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Form <b>990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

<b>A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010</b>				
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>Please use IRS label or print or type. See Specific Instructions.</b>	<b>C Name of organization</b> University of Georgia Athletic Assn Inc		<b>D Employer identification number</b> 58-0652518
		Doing Business As		<b>E Telephone number</b> (706) 542-0292
		Number and street (or P O box if mail is not delivered to street address) 456 East Broad Street	Room/suite	<b>G Gross receipts \$</b> 87,033,013
		City or town, state or country, and ZIP + 4 Athens, GA 30602		
		<b>F Name and address of principal officer</b> Tim Burgess Treasurer 456 East Broad Street Athens, GA 30602		
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) <input type="checkbox"/> (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)		
<b>J Website:</b> www.georgiadogs.com		<b>H(c) Group exemption number</b> ▶		

<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <input type="checkbox"/>	<b>L</b> Year of formation 1928	<b>M</b> State of legal domicile GA
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<b>Part I</b>	<b>Summary</b>
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Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities Our mission is to offer nationally competitive intercollegiate athletic programs which reflect the interests of our students and faculty, the Southeastern Conference, and the people of Georgia	
	<b>2</b>	Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets	
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b> 1
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>
	<b>5</b>	Total number of employees (Part V, line 2a) . . . . .	<b>5</b> 89
	<b>6</b>	Total number of volunteers (estimate if necessary) . . . . .	<b>6</b> 1
	<b>7a</b>	Total gross unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b> 19,700
	<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b> 15,070

Revenue		Prior Year	Current Year	
	8	Contributions and grants (Part VIII, line 1h) . . . . .	24,526,196	23,657,475
	9	Program service revenue (Part VIII, line 2g) . . . . .	50,585,278	57,712,701
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . .	605,098	202,564
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,187,227	5,421,279
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	80,903,799	86,994,019
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . .	7,037,729	13,951,995
	14	Benefits paid to or for members (Part IX, column (A), line 4) . . . .	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	27,201,568	24,550,810
	16a	Professional fundraising fees (Part IX, column (A), line 11e) . . . .	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) <u>971,199</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . .	38,518,992	39,355,025
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	72,758,289	77,857,830
	19	Revenue less expenses Subtract line 18 from line 12 . . . . .	8,145,510	9,136,189
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20	Total assets (Part X, line 16) . . . . .	283,963,123	304,750,256
	21	Total liabilities (Part X, line 26) . . . . .	122,332,023	133,763,304
	22	Net assets or fund balances Subtract line 21 from line 20 . . . . .	161,631,100	170,986,952

<b>Part II</b>	<b>Signature Block</b>
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<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	
	Signature of officer	2011-02-28 Date
	Tim Burgess Treasurer Type or print name and title	

<b>Paid</b>  <b>Preparer's</b>  <b>Use Only</b>	Preparer's signature 	Date	Check if self-employed  	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 	ERNST & YOUNG US LLP 55 IVAN ALLEN BLVD SUITE 1000 ATLANTA, GA 30308		
	EIN 	Phone no  (404) 874-8300		

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

Part III

Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission

Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code ) (Expenses \$ 12,441,010 including grants of \$ 2,554,097 ) (Revenue \$ 18,557,006 )
	The football program within the University of Georgia Athletic Association enhances the academic endeavors of the University of Georgia by helping, through its success, to attract both promising students and the assistance of private philanthropy, and by providing direct financial support to the institution

4b	(Code ) (Expenses \$ 2,812,990 including grants of \$ 421,221 ) (Revenue \$ 2,717,106 )
	The men's basketball program within the University of Georgia Athletic Association enhances the academic endeavors of the University of Georgia by helping, through its success, to attract both promising students and the assistance of private philanthropy, and by providing direct financial support to the institution








4c	(Code ) (Expenses \$ 1,930,019 including grants of \$ 393,772 ) (Revenue \$ 113,530 )
	The women's basketball program within the University of Georgia Athletic Association enhances the academic endeavors of the University of Georgia by helping, through its success, to attract both promising students and the assistance of private philanthropy, and by providing direct financial support to the institution

4d	Other program services (Describe in Schedule O )
	(Expenses \$ 44,198,039 including grants of \$ 10,582,905 ) (Revenue \$ 41,720,761 )

4e	Total program service expenses \$ 61,382,058
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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	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
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	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
22	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a	244	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .			1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a	892	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .			3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .			3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .			4a	No
b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .			7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .			7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year . . . . .			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .			8	
9 Sponsoring organizations maintaining donor advised funds.				
a 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				
a Initiation fees and capital contributions included on Part VIII, line 12 . . . . .			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders . . . . .			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	17	
b	Enter the number of voting members that are independent . . .	1b	7	
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders? . . . . .	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body? . . . . .	8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	9		No

Section B. Policies

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates? . . . . .	10a		No
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	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	12c	Yes	
13	Does the organization have a written whistleblower policy? . . . . .	13	Yes	
14	Does the organization have a written document retention and destruction policy? . . . . .	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes	
b	Other officers or key employees of the organization . . . . .	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶GA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Joyce Sniff 456 East Broad Street Athens, GA 30602 (706) 542-0292

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

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

<b>1b Total</b>	4,580,975	3,600,764	1,153,754
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**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization▶15

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
Choate Construction Company 8200 Roberts Drive Suite 600 ATLANTA, GA 30350	Contractor	1,304,330
Collins Cooper Carusi Architects 3391 Peachtree Rd NE Suite 400 Atlanta, GA 30326	Architects	858,343
Borden Perlman Insurance 2000 Lenox Drive Suite 202 Lawrenceville, NJ 08648	Insurance	825,000
Trumps Catering 247 E Washington Street Athens, GA 30601	Catering	590,957
Contemporary Services Corporation PO Box 280456 NORTHRIDGE, CA 91328	Security	555,344

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶31

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	23,657,475				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f . . . . .			23,657,475			
Program Service Revenue			Business Code					
	2a	TICKET REVENUE	711,210	19,113,782	19,113,782			
	b	NCAA/SEC REVENUE	711,210	18,376,763	18,376,763			
	c	MEDIA REVENUE	711,210	9,586,619	9,586,619			
	d	SKY SUITES REVENUE	711,210	4,516,608	4,496,908	19,700		
	e	STUDENT FEES	711,210	3,202,545	3,202,545			
	f	All other program service revenue		2,916,384	2,916,384			
	g	Total. Add lines 2a-2f . . . . .			57,712,701			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .			188,841		188,841	
	4	Income from investment of tax-exempt bond proceeds . . .			0			
	5	Royalties . . . . .			0			
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
		21,717		31,000				
		7,994		31,000				
		13,723						
	d	Net gain or (loss) . . . . .			13,723		13,723	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .						
		a						
		b						
	b	Less direct expenses . . . . .						
	c	Net income or (loss) from fundraising events . . .			0			
9a	Gross income from gaming activities See Part IV, line 19 . . . . .							
	a							
	b							
b	Less direct expenses . . . . .							
c	Net income or (loss) from gaming activities . . .			0				
10a	Gross sales of inventory, less returns and allowances . . . . .							
	a							
	b							
b	Less cost of goods sold . . . . .							
c	Net income or (loss) from sales of inventory . . .			0				
Miscellaneous Revenue		Business Code						
11a	LICENSING	711,210	3,709,288	3,709,288				
b	POSTAGE AND HANDLING	900,099	560,206	560,206				
c	INTERNET ROYALTIES	711,210	139,381	139,381				
d	All other revenue . . . . .		1,012,404	1,012,404				
e	Total. Add lines 11a-11d . . . . .			5,421,279				
12	Total revenue. See Instructions . . . . .			86,994,019	63,114,280	19,700	202,564	

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	5,635,000	5,635,000		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	8,316,995	8,316,995		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
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	20,655,345	15,292,789	4,800,023	562,533
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	206,631		206,631	
9	Other employee benefits . . . . .	3,688,834	2,612,230	927,816	148,788
10	Payroll taxes . . . . .	0			
11	Fees for services (non-employees)				
a	Management . . . . .	0			
b	Legal . . . . .	266,488		266,488	
c	Accounting . . . . .	138,814		138,814	
d	Lobbying . . . . .	0			
e	Professional fundraising See Part IV, line 17 . . . . .	0			
f	Investment management fees . . . . .	1,163,403		1,163,403	
g	Other . . . . .	223,636	91,124	132,512	
12	Advertising and promotion . . . . .	251,157	251,157		
13	Office expenses . . . . .	3,196,680	2,121,196	961,537	113,947
14	Information technology . . . . .	0			
15	Royalties . . . . .	0			
16	Occupancy . . . . .	1,193,210		1,193,210	
17	Travel . . . . .	4,248,665	3,913,799	288,335	46,531
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19	Conferences, conventions, and meetings . . . . .	0			
20	Interest . . . . .	3,146,169		3,146,169	
21	Payments to affiliates . . . . .	0			
22	Depreciation, depletion, and amortization . . . . .	5,783,542	5,783,542		
23	Insurance . . . . .	850,232	279,516	570,716	
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	EQUIPMENT	4,265,204	4,196,973	68,231	
b	GAME & MEETING EXPENSES	2,524,438	2,524,438		
c	RECRUITING	1,536,282	1,536,282		
d	MEDICAL FEES & SUPPLIES	1,088,447	1,088,447		
e	BOND CHARGES	578,063	572,508	5,555	
f	All other expenses	8,900,595	7,166,062	1,635,133	99,400
25	Total functional expenses. Add lines 1 through 24f	77,857,830	61,382,058	15,504,573	971,199
26	Joint costs. Check here <input type="checkbox"/> 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				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			90,342,853	1	84,493,998
	2	Savings and temporary cash investments . . . . .			1,676,302	2	970,261
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .			1,622,952	4	1,547,317
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			245,419	9	209,850
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	263,910,694	186,769,711	10c	201,275,291
	b	Less accumulated depreciation . . . . .	10b	62,635,403			
	11	Investments—publicly traded securities . . . . .				11	
	12	Investments—other securities See Part IV, line 11 . . . . .			2,122,072	12	0
	13	Investments—program-related See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets See Part IV, line 11 . . . . .			1,183,814	15	16,253,539
	16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			283,963,123	16	304,750,256
Liabilities	17	Accounts payable and accrued expenses . . . . .			7,021,486	17	9,462,468
	18	Grants payable . . . . .			500,000	18	0
	19	Deferred revenue . . . . .			18,647,706	19	17,980,990
	20	Tax-exempt bond liabilities . . . . .			78,985,000	20	77,750,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			15,994,017	23	14,658,103
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities Complete Part X of Schedule D . . . . .			1,183,814	25	13,911,743
	26	Total liabilities. Add lines 17 through 25 . . . . .			122,332,023	26	133,763,304
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			161,631,100	27	170,986,952
	28	Temporarily restricted net assets . . . . .				28	
	29	Permanently restricted net assets . . . . .				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			161,631,100	33	170,986,952
	34	Total liabilities and net assets/fund balances . . . . .			283,963,123	34	304,750,256

**Part XI**    **Financial Statements and Reporting**

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>c</b> If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . . .	Yes	
<b>d</b> 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .		No
<b>b</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 . . .		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public  
Inspection

Name of the organization University of Georgia Athletic Assn Inc	Employer identification number 58-0652518
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

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

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☒

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box 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

e

☐

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)

f

☐

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

g

☐

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) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

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

Part II

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

Section A. Public Support

Calendar 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.")	23,873,835	24,673,228	27,337,164	24,526,196	23,657,475	124,067,898
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	23,873,835	24,673,228	27,337,164	24,526,196	23,657,475	124,067,898
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						124,067,898

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	23,873,835	2,864,137	27,337,164	24,526,196	23,657,475	124,067,898
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,127,367	2,864,137	1,952,614	640,906	188,841	7,773,865
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	18,354	16,140	14,763	20,947	70,204
10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets	1,063,750	1,588,415	1,703,502	5,187,227	5,421,279	14,964,173
11 Total support (Add lines 7 through 10)						146,876,140

12

Gross receipts from related activities, etc (See instructions )

12

265,987,187

13

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

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	84 471 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	88 214 %

16a

33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b

33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a

10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

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 supported organization

18

Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6 )						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

**Part IV**

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

SCHEDULE D

(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**  
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public  
Inspection

**Name of the organization**  
University of Georgia Athletic Assn Inc

**Employer identification number**  
58-0652518

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if 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	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure) <input type="checkbox"/> Preservation of an historically importantly land area</div> <div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div>											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></table>		Held at the End of the Year	2a		2b		2c		2d	
	Held at the End of the Year											
2a												
2b												
2c												
2d												
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____											
4	Number of states where property subject to conservation easement is located ▶ _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
9	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											

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	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	
b	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	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
	(ii) Assets included in Form 990, Part X	▶ \$ _____
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b	Assets included in Form 990, Part X	▶ \$ _____

Part III

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

3

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

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .				
b	Contributions . . . . .				
c	Investment earnings or losses . . . . .				
d	Grants or scholarships . . . . .				
e	Other expenditures for facilities and programs . . . . .				
f	Administrative expenses . . . . .				
g	End of year balance . . . . .				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

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

(i)

unrelated organizations . . . . .

3a(i)

☐ Yes

☐ No

(ii)

related organizations . . . . .

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .		0		0
b Buildings . . . . .		211,344,882	47,330,489	164,014,393
c Leasehold improvements . . . . .				
d Equipment . . . . .		7,996,071	6,260,297	1,735,774
e Other . . . . .		44,569,741	9,044,617	35,525,124
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				201,275,291



Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	86,994,019
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	77,857,830
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	9,136,189
4	Net unrealized gains (losses) on investments	4	219,663
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	219,663
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	9,355,852

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	87,213,682
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	219,663
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	219,663
3	Subtract line 2e from line 1 . . . . .	3	86,994,019
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	86,994,019

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	77,857,830
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	
3	Subtract line 2e from line 1 . . . . .	3	77,857,830
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	77,857,830

Part XIV

Supplemental Information

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

Identifier	Return Reference	Explanation
FIN 48 Footnote	Schedule D, Part X	THE ENTITY'S AUDITED FINANCIAL STATEMENT INCLUDES THE FOLLOWING FOOTNOTE: UNDER GOVERNMENTAL ACCOUNTING STANDARDS BOARD (GASB) STATEMENT NUMBER 20, ACCOUNTING AND FINANCIAL REPORTING FOR PROPRIETARY FUNDS AND OTHER GOVERNMENTAL ENTITIES THAT USE PROPRIETARY FUND ACCOUNTING, THE ASSOCIATION HAS ELECTED NOT TO APPLY FINANCIAL ACCOUNTING STANDARDS BOARD PROVISIONS ISSUED AFTER NOVEMBER 30, 1989. THEREFORE, THE ENTITY IS NOT SUBJECT TO FIN 48.



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

[illegible]

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

[illegible]

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization University of Georgia Athletic Assn Inc	Employer identification number 58-0652518
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Part I

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 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
<input checked="" type="checkbox"/> First-class or charter travel		
<input checked="" type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax idemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
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		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input checked="" type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?	4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a	No
b Any related organization?	5b	No
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		
a The organization?	6a	No
b Any related organization?	6b	No
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	No
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 in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Michael F Adams	(i)	0	0	0	0	0	0	0
	(ii)	442,824	0	5,615	188,837	21,959	659,235	0
Timothy P Burgess	(i)	0	0	0	0	0	0	0
	(ii)	254,072	0	25,382	25,080	17,416	321,950	0
Jere W Morehead	(i)	0	0	0	0	0	0	0
	(ii)	201,847	0	13,800	20,594	8,469	244,710	0
Rodney Bennett	(i)	0	0	0	0	0	0	0
	(ii)	220,289	0	5	21,075	13,344	254,713	0
Anne L Sweaney	(i)	0	0	0	0	0	0	0
	(ii)	121,796	0	6,712	12,894	14,209	155,611	0
Scott Weinberg	(i)	0	0	0	0	0	0	0
	(ii)	147,161	0	56	14,629	8,700	170,546	0
David E Shipley	(i)	0	0	0	0	0	0	0
	(ii)	233,760	0	0	22,518	14,529	270,807	0
Scott Shamp	(i)	0	0	0	0	0	0	0
	(ii)	126,106	0	144	12,714	17,061	156,025	0
Jace Weaver	(i)	0	0	0	0	0	0	0
	(ii)	126,532	0	0	12,289	12,529	151,350	0
Damon Evans	(i)	0	0	0	0	0	0	0
	(ii)	403,316	0	30,921	23,284	17,141	474,662	0
Frank Crumley	(i)	0	0	0	0	0	0	0
	(ii)	184,038	0	15,814	18,069	11,755	229,676	0
Mark Richt	(i)	0	2,027,000	0	420,000	0	2,447,000	0
	(ii)	356,452	0	40,599	22,863	22,928	442,842	0
Mark Fox	(i)	0	1,229,899	0	0	0	1,229,899	0
	(ii)	161,019	0	26,179	17,150	12,557	216,905	0
Dennis Felton	(i)	202,416	590,000	0	0	0	792,416	0
	(ii)	16,486	0	5,137	1,700	1,458	24,781	0
David Perno	(i)	0	241,660	0	25,000	0	266,660	0
	(ii)	191,575	0	2,483	19,020	17,141	230,219	0
Andrew Landers	(i)	0	290,000	0	25,000	0	315,000	0
	(ii)	229,832	0	10,812	22,701	17,141	280,486	0

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
Supplemental Compensation Information		Dennis Felton received a severance payment of \$1,483,641.
Part I, Line 1a		First-class and charter travel. Officers and Key Employees fly first class only through free upgrades earned from frequent flyer benefits. The University of Georgia Athletic Association owns a private plane available to this group to use for business purposes. However, if the plane is at least filled 50% with occupants traveling for a bona fide business purpose, these individuals are allowed to fill open seats. Travel for Companions. Officers and Key Employees may bring associates or family members on a chartered flight or the private plane only if seats are available and the plane is used at least 50% for business purposes. Companions may fill open seats. Health or social club dues or initiation fees. Officers and Key Employees pay for social club monthly dues. UGAA reimburses them 50% of the monthly cost without substantiation. The reimbursement is taxable compensation reported on Form W-2.

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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 in Schedule O (Form 990).  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public  
Inspection

Name of the organization  
University of Georgia Athletic Assn Inc

Employer identification number  
58-0652518

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A DEV AUTH OF UNIFIED GOV'T ATHENS-CLARKE COUNTY GA	58-2613761	047059AR1	08-28-2003	36,000,000	SEE SCHEDULE O		X		X
B DEV AUTH OF UNIFIED GOV'T ATHENS-CLARKE COUNTY GA	58-2613761	047059AT7	08-25-2005	30,000,000	SEE SCHEDULE O		X		X

Part II Proceeds

	A		B		C		D		E	
	1	Total proceeds of issue	36,230,601	31,940,233						
2	Gross proceeds in reserve funds	970,261	970,261							
3	Proceeds in refunding or defeasance escrows									
4	Other unspent proceeds									
5	Issuance costs from proceeds	311,804	267,370							
6	Working capital expenditures from proceeds									
7	Capital expenditures from proceeds	33,699,490	30,152,939							
8	Year of substantial completion	2005		2008						
		Yes	No	Yes	No	Yes	No	Yes	No	No
9	Were the bonds issued as part of a current refunding issue?		X		X					
10	Were the bonds issued as part of an advance refunding issue?		X		X					
11	Has the final allocation of proceeds been made?	X		X						
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X						

Part III Private Business Use

	A		B		C		D		E	
	1	Yes	No	Yes	No	Yes	No	Yes	No	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X					
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X					

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X		X						
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X						
3c	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 %		0 %							
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 %		0 %							
6	Total of lines 4 and 5	0 %		0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X							

Part IV

Arbitrage

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	X			X						
2	Is the bond issue a variable rate 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?	X		X							
b	Name of provider	BANK OF AMERICA		BANK OF AMERICA							
c	Term of hedge	28		30							
4a	Were gross proceeds invested in a GIC?		X		X						
b	Name of provider										
c	Term of GIC										
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?		X		X						
6	Did the bond issue qualify for an exception to rebate?		X		X						

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493076000121	
<div>SCHEDULE O (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Information to Form 990</div> <div>Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ▶ Attach to Form 990.</div>			OMB No 1545-0047
					<div>2009</div> <div>Open to Public Inspection</div>
Name of the organization University of Georgia Athletic Assn Inc				Employer identification number 58-0652518	

Identifier	Return Reference	Explanation
VOLUNTEERS	Form 990, Part I, Question 6	The Athletic Association has volunteer coaches for one of its teams ORGANIZATIONS'S MISSION STATEMENT Form 990, Part III, Question 1 Our mssion is to offer nationally compettive intercollegiate athletic programs which reflect the interests of our students and faculty, the Southeastern Conference, and the people of Georgia, and provide a worthw hile experience for our student-athletes, teaching them the meaning of integrity and ethical conduct, the basic principles of amateur competition, sportsmanship, and the principle of equitable opportunity for all students and staff We seek to enhance the academic endeavors of the University, by helping through our success to attract both promsing students and the assistance of private philanthropy, and by providing direct financial support
Description of Significant Changes to Organizing or Enabling Document	Form 990, Part VI, Question 4	Revision to the Association's By-Law s dated 2/3/2010 Membership of the board w as increased from seventeen to nineteen The Senior Vice President for Academic Affairs and Provost along w ith the sitting president of the University of Georgia Alumni Association were designated as the new members The seven alumni member segment of the board w as redefined to read seven members at large w ith no few er than six of those members being alumni of the University of Georgia Meetings beyond the required three per year may be set by the Chairperson upon the w ritten request of six members of the board This previously required a w ritten request from nine members A new officer, a Vice-Chairperson, was designated The Senior Vice President for Academic Affairs and Provost shall be the Vice-Chairperson and shall preside over the Board in the absence of the Chairperson The designation of alumni members on each committee was re-w orded to read at-large members (w ho are not faculty members) The Vice-Chairperson of the Board shall act as the Vice Chairperson of the Executive Commttee This position was previously appointed by the Chairperson The Finance and Audit Committee was renamed the Finance Committee, and the Nominating Committee membership and duties were more clearly defined The follow ing section was removed "ATHLETIC DIRECTOR The Athletic Director is an employee of the University of Georgia and serves as the Chief Operating Officer of the Association The Athletic Director reports directly to the President of the University of Georgia "
Describe Process used by Management &/or Governing Body to Review 990	Form 990, Part VI, Question 11	Form 990 is provided to board members prior to the filing deadline w ith sufficient lead-time to allow the board members to review it The assistant to the Athletic Board Treasurer review s it and also provides the required information for the completion of the form 990 to the tax manager w ith an independent accounting firm, w hich finishes the 990 The executive Director w ith the independent accounting firm also attends the board meeting to review the 990 and answe r questions
Description of Process to Monitor Transactions for Conflicts of Interest	Form 990, Part VI, Question 12c	Primary Monitoring of Conflict of Interest is done through the completion of a form by Board members, Officers and key employees of The University of Georgia Athletic Association, Inc requesting disclosure of all related entities and transactions Any conflicts noted are discussed and appropriate action taken If a conflict is confirmed, a plan for alleviating or managing the conflict is implemented Individuals w ith potential conflicts may be asked to recuse and absent themselves from meetings in w hich an alleged conflict is discussed if so doing w ould better assure the integrity of the process
Offices & Positions for Which Process was Used, & Year Process was Begun	Form 990, Part VI, Question 15a	The Athletic Director's salary is recommended by the President of the University of Georgia The salary recommendation is then review ed and approved by the Board for Directors The President of the University of Georgia began determning the salary of the Athletic Director w hen the position began reporting directly to the President in 2004 Salaries are routinely compared to national averages
Offices & Positions for Which Process was Used, & Year Process was Begun	Form 990, Part VI, Question 15b	The Executive Associate Athletic Director's salary is set by benchmarking in the market (compared in conference and nationally) Compensation for key employees is determined by comparing data or benchmarking both in the SEC and nationally Recommendations are made and submitted to the Executive Associate Athletic Director for Finance and Adminstration Salaries are review ed by the Athletic Director for final determination All salaries are then review ed and approved by the Board for Directors at the spring Board meeting Officers of the University of Georgia Athletic Association, Inc Board of Directors are employed by the University of Georgia and are compensated for the role performed for the Athletic Association by the University of Georgia Salaries have routinely been compared to national averages
Avail of Gov Docs, Conflict of Interest Policy, & Fin Strmts to Gen Public	Form 990, Part VI, Question 19	University of Georgia Athletic Association's w eb site advises interested parties that governing documents, conflict of interest policy, and financial statements are available to the public upon request
SCHEDULE K INFORMATION	SCHEDULE K, PART I, COLUMN F	SERIES 2003 THE PROJECT CONSISTED OF ADDITIONS OR IMPROVEMENTS TO THE ATHLETIC FACILITIES OPERATED BY THE UNIVERSITY OF GEORGIA ATHLETIC ASSOCIATION, INC AT THE UNIVERSITY OF GEORGIA IN ATHENS, GEORGIA INCLUDING A SOFTBALL STADIUM, IMPROVEMENTS TO SANFORD STADIUM, IMPROVEMENTS TO THE BUTTS-MEHRE BUILDING TROPHY ROOM AND FOOTBALL LOCKER ROOM, AND IMPROVEMENTS TO STEGEMAN COLISEUM SERIES 2005 THE PROJECT CONSISTED OF ACQUISITION, CONSTRUCTION AND EQUIPPING OF A BASKETBALL AND GYMNASTICS PRACTICE FACILITY TO BE LOCATED ON THE CAMPUS OF THE UNIVERSITY OF GEORGIA SCHEDULE K, PART II, LINE 5 SERIES 2005 TOTAL OF LINE 5 \$267,370 CONSISTS OF \$262,507 OF ISSUANCE COSTS AND \$4,863 OF CREDIT ENHANCEMENT FEES SCHEDULE K, PART III, LINE 3C SERIES 2003 AND 2005 NONE SINCE THERE ARE NO MANAGEMENT OR SERVICE CONTRACTS OR RESEARCH AGREEMENTS RELATING TO THE FINANCED PROPERTY THERE ARE NO REVIEWS

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization  
University of Georgia Athletic Assn Inc

Employer identification number  
58-0652518

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Universty of Georgia  456 East Broad Street  Athens, GA 30602 58-6001998	University	GA	GOV'T	N/A	na

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

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

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

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

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

Yes

No

No

Yes

Yes

Yes

No

Yes

Yes

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Schedule R (Form 990) 2009

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.

[illegible]

Additional Data

Software ID:

Software Version:

EIN: 58-0652518

Name: University of Georgia Athletic Assn Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael F Adams Chairman	1 0	X		X				0	448,439	210,796
Timothy P Burgess Treasurer	1 0	X		X				0	279,454	42,496
Jere W Morehead Secretary/FAR	1 0	X		X				0	215,647	29,063
Rodney Bennett Appointed Faculty	1 0	X						0	220,294	34,419
Anne L Sweaney Appointed Faculty	1 0	X						0	128,508	27,103
Scott Weinberg Appointed Faculty	1 0	X						0	147,217	23,329
David E Shipley Faculty Elected	1 0	X						0	233,760	37,047
Scott Shamp Faculty Elected	1 0	X						0	126,250	29,775
Jace Weaver Faculty Elected	1 0	X						0	126,532	24,818
William C Archer III Elected Alumni	1 0	X						0	0	0
Robert D Bishop Elected Alumni	1 0	X						0	0	0
Mack H Guest III Elected Alumni	1 0	X						0	0	0
Patrick S Pittard Elected Alumni	1 0	X						0	0	0
Thomas W Lawhorne Jr Elected Alumni	1 0	X						0	0	0
Donald M Leebern III Elected Alumni	1 0	X						0	0	0
Swann Seiler Elected Alumni	1 0	X						0	0	0
Damon Evans Athletic Director	50 0				X			0	434,237	40,425
Frank Crumley Exec Assoc Athletic Director	50 0				X			0	199,852	29,824
Mark Richt Head Football Coach	50 0					X		2,027,000	397,051	465,791
Mark Fox Head Men's Basketball Coach	50 0					X		1,229,899	187,198	29,707
Dennis Felton Former Men's Basketball Coach	50 0					X		792,416	21,623	3,158
David Perno Head Baseball Coach	50 0					X		241,660	194,058	61,161
Andrew Landers Head Women's Basketball Coach	50 0					X		290,000	240,644	64,842

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TICKET REVENUE	711,210	19,113,782	19,113,782		
NCAA/SEC REVENUE	711,210	18,376,763	18,376,763		
MEDIA REVENUE	711,210	9,586,619	9,586,619		
SKY SUITES REVENUE	711,210	4,516,608	4,496,908	19,700	
STUDENT FEES	711,210	3,202,545	3,202,545		

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

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
EQUIPMENT	4,265,204	4,196,973	68,231	
GAME & MEETING EXPENSES	2,524,438	2,524,438		
RECRUITING	1,536,282	1,536,282		
MEDICAL FEES & SUPPLIES	1,088,447	1,088,447		
BOND CHARGES	578,063	572,508	5,555	

Software ID:

Software Version:

EIN: 58-0652518

Name: University of Georgia Athletic Assn Inc

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Women's Basketball Scholarships	12	393,772		FMV	
Women's Equestrian Scholarships	14	470,019		FMV	
Women's Golf Scholarships	6	202,647		FMV	
Women's Gymnastics Scholarships	12	406,649		FMV	
Women's Soccer Scholarships	14	474,424		FMV	
Women's Softball Scholarships	11	369,034		FMV	
Women's Swimming Scholarships	14	473,408		FMV	
Women's Tennis Scholarships	6	209,086		FMV	
Women's Track Scholarships	17	573,037		FMV	
Women's Volleyball Scholarships	10	332,436		FMV	
Baseball Scholarships	12	396,144		FMV	
Men's Basketball Scholarships	12	421,221		FMV	
Football Scholarships	75	2,554,097		FMV	
Men's Golf Scholarships	4	152,155		FMV	
Men's Swimming Scholarships	10	335,486		FMV	
Men's Track Scholarships	12	417,832		FMV	
Men's Tennis Scholarships	4	135,550		fmv	

**Software ID:**  
**Software Version:**  
**EIN:** 58-0652518  
**Name:** University of Georgia Athletic Assn Inc

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Michael F Adams	(i)	0	0	0	0	0	0	0
	(ii)	442,824	0	5,615	188,837	21,959	659,235	0
Timothy P Burgess	(i)	0	0	0	0	0	0	0
	(ii)	254,072	0	25,382	25,080	17,416	321,950	0
Jere W Morehead	(i)	0	0	0	0	0	0	0
	(ii)	201,847	0	13,800	20,594	8,469	244,710	0
Rodney Bennett	(i)	0	0	0	0	0	0	0
	(ii)	220,289	0	5	21,075	13,344	254,713	0
Anne L Sweaney	(i)	0	0	0	0	0	0	0
	(ii)	121,796	0	6,712	12,894	14,209	155,611	0
Scott Weinberg	(i)	0	0	0	0	0	0	0
	(ii)	147,161	0	56	14,629	8,700	170,546	0
David E Shipley	(i)	0	0	0	0	0	0	0
	(ii)	233,760	0	0	22,518	14,529	270,807	0
Scott Shamp	(i)	0	0	0	0	0	0	0
	(ii)	126,106	0	144	12,714	17,061	156,025	0
Jace Weaver	(i)	0	0	0	0	0	0	0
	(ii)	126,532	0	0	12,289	12,529	151,350	0
Damon Evans	(i)	0	0	0	0	0	0	0
	(ii)	403,316	0	30,921	23,284	17,141	474,662	0
Frank Crumley	(i)	0	0	0	0	0	0	0
	(ii)	184,038	0	15,814	18,069	11,755	229,676	0
Mark Richt	(i)	0	2,027,000	0	420,000	0	2,447,000	0
	(ii)	356,452	0	40,599	22,863	22,928	442,842	0
Mark Fox	(i)	0	1,229,899	0	0	0	1,229,899	0
	(ii)	161,019	0	26,179	17,150	12,557	216,905	0
Dennis Felton	(i)	202,416	590,000	0	0	0	792,416	0
	(ii)	16,486	0	5,137	1,700	1,458	24,781	0
David Perno	(i)	0	241,660	0	25,000	0	266,660	0
	(ii)	191,575	0	2,483	19,020	17,141	230,219	0
Andrew Landers	(i)	0	290,000	0	25,000	0	315,000	0
	(ii)	229,832	0	10,812	22,701	17,141	280,486	0