule K (Form 990)	Part III

		٨		8		U		۵		
sa Are mere any management of service contracts with	Yes	oN N	Yes	o N	Yes	N _o	Yes	o Q	Yes	<u>Q</u>
private business use?	×		×			×			-	
b Are there any research agreements with respect to the financed property which may result in private business use?		×		×		×				
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	×		×		×					
4 Enter the percentage of financed property used in a private business use by entitles other than a section 501(c)(3) organization or a state or local government ▶		0.000%		0.000%		0.0000%		%		%
 5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government 		0.0000%		0.0000%		0.0000%		%		%
6 Total of lines 4 and 5		%0000.0		0.0000%		0.0000%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	×		×		×					
		A		8		ပ		٥		
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction	Yes	8	Yes	٥	Yes	2	Yes	ž	Yes	ş
and Penalty in Lieu of Arbitrage Repare, been lieu with respect to the bond issue?		×		×		×	:			
2 Is the bond issue a variable rate issue?		×		×		×				
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		×		×		×				
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?		×		×		×				
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair					_					
5 Were any gross proceeds invested beyond an		×		×		×				
6 Did the bond issue qualify for an exception to rebate?	×		×		×					
l								SS	nedule K (Fo	Schedule K (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990.

GEORGIA TECH FACILITIES,

Employer identification number

52-1442293

ATTACHMENT 2

PART VI #12C

PART VI #12C

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO EACH MEMBER OF THE BOARD OF DIRECTORS AND TO ALL OFFICERS OF THE ORGANIZATION. THE ORGANIZATION HAS NO EMPLOYEES BUT THE CONFLICT OF INTEREST POLICY IS INTENDED TO SERVE AS GUIDANCE FOR ALL PERSONS EMPLOYED BY THE GEORGIA INSTITUTE OF TECHNOLOGY IN POSITIONS OF SIGNIFICANT RESPONSIBILITY FOR THE ACTIVITIES OF THE ORGANIZATION.

THE CONFLICT OF INTEREST POLICY REQUIRES EACH DIRECTOR AND OFFICER ANNUALLY (1) TO THE REVIEW THE POLICY AND (2) TO DISCLOSE ANY POSSIBLE PERSONAL, FAMILIAL, OR BUSINESS RELATIONSHIPS THAT REASONABLY COULD GIVE RISE TO A CONFLICT OF INTEREST INVOLVING THE ORGANIZATION OR THE GEORGIA INSTITUTE OF TECHNOLOGY; AND (3) TO ACKNOWLEDGE BY HIS OR HER SIGNATURE THAT HE OR SHE IS IN ACCORDANCE WITH THE LETTER AND SPIRIT OF THE POLICY. DISCLOSURE FORMS ARE DISTRIBUTED AND COLLECTED BY THE EXECUTIVE DIRECTOR OF THE ORGANIZATION WHO PROVIDES ANY POSITIVE RESPONSES TO THE AUDIT COMMITTEE OR THE BOARD OF DIRECTORS IN EXECUTIVE SESSION AS APPROPRIATE.

DIRECTORS AND OFFICERS ARE REQUESTED TO DISCLOSE SUBSTANTIVE RELATIONSHIPS THAT THEY OR MEMBERS OF THEIR FAMILY MAINTAIN WITH ORGANIZATIONS THAT DO BUSINESS WITH THE ORGANIZATION, THE GEORGIA INSTITUTE OF TECHNOLOGY, OR ANY RELATED OR AFFILIATED ORGANIZATION, OR WHICH OTHERWISE COULD BE CONSTRUED TO POTENTIALLY AFFECT THEIR

Name of the organization

GEORGIA TECH FACILITIES, INC.

Employer identification number 52-1442293

ATTACHMENT 2 (CONT'D)

INDEPENDENT, UNBIASED JUDGMENT IN LIGHT OF THEIR DECISION-MAKING

AUTHORITY OR RESPONSIBILITY. DIRECTORS OR OFFICERS WHO HAVE DECLARED OR

HAVE BEEN FOUND TO HAVE A CONFLICT OF INTEREST REFRAIN FROM CONSIDERATION

OF PROPOSED TRANSACTIONS UNLESS FOR SPECIAL REASONS THE BOARD REQUESTS

INFORMATION OR INTERPRETATION. PERSONS WITH THE CONFLICTS DO NOT VOTE,

PARTICIPATE IN DISCUSSION, OR BE PRESENT AT THE TIME OF THE VOTE. ANY

PROPOSED TRANSACTION IN WHICH A CONFLICT OF INTEREST HAS BEEN DECLARED OR

FOUND TO EXIST MUST BE APPROVED BY A MAJORITY OF THE DISINTERESTED

MEMBERS OF THE BOARD OR THE APPROPRIATE COMMITTEE OF THE BOARD AFTER

DISCLOSURE OF THE CONFLICT OF INTEREST.

THE CONFLICT OF INTEREST POLICY PRECLUDES THE CORPORATION FROM ENTERING INTO ANY DESIGN OR CONSTRUCTION CONTRACT OR AGREEMENT WHERE A DIRECTOR OR OFFICER, OR AN ORGANIZATION WITH WHICH A DIRECTOR OR OFFICER HAS A BUSINESS RELATIONSHIP, IS IN A DIRECT CONTRACTUAL RELATIONSHIP WITH THE CORPORATION.

PART VI #10

PART VI #10

PAT MCKENNA, EXECUTIVE DIRECTOR, EMAILS A DRAFT OF THE FORM 990 TO THE BOARD OF DIRECTORS FOR THEIR REVIEW PRIOR TO FILING WITH THE IRS. THE BOARD CAN RESPOND TO PAT WITH ANY QUESTIONS OR COMMENTS.

PART VI #19

PART VI #19

GTFI'S ARTICLES OF INCORPORATION, BYLAWS AND CONFLICT OF INTEREST POLICY

ARE ON THE GTFI WEBSITE (WWW.AFF-ORG.GATECH.EDU/GTFI). GTFI'S AUDITED

Schedule O (Form 990) 2009

Page 2

Name of the organization

GEORGIA TECH FACILITIES, INC.

Employer identification number

52-1442293 ATTACHMENT 2 (CONT'D)

FINANCIAL STATEMENTS ARE AVAILABLE ON THE FINANCIAL SERVICES PAGE OF THE GEORGIA INSTITUTE OF TECHNOLOGY'S WEBSITE.

PART III #1

PART III #1 (ORGANIZATION'S MISSION)

GEORGIA TECH FACILITIES, INC. PROVIDED FINANCING AND CONTRACTING SUPPORT FOR THE DESIGN AND CONSTRUCTION OF BUILDINGS AND OTHER FACILITIES AS APPROPRIATE TO MEET THE NEEDS AND GOALS OF THE GEORGIA INSTITUTE OF TECHNOLOGY.

PART VI, #2

PART VI, QUESTION #2

GTFI'S OFFICERS AND TWO DIRECTORS ARE PAID EMPLOYEES OF THE GEORGIA

INSTITUTE OF TECHNOLOGY AND THEREFORE HAVE A BUSINESS RELATIONSHIP WITH

EACH OTHER AS EMPLOYEES OF THE INSTITUTE. IN ADDITION, CERTAIN OF GTFI'S

DIRECTORS ARE ALSO DIRECTORS OF THE GEORGIA TECH FOUNDATION, INC. AND

GTFI IS A PARTY TO BUSINESS TRANSACTIONS WITH THE FOUNDATION.

SCHEDULE R

THE "AMOUNT INVOLVED" COLUMN WAS PROVIDED BY THE FINAL ADJUSTED TRIAL BALANCE AND THE GENERAL LEDGER INFORMATION FOR THE FY10 AUDIT. THE AUDIT WAS PERFORMED IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES.

PART VI, #6, #7

PART VI, GOVERNANCE, MANAGEMENT AND DISCLOSURE

THE PRESIDENT OF THE GEORGIA INSTITUTE OF TECHNOLOGY APPOINTS THE BOARD

Schedule O (Form 990) 2009

Page 2

Name of the organization

GEORGIA TECH FACILITIES, INC.

Employer identification number 52-1442293

ATTACHMENT 2 (CONT'D)

OF GEORGIA TECH FACILITIES, INC.

SCHEDULE K, PAGE 1, BOND A

ISSUE DATE OF 2008 BONDS IS APRIL 1, 2008. 2008 BONDS REFUNDED 2007B BONDS. ISSUE DATE OF 2007B BONDS IS DECEMBER 11, 1997. 1997B FINANCED THE INSTITUTE FOR BIOENGINEERING AND BIOSCIENCE BUILDING ON CAMPUS.

SCHEDULE K, PAGE 1, BOND B

FOR BOND SERIES 2003 - SCHEDULE K PART II LINE 5 COLUMN B ISSUANCE COSTS
ALSO INCLUDES CREDIT ENHANCEMENT FEES OF \$569,000.00

SCHEDULE K, PAGE 1, BOND C

FOR BOND SERIES 2004 - SCHEDULE K PART II LINE 5 COLUMN C ISSUANCE COSTS
ALSO INCLUDES CREDIT ENHANCEMENT FEES OF \$698,000.00

SCHEDULE K, PAGE 1, BOND D

FOR BOND SERIES 2007A - SCHEDULE K PART II LINE 5 COLUMN D ISSUANCE COSTS
ALSO INCLUDES CREDIT ENHANCEMENT FEES OF \$174,307.34

SCHEDULE K, PAGE 1, BOND E

ISSUE DATE OF 2008D BONDS IS APRIL 23, 2008. 2008D BONDS REFUNDED 2007C BONDS. ISSUE DATE OF 2007C BONDS IS AUGUST 9, 2007. 2007C FINANCED . EDUCATIONAL FACILITIES FOR GEORGIA STATE UNIVERSITY.

SCHEDULE K, PAGE 2, BOND A

DATE OF ISSUE 2008A AND 2008B IS APRIL 9, 2008. 2008A REFUNDED 2005A -

Name of the organization

GEORGIA TECH FACILITIES, INC.

Employer identification number

52-1442293

ATTACHMENT 2 (CONT'D)

DATE OF ISSUE OF 2005A IS NOVEMBER 15, 2005 AND FINANCED CERTAIN COSTS OF AN ELECTRICAL SUBSTATION. 2008B BONDS REFUNDED 2007B - DATE OF ISSUE ON 2007B IS AUGUST 9, 2007 AND FINANCED CERTAIN COSTS OF THE NORTH AVENUE APARTMENTS.

SCHEDULE K, PAGE 2, BOND B

THE 2010A BONDS FINANCED THE CONSTRUCTION OF THE CARBON NEUTRAL ENERGY SOLUTIONS LAB, THE NORTH AVENUE DINING FACILITIES, AND IMPROVEMENTS TO THE GATY 14TH ST FACILITY.

SCHEDULE K, PAGE 2, BOND C

ISSUE DATE OF 2008C IS APRIL 23, 2008. 2008C REFUNDED 1997A BONDS ISSUE DATE OF 1997A BONDS IS DECEMBER 11, 1997. 1997A BONDS REFUNDED
1992A AND 1992B BONDS - ISSUE DATE FEBRUARY 20, 1992 AND FINANCED
CONSTRUCTION AND/OR PURCHASE OF THE WARDLAW, HABERSHAM, SUCCESS CENTER
FACILITIES.

ATTACHMENT 3

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS TO PROMOTE AND SUPPORT THE GEORGIA INSTITUTE OF TECHNOLOGY, AN INSTRUMENTALITY OF THE BOARD OF REGENTS OF THE STATE UNIVERSITY SYSTEM OF GEORGIA AND TO ERECT SUCH SUITABLE BUILDINGS AND OTHER FACILITIES AS MAY BE APPROPRIATE TO THE NEEDS AND GOALS OF THE INSTITUTE. GEORGIA TECH FACILITIES, INC. PROVIDED FINANCING AS APPROPRIATE TO MEET THE NEEDS AND GOALS OF THE GEORGIA INSTITUTE OF TECHNOLOGY.

Name of the organization GEORGIA TECH FACILITIES, INC.		52-1	lentification number 442293
990, PART VII- COMPENSATION OF THE FIVE HI	GHEST PAID IND. CONTRACT	ATTACHME FORS	NT_4
NAME AND ADDRESS	DESCRIPTION OF	SERVICES	COMPENSATION
JONES DAY 1420 PEACHTREE ST., SUITE 800 ATLANTA, GA 30309	LEGAL SERVIC	ES	504,306.
CHA TECH SERVICES, LLC 1800 PEACHTREE ST. NW ATLANTA, GA 30309	DESIGN SERVIO	CES	306,654.
HADP ARCHITECTURE, INC. 2722 PIEDMONT RD. NE ATLANTA, GA 30305	ARCHITECTURA	L	205,281.
SNELLINGS WALTERS INSURANCE AGENCY 1117 PERIMETER CENTER WEST, W-101 ATLANTA, GA 30338	INSURANCE		432,297.
SEMPAI SERVICES 4854 LEEDS COURT ATLANTA, GA 30338	PROJECT MANAC	GEMENT	108,501.
TOTAL COMPENS	ATION		1,557,039.
FORM 990, PART VIII - INVESTMENT INCOME		ATTACHME	NT 5
(1	A) (B) TAL RELATED OR CNUE EXEMPT REVENUE	(C) UNRELA' BUSINESS	

21,652

21,652.

21,652

INTEREST INCOME

TOTALS

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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

INC

GEORGIA TECH FACILITIES,

Name of the organization

Open to Public 2009

OMB No 1545-0047

See separate instructions. A

Related Organizations and Unrelated Partnerships

Inspection

Employer Identification number 52-1442293

(f) Direct controlling entity (f)
Direct controlling
entity N/A Identification of Related Tax-Exempt Organizations (Complete of 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.) (e)
Public charity status
(if section 501(c)(3)) (e) End-of-year assets Ø (d) Exempt Code section (d) Total income 501(C)(3) **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) (c) Legal domicile (state or foreign country) (c)
Legal domicile (state
or foreign country) GA UNIVERSITY (b) Primary activity Primary activity 9 ST 58-6002023 30332 58-0603146 GA (a)Name, address, and EIN of related organization (a) Name, address, and EIN of disregarded entity GEORGIA INSTITUTE OF TECHNOLOGY
225 NORTH AVENUE NW ATLANTA, GEORGIA TECH RESEARCH CORPORATION 430 TENTH ST. NW, NORTH BLDG, A Part

ATLANTA, GA 30318 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. GEORGIA TECH APPLIED RESEARCH

Schedule R (Form 990) 2009

GT RESEARCH

11A

501 (C) (3)

GA

RESEARCH

N/A

11A

501(C)(3)

GA

CJ

CHILD CARE

58-2644893 30332

GA

ATLANTA,

HOME PARK LEARNING CENTER 500 TECH PARKWAY

CORPORATIO

N/A

7

501 (C) (3)

GA

ATHLETICS

58-0622514

GA

GEORGIA TECH ATHLETIC ASSOCIATION 150 BOBBY DODD WAY NW ATLANTA,

N/A

11A

501(C)(3)

GA

TECH TRANSFER

58-2538285 30332

S.

ATLANTA,

GEORGIA ADVANCED TECHNOLOGY VENTURES
225 NORTH AVENUE NW ATLAI

SOUTHERN LIGHT RAIL 225 NORTH AVENUE NW

30-0240711

30332

GA

---ATLANTA,

501 (C) (3)

GA

NLR ACCESS

N/A

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501(C)(3)

GA

RESEARCH

30318

ВA

ATLANTA,

N/A

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52-1442293

Page 2

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.) Schedule R (Form 990) 2009

Part III

Na Ra F	Name, addred (4) related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Pred (P) Pred (P) Income (related, unrelated, excluded from tax under sections	Share of total income	(y) Share of end-of-year assets	(II) Disproportonate altocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	U) General or managing partner?
			, (a)		512-514)		•	Yes No		Yes No
1								-		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
1 1 1										
-										
Part IV	Identification of Related Organizations Taxal IV, line 34 because it had one or more related	lated Organization It had one or more	ons Taxa re related	able as a Corpo	ration or Trust(Cor reated as a corpora	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.)	ation answered "Yes	s" on Fo	m 990, Part	

ויי ווויני כד בכנימנטכ ורוומם פורכ פן ווופוב וכומנכים כו שמיים של במונכים מב בכוף כו וומפר ממוווין שוני ווכ נמע לכמו ל	a organizations u	כמוכם מס מ כסוף	Solution of discussion	שמווופ נווכ נמא	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 frust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Schedule R (Form 990) 2009

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10:14:02 A

Transactions With Related Organizations (Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Part V

				L
Note. Complete In	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes No
1 During the tax	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?			
a Receipt of (i)	Receipt of (I) interest (ii) annuities (iii) royalities or (iv) rent from a controlled entity		1a	×
b Gift, grant, or c	Gift, grant, or capital contribution to other organization(s)		1p	×
	Gift, grant, or capital contribution from other organization(s)		5	×
	I have a loan quarantees to or for other organization(s)		7	×
	Loans or Ioan gradientees to other organization(s)		- 4	×
_	אַממומותפס טין טעופו טואַמווובמוטווס		1. 7	
f Sale of assets	Sale of assets to other organization(s)		1	×
a Purchase of as	Purchase of assets from other organization(s)		-	×
	Exhance of ascate		-	×
	Exclidings of assets		 -	:
				200
i Lease of facilit	Lease of facilities, equipment, or other assets from other organization(s)		1	×
k Performance o	Performance of services or membership or fundraising solicitations for other organization(s)		¥	×
l Performance o	Performance of services or membership or fundraising solicitations by other organization(s)		=	×
m Sharing of faci	Sharing of facilities, equipment, mailing lists, or other assets		13	×
	Charing of paid amplaceds		-	×
-	· · · · · · · · · · · · · · · · · · ·			7 3
	the state of the consequence of the state of		-	×
	Remindusement paid to other organization for expenses		\bot	:
p Keimbursemer	Kelmbursement paid by other organization for expenses		1000 4	
q Other transfer	Other transfer of cash or property to other organization(s)		<u>-</u>	×
			11.	×
2 If the answer to	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.	nsaction thresh	olds.	
	(a) Transaction (b) Transaction (type (a-r))		(c) Amount involved	
(1) GEORGIA I	INSTITUTE OF TECHNOLOGY		1,080,17	74.
(2) GEORGIA T	TECH RESEARCH CORPORATION		1,424,31	.01
(3) GEORGIA I	INSTITUTE OF TECHNOLOGY	2	20,919,06	067.
(4) GEORGIA I	INSTITUTE OF TECHNOLOGY		17,3	375.
(5) GEORGIA I	INSTITUTE OF TECHNOLOGY		141,62	627.
(6) GEORGIA A	ADVANCED TECHNOLOGY VENTURES		5,000,000.	.00
		Schedi	Schedule R (Form 990) 2009	0) 2009

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

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

(a) (b) (c) (c) Name address and EIN of entity Legal domicile Area.	(b) Primary activity	(c) Legal domicile	(d) Are all partners section	(e) Share of	(f) Disproportionate		(h) General or managing
			501(c)(3) organizations?	assets		of Schedule K-1	partner?
			Yes No		Yes No	(200)	Yes No
	:						
			-				
						Schedule R (Form 990) 2009	990) 2009

V 09-9.2

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10:14:02

Form **8868**

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No 1545-1709

internal Revenue S	ervice This disciplination for each return.	
 If you are fit 	ing for an Automatic 3-Month Extension, complete only Part I and check this box	X
	ing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page ete Part II unlessou have already been granted an automatic 3-month extension on a previou	
Part I Auto	matic 3-Month Extension of Time. Only submit original (no copies needed)	
	equired to file Form 990-T and requesting an automatic 6-month extension - check this box ai	nd complete
Part I only		
All other corpo	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 ome tax returns	004 to request an extension of
one of the relectronically in returns, or a continuous	ng (e-file) Generally, you can electronically file Form 8868 if you want a 3-month autocurns noted below (6 months for a corporation required to file Form 990-T). However, f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms omposite or consolidated From 990-T Instead, you must submit the fully completed and dedetails on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for C	er, you cannot file Form 8868 990-BL, 6069, or 8870, group signed page 2 (Part II) of Form
Type or	Name of Exempt Organization	Employer identification number
print	GEORGIA TECH FACILITIES, INC.	52-1442293
File by the	Number, street, and room or suite no. If a P.O. box, see instructions	
due date for	225 NORTH AVENUE, LYMAN HALL	
filing your return See	City, town or post office, state, and ZIP code For a foreign address, see instructions	
instructions	ATLANTA, GA 30332-0257	
Check type of	return to be filed (file a separate application for each return)	
X Form 990	Form 990-T (corporation)	n 4720
Form 990	-BL Form 990-T (sec 401(a) or 408(a) trust) Form	n 5227
Form 990	-EZ Form 990-T (trust other than above) Form	n 6069
Form 990	-PF Form 1041-A Form	n 8870
If the organIf this is for for the whole g		
	t an automatic 3-month (6 months for a corporation required to file Forn	a QQQ-T) extension of time
untıl	02/15 , 2011 , to file the exempt organization return for the organization ganization's return for calendar year or tax year beginning 07/01, 2009 , and ending	named above The extension is 06/30, 2010
2 If this tax	year is for less than 12 months, check reason Initial return Final return	Change in accounting period
b If this ap made Ind c Balance	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, dable credits. See instructions plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax package any prior year overpayment allowed as a credit. Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Systems).	3a \$ 0. ayments 3b \$ 0. deposit
Caution. If you	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and	
for payment ins	,	
	t and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev 4-2009)