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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

	For the	-2009 calend	lar year, o	or tax year beginning			, 2009, and	d endin	g Jun			<u>, 2010</u>		
В	Check if	applicable	81	C Name of organization	n					D Empl	oyer Iden	tification Nu	nber	
	Add	ress change	Please use IRS label	Georgia South	<u>ern Univers</u>	ity Athle	tic Foun	datio	n, Inc.	58	-1485	954		
		ne change	or print or type. See	Number and street (Room/su		E Telep	hone num	nber		
		al return	See specific	P.O. Box 81	15-01					(9)	12) 4	78-552	20	
	\vdash	mination	Instruc- tions.	City, town or country			State ZIP	code + 4		,,,,			-	
	\vdash			Statesboro	•			0460		G Cross	racounte	\$ 2,606	515	
	Ħ	ended return		and address of principal o			GA J		H(a) Is this				Yes	X N
	App	lication pending					- 03.3		H(b) Are all	-			Yes	H
				lherin PO Box		tatesbor				attach a lis		structions)	• •	ш"
		exempt status	s X 501	(c) (3) ∢ (ı	nsert no)	4947(a)(1) or [527						
<u></u>	Web	site: ► N/.							H(c) Group					
K	Form	of organization	X Corpora	ation Trust	Association Of	her►	L Year	of Format	ion 1983	1 M	State of	legal domicil	e GA	
Pa	rt I 🗯	Summa	ary											
	1 8	Briefly describ	be the org	janization's mission	or most signifi	cant activitie	s. <u>To s</u> u	pport	Georgia	South	e <u>rn</u> Un	iversit	y_Athl	<u>etic</u>
•	_					. 						_ .		
Governance	_									. _	, _			
Ě	_													
Š	2 (Check this bo	x ► 🗌	if the organization	discontinued its	operations	or disposed	of more	e than 25°	% of its				
<u>ල</u>	3 1	Number of vo	ting mem	bers of the governing	ng body (Part V	I, line 1a) .	•				3	55		
Activities &	4 1	Number of inc	dependen	t voting members o	f the governing	body (Part \	/I, line 1b)				4	55		
₹				yees (Part V, line 2							5			
ŧ				eers (estimate if ne							6	100		
⋖	1	-		usiness revenue fro			e 12				7 a			0
	b!	Net unrelated	business	taxable income fro	m Form 990-T,	line 34	•			<u> </u>	. 7b	1		
									Р	rior Yea	ır	Cur	rent Ye	ar
ø.	8 (Contributions	and gran	ts (Part VIII, line 1h	1)				1	,346,	821.	2,	031,	367
Revenue	9 1	⊃rogram serv	ice reven	ue (Part VIII, line 2	g)		•			176,	000.		176,	400
Š	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)									43,	366.		29,	305
ž	11 〈									284,	455.		369,	443
	12	Total revenue	1	,850,	642.	2,	606,	515						
	13 (Grants and si	mılar amı	ounts paid (Part IX,	column (A), lir	nes 1-3)								
				members (Part IX,										
	1			nsation, employee b			lines 5-10))		204.	049.		166,	211
63	i			· ·			, 1111000	• •		201,	0.15.	 	=007	
Expenses	1			g fees (Part IX, col					4.2 . 4.4° 6.4	CARALL STR	श्री-पोर्ट क्रे _र ी		A 198 188	947 (14 4 1
X	Ь.	Total fundrais	ang exper	nses (Part IX, colun	nn (D), line 25)	-	134,	<u>398.</u>	,1	. 17 - 70	7 + 7 g	 		-
_	17 (Other expens	es (Part I	X, column (A), line:	s 11a-11d, 11f-	24f)_			2	,107,	943.	1,	623,	007
	18	Total expense	es Add III	nes 13-17 (must eq	Dal-Har/IX Gol	umn (A), line	25) .		2	,311,	992.	1,	789,	218
				s Subtract line 18-						-461,	350.		817,	297
88				0		၂၀				ning of		End	of Yea	
Net Assets or Fund Balancos	20	Total assets (Part X li	₁₆ ප් NOV	1 5 2010	RS-0				, 411,			218,	
Ae Ba	21	Total liabilitie	, απ. ∧, π ς (Part Y	line 26)		8		•		,237,			226,	
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				nces Subtract (ine	21-from Intel2	2			_ 3	,174,	912.	3,	992,	269
Re	îrt III;	S Signati	ure Blo	CK -										
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		ude, direct, a	7		1 / 1		nonnation of w	men prepe	1101 1103 0119					
Sig	gn		V~	(T: 100	1-66				}		0-8	<u>'-(0</u>		
He	re	Signature	of officer	<u> </u>		<u> </u>		•	Da	ite	_			
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		Type or pr	rınt name an											
		1					Date		C	heck if	F	reparer's ide	ntifying n	umber
a	id			21.0					Sé	nployed	▶ [] '	see instructio	ns)	
٦		Preparer's signature	▶ 5./2	MUNI	, ,		10	/O 4 /1		прюуец	-			
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Üs		Firm's name (o		gpen, Lanie	er, Wester	field &	Deal							
Or		employed),	► <u>P.O</u>	. Box 505					E	IN ►				
_ •	_	address, and ZIP + 4	Sta	tesboro		GA	30459		Р	hone no	•			
— Ма	the IF	RS discuss the	ıs return v	with the preparer sh	nown above? (s	ee instruction	ns)					X Ye	s	No
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Form	n 990 (2009) Georgia Southern University Athletic Foundation, Inc.	58-1	<u>485954</u>	Page 2
Par	t III-			
1	Briefly describe the organization's mission:			
	To support Georgia Southern University Athletics			
			- 	
2	Did the organization undertake any significant program services during the year which were not liste	d on the prior	_	
	Form 990 or 990-EZ?	•	Yes	X No
	If 'Yes,' describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services? .	. Yes	X No
·	If 'Yes,' describe these changes on Schedule O.			
	•	b	- C4 F01	(-)(3)
4	Describe the exempt purpose achievements for each of the organization's three largest program sen and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	vices by expense	to others the	total
	expenses, and revenue, if any, for each program service reported	s una anocations	to others, the	totai
				·
48	a (Code) (Expenses \$1,357,530. including grants of \$	0.) (Revenue	\$57	5 , 148.
	Promoting and Supporting the athletic program of Georgia			
	Southern University			
				-
41	(Code) (Expenses \$ including grants of \$) (Revenue	\$,
7.	b (code) (Expenses φ mediating grants or φ	/ (Nevenue	Ÿ	 ,
				-
40	c (Code) (Expenses \$ including grants of \$) (Revenue	\$)
			- -	
			- -	
		. 		
		 		
	100			
40	d Other program services (Describe in Schedule O)			
	(Expenses \$ including grants of \$) (Rever	nue \$)
46	e Total program service expenses ► 1,357,530.			

Checklist of Required Schedules

Part IV

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 2 X Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III 5 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 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If 'Yes,' complete Schedule D, Part II* 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х 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 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 Х 11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11 Х Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI • 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 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 X 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I. 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III 16 Х 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 Х 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 Х 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 Х 20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H Х

No Yes 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? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Schedule J . . Х 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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 d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х 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? If 'Yes,' complete Schedule L, Part I 25b Х 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III Х 27 28 Was the organization a party to a business transation 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? If 'Yes,' complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b X 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 direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х **28c** Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 34 Х Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 . . . 35 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 Note. All Form 990 filers are required to complete Schedule O 38

BAA

Part IV

Form 990 (2009)

58-1485954 Page 5 Form 990 (2009) Georgia Southern University Athletic Foundation, Inc. Statements Regarding Other IRS Filings and Tax Compliance Yes No

1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns. Enter -0- if not applicable 1 a 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0									
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		Х						
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	j	j							
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь								
Note. 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		х						
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3Ь								
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)?									
b If 'Yes,' enter the name of the foreign country.									
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		Х						
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
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?	5 c								
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		х						
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 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		1							
provided to the payor?	7a	х							
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	Х							
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		х						
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		х						
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g								
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h								
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		Х						
9 Sponsoring organizations maintaining donor advised funds.	اختر								
a Did the organization make any taxable distributions under section 4966?	9a	1	Х						
b Did the organization make any distribution to a donor, donor advisor, or related person?	9ь		X						
10 Section 501(c)(7) organizations. Enter:									
a Initiation fees and capital contributions included on Part VIII, line 12									
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11 Section 501(c)(12) organizations. Enter:									
a Gross income from other members or shareholders									
b Gross income from other sources (Do not net amounts due or paid to other sources against									
amounts due or received from them)	12-								
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								

BAA Form 990 (2009)

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Part VI

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

Sec	tion A. Gov	verning Boo	ly and Ma	падете	nt													
								_									Yes	No
1 a	Enter the numb	ber of voting m	embers of t	he governir	ig body							55						
	Enter the numb	•		-								55			_			
2	Did any officer, officer, director	, director, trust r, trustee or ke	ee, or key e y employee	mployee ha?	ave a fa	mily	relatio	onship	or a bus	iness rel	lations	ship	with a	any oth	er	2		Х
3	Did the organize of officers, direct	zation delegate ectors or truste	control ove es, or key e	r managem mployees t	ent dut	ies ci nager	ustoma ment c	arily pe	erformed ny or oth	by or u	nder th	he d	rect	supervi	sion	3		Х
4	Did the organiz		-													4		Х
	since the prior l	Form 990 was	filed? .	•														
5	Did the organiz	zation become	aware durir	ig the year	of a ma	aterial	diver	sion of	the org	anızatıor	n's ass	sets?				5		<u> </u>
6	Does the organ	nization have n	nembers or	stockholder	s ²											6		<u>X</u>
 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 										7a		х						
b	Are any decision	ons of the gove	erning body	subject to a	approva	l by r	nembe	ers, sto	ockholde	rs, or otl	her pe	ersor	s?			7b		X
8	Did the organize the following:	zation contemp	oraneously	document t	he mee	tings	held o	or writt	ten actio	ns undei	rtaken	dur	ng th	e year	by			
а	The governing l	body? .														8a	Х	
b	Each committee	ee with authorit	y to act on	behalf of th	e goveri	nıng	body?					•				8ь	х	
9	ls there any off organization's r	ficer, director of mailing addres	or trustee, o s? <i>If 'Yes,'</i>	r key emplo <i>provide the</i>	yee list <i>name</i> s	ted in	Part '	VII, Se sses in	ction A, o <i>Schedu</i>	who can <i>ile O</i>	not be	e rea	ched	at the		9		x
	tion B. Poli	icies (Thi	s Section	B reques	sts info	orma	ation	abou	ıt polic	ies not	requ	ure	d by	the li	nterna	1		
Reve	enue Code.)				-											,		
10	Dana Maria						- 2									10.	Yes	No
	Does the organ		•									_				10 a		X
	If 'Yes,' does the and branches to	to ensure their	operations	are consist	ent with	thos	e of th	ne orga	anızatıon	17					tes,	10b		
	Has the organiz	-							_	-		filin	the	form?		11	X	
	Describe in Sch	•		-	_					orm 990	•					10.	v	
	Does the organ					-		-			that as	ould.	~ !!!	r.c.o		12a	X	
	Are officers, dir to conflicts?		•	•					_	•	•					12b	X	
	Does the organ					nd en	torce o	complia	ance wit	h the pol	licy? <i>II</i>	t 'Ye	s,' de	scribe	ın	12c	Х	
	Does the organ				-				•							13	X	
14	-							•	•							14	Х	
15	persons, compa	=		•					de a revi beration	ew and a and dec	approv cision?	val b	y ind	epende	ent			
	The organization			-	nanage	ment	officia	al							•	15a		X
b	Other officers of			-	_1		· · ·	4:			•				•	15b	خالي	X
	If 'Yes' to line 1									٠								
	Did the organiz entity during the	ne year?		• •	• •		•	-				•				16a	س.	Х
t	If 'Yes,' has the in joint venture status with resp	e arrangements	under appl	icable fede	y or pro ral tax l	ocedu law, a	ire req and tal	juiring ken ste	the orga eps to sa	inization ifeguard	to eva	aluat rgani	e its zatio	particip n's exe	ation mpt	16b		
Sec	tion C. Disc		. arigornorit	- •											•		<u> </u>	<u> </u>
	List the states v		opy of this f	orm 990 is	require	ed to	be file	ed ►	Georg	jia								
	Section 6104 re	equires an org	anization to	make its F	orms 10	023 (or 102	4 if ap			nd 990	0-T (501(:)(3)s c	nly) ava	ulable	for pu	iplic
	Own websi	· -	Another's					reque	st									
19	Describe in Sch statements ava	hedule O whet allable to the p	her (and if sublic	so, how) the	organı	ızatıo	n mak	es its (governin	ig docum	nents,	conf	lict o	fintere	st policy	, and	financ	al
20	State the name	e, physical add	lress, and te	elephone nu	ımber o	f the	perso	n who	possess	es the b	ooks a	and r	ecor	ds of th	e organ	zation	ı:	
•	John Mulh	nerin	P.	O. Box	8115-	-01,	<u>s</u>	State	sbor	29	<u>GA</u> _	_30	460	<u></u>	(9	12)_4	178-	5520

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'

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

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

North Per veels Same S	(A)	(B)	1						(D)	(E)	(F)	
Harold Arnold Board Member 0.00 X	Name and Title	Average hours		_		all			Reportable	Reportable	Estimated	
Board Member		per week	adividi al fruscee or director	institutional frustee	Officei	Key employee	High est connactisated employee	र्रेक्स्स	the organization	compensation from related organizations (W 2/1099-MISC)	compensation from the organization and related	
Robert Baker Roard Member O.00 X O. 0. 0. 0. 0. 0. 0. Sam Baker Board Member O.00 X O. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Harold Arnold											
Board Member	Board Member	0.00	Х						0.	0.	0.	
Sam Baker Doard Member Do.00 X Do. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Robert Baker											
Board Member 0.00 X 0.00 0.00 0.00 0.00 0.00 0.0	Board Member	0.00	Х						0.	0.	0.	
David Beaubien Board Member O.00 X O. O. O. O. O. Ralph Bowles Board Member O.00 X O.												
Board Member 0.00 X 0. 0. 0. 0. Ralph Bowles Board Member 0.00 X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Board Member	0.00	Х						0.	0.	0.	
Ralph Bowles Board Member 0.00 X 0. 0. 0. 0.	David Beaubien											
Board Member 0.00 X 0. 0. 0.	Board Member	0.00	Х						0.	0.	0.	
Hoke Brunson Board Member 0.00 X 0. 0. 0. 0. 0.	Ralph Bowles											
Board Member 0.00 X 0. 0. 0. 0.	Board Member	0.00	Х						0.	0.	0.	
Darron Burnette Board Member 0.00 X 0. 0. 0. 0.	Hoke Brunson											
Board Member 0.00 X 0. 0. 0.	Board Member	0.00	Х						0.	0.	0.	
Billy Carmichael Board Member 0.00 X 0. 0. 0.	Darron Burnette											
Board Member 0.00 X 0.00 .00 .00 .00 .00 .00 .00 .00 .00 .0	Board Member	0.00	X						0.	0.	0.	
Laney Morrison Board Member 0.00 X 0. 0. 0. 0.	Billy Carmichael											
Board Member 0.00 X 0.00 0.00.00.00.00.00.00.00.00.00.00.00.	Board Member	0.00	Х						0.	0.	0.	
Chris Cliett Board Member 0.00 X	Laney Morrison											
Board Member 0.00 X 0	Board Member	0.00	Х						0.	0.	0.	
Ron Core Treasurer 0.00 X 0.00.0.0.0. Lindsey Cummings 0.00 X 0.00.0.0.0.0. Board Member 0.00 X 0.00.0.0.0.0. Board Member 0.00 X 0.00.0.0.0.0. Board Member 0.00 X 0.00.0.0.0.0.0. Board Member 0.00 X 0.00.0.0.0.0.0.0.0. Charles Duggan 0.00 X 0.00.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	Chris Cliett											
Treasurer 0.00 X 0.00 X 0.00 X Lindsey Cummings 0.00 X 0.00 X 0.00 X Board Member 0.00 X 0.00 X 0.00 X Barry Deal Board Member 0.00 X 0.00 X 0.00 X Ben Garvin 0.00 X 0.00 X 0.00 X	Board Member	0.00	Х						0.	0.	0.	
Lindsey Cummings 0.00 X 0.0	Ron Core											
Board Member 0.00 X 0	Treasurer	0.00	X						0.	0.	0.	
Gary M Davis Board Member 0.00 X 0.00	Lindsey Cummings											
Board Member 0.00 X 0	Board Member	0.00	X						0.	0.	0.	
Barry Deal 0.00 X 0.0	Gary M_Davis											
Board Member 0.00 X 0	Board Member	0.00	X						0.	0.	0.	
Karen Dixon Board Member 0.00 X 0. 0. 0. Charles Duggan 0.00 X 0. 0. 0. 0. Ben Garvin 0. 0. 0. 0. 0.	Barry Deal											
Board Member 0.00 X 0	Board Member	0.00	Х						0.	0.	0.	
Charles Duggan Board Member 0.00 X 0. 0. 0. Ben Garvin	Karen Dixon											
Board Member 0.00 X 0. 0. 0. Ben Garvin	Board Member	0.00	Х						0.	0.	0.	
Ben Garvin	Charles Duggan											
Ben Garvin	Board Member	0.00	Х						0.	0.	0.	
Board Member $ 0.00 \times 1.1 \times 0.00 \times 0.00 $	Ben Garvin										-	
	Board Member	0.00	Х	<u> </u>					0.	0.	0.	

Part VII Section A. Officers, Directors, Trust							and	d Highest Con	pensated Emp	loyees		nt.)	
· (A)	(B)				c)			(D)	(E)		(F)		
Name and Title	Average hours per week			oneck				Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amou	timated int of oth pensatio om the		
	per week	vidual truste irector	Institutional trustee	cer	employee	Highest compensate employee	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	org	anization d related anization	ł	
			itee	:		sated							
Chris Geyerman Board Member	0.00	x						0.	0.			0.	
Paul Gillespie								·			•		
Board Member	0.00	х						0.	0.			0.	
Randy Griffin													
Board Member	0.00	Х						0.	0.			0.	
Bill Herring	_												
Board Member	0.00	Х		ļ	<u> </u>		,	0.	0.			0.	
Bill Howard								_	_			_	
Board Member	0.00	X	ļ		ļ			0.	0.			0.	
Shelia Hoynes	-	l							•			_	
Board Member	0.00	X	_	-	<u> </u>		_	0.	0.			0.	
Walt Huggins	0.00	.,							0.			0.	
Board Member Chanda Mashburn	0.00	^	-		┝	-		0.	U.	•			
Board Member	0.00	v			į			0.	0.				
Mel McBride	10.00	^		-	┢╌			0.	0.				
Board Member	0.00	x						0.	0.			0.	
Margaret McCarty	10.00	 		 	 	 	_					<u> </u>	
Board Member	0.00	x						0.	0.			0.	
Hugh McCullough													
Board Member	0.00	x						0.	0.	o.			
E.G. Meybohm												0.	
Board Member	0.00	X						0.	0.			0,	
Phil Moore	_												
Chair Elect	0.00	X		<u> </u>			<u> </u>	0.	0.			0.	
1 b Total							•	0.	0.			0.	
2 Total number of individuals (including but not limited	to thos	e lis	ted	abov	ve) v	who	rece	eived more than \$	100,000 ın reportabl	e comp	ensatio	on	
from the organization								·····					
											Yes	No	
3 Did the organization list any former officer, director	or truste	e, k	еу є	mpl	oye	e, or	hıg	hest compensated	l employee	-			
on line 1a? If 'Yes,' compléte Schedule J for such in						nd a				3_		Х	
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th	ian \$150	0,000	pen)? <i>[</i> 1	f 'Ye	on a	та с отр	lete	Schedule J for su	ch	<u> </u>			
ındıvıdual						•				4		X	
5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Sch.	mpensa edule J	ation	froi uch	m ar	ny u son	nrela	ated	organization for s	services	5		x	
Section B. Independent Contractors				•									
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent d	conti	ract	ors t	hati	received more tha	n \$100,000 of				
(A)								(В)	Compa	C)	_	
Name and business addres	>							Description	J. Services	Compe	i isalio		
	•						•						
								<u> </u>					
2. Total number of independent contractors (including t	out not b	mite	d to	tho	Se I	icter	1 ah	ove) who received	l more than				

\$100,000 in compensation from the organization 🟲

dation, Inc. 58-1485954

Pai	t 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
SIFTS, GRANTS AR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1 b 35,675. c Fundraising events 1 c d Related organizations 1 d				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribus included in lns 1a-1f b Total Add lines 1a-1f	0.021.267			
٥,	II Total. Add lines 1a-11	2,031,367.			
PROGRAM SERVICE REVENUE	2a Stadium Booth Income 532000 b C	176,400.	176,400.	0.	0.
SERV	d				
POGRAM	f All other program service revenue g Total. Add lines 2a-2f	176,400.			
<u> </u>		1,0,100.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	29,305.	29,305.	0.	0.
	(i) Real (ii) Personal				
	6a Gross Rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ▶				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less cost or other basis and sales expenses c Gain or (loss)				
	d Net gain or (loss)				
IUE	8a Gross income from fundraising events (not including \$				
OTHER REVENI	of contributions reported on line 1c)				
R	See Part IV, line 18		-		
THE	b Less direct expenses b				
•	c Net income or (loss) from fundraising events .				<u> </u>
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	C Net income of (1033) from garning activities .		· · · · · · · · · · · · · · · · · · ·		
	10a Gross sales of inventory, less returns and allowances . a b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a Other Income 999999	369,443.	369,443.	0.	0.
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	369,443.			
	12 Total revenue. See instructions	2,606,515.	575,148.	0.	0.

All other organizations must com	plete column (A) but are not reg	quired to complete columns (B), (C), and (D).
All Other Organizations must com	piete column (A) but are not req	faired to complete columns (b), (c), and (b).

Do I	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	CAPCINGS
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members	-			
5	Compensation of current officers, directors, trustees, and key employees .				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	166,211.	0.	83,105.	83,106.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
					
11	Fees for services (non-employees)				
á	Management .				
ı	Legal Legal	410.	0.	410.	0.
	Accounting	6,000.	0.	6,000.	0.
	1 Lobbying				
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees				
	Other				
	Advertising and promotion	21,193.	0.	21,193.	0.
13	Office expenses	61,963.	0.	7,803.	54,160.
14	Information technology				
15	Royalties				
16 17	Occupancy Travel	14,711.	0.	14,711.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	14,711.	0.	14,711.	<u> </u>
19	Conferences, conventions, and meetings				
20	Interest	19,079.	19,079.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	52,678.	36,406.	16,272.	0.
	Insurance . 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)				
	Stadium Club Expense	23,606.	23,606.	0.	0.
	Miscellaneous	65,365.	0.	59,339.	6,026.
	GSU Althletic Dept_Support	665,024.	665,024.	0.	0.
	Membership Development	22,033.	0.	0.	_22,033.
	Scholarships	600,000.	600,000.	0.	0.
	All other expenses	70,945.	13,415.	34,297.	23,233.
	Total functional expenses. Add lines 1 through 24f	1,789,218.	1,357,530.	243,130.	188,558.
26	Joint costs. Check here ► if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2009)

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Part X **Balance Sheet** End of year Beginning of year 1,572,053. 1,345,818 1 Cash - non-interest-bearing . 2 522,925. 2 Savings and temporary cash investments 511,416 3 3 Pledges and grants receivable, net 939,269 4 1,535,037. 4 Accounts receivable, net 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)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net . . . 8 8 Inventories for sale or use 9 25,552. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. 10 a 1,810,482 Complete Part VI of Schedule D 10b 247,682. 1,615,478 10 c 1,562,800. **b** Less: accumulated depreciation. 11 Investments - publicly-traded securities 11 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 4,411,981. 5,218,367. 16 16 Total assets Add lines 1 through 15 (must equal line 34) 43,283. 17 38,951. 17 Accounts payable and accrued expenses 18 18 Grants payable 82,100. 19 78,013. 19 Deferred revenue 20 20 Tax-exempt bond liabilities . 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 461,822. Unsecured notes and loans payable to unrelated third parties 1,111,626. 647,312. Other liabilities. Complete Part X of Schedule D 25 1,237,009. 26 1,226,098. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 1,495,312. 27 1,433,335. 1,679,660. 28 2,558,934. Temporarily restricted net assets 29 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 3,174,972. 33 3,992,269. 33 Total net assets or fund balances. 4,411,981. 5,218,367. 34 Total liabilities and net assets/fund balances Form 990 (2009)

بن	r mancial Statements and reporting			
•			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
ı	b Were the organization's financial statements audited by an independent accountant?	2b	Х	
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		i	
(d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3	a 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?	3a		х
ı	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	3 b		

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Form 990 (2009)

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

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.

Employer identification number 58-1485954

						hletic Foundati						485 <u>95</u> 4			
Pari	0	Reason for	Pul	olic Charity S	tatu	is (All organizations	must c	comple	te this	part.)	See II	<u>nstruct</u>	ions		
The c	rga	nization is not a	priv.	ate foundation be	ecaus	se it is: (For lines 1 throu	gh 11, cl	heck onl	y one bo)x.)					
1		A church, conv	/entio	n of churches or	asso	ociation of churches desc	ribed in :	section	170(b)(1)(A)(i).					
2		A school descr	rıbed	in section 170(b))(1)(A	A)(ii). (Attach Schedule E	Ξ.)								
3		· · · • · · · · · · · · · · · · · ·				e organization described		٠,,		•					
4	\sqcup	A medical rese	earch	organization ope	erated	d in conjunction with a ho	ospital de	escribed	ın secti	on 170(b)(1)(A)((iii). Ente	er the hosp	ıtal's	
_	_	name, city, an				_,,		. .							
5		170(b)(1)(A)(iv). (C	omplete Part II.)		of a college or university			-	_	nental u	nit desci	ribed in se	ction	
6 7		An organizatio	n tha	_	es a	governmental unit descrit substantial part of its su art II)					or from t	he gene	ral public o	lescrib	ed
8	A community trust described in section 170(bX1)(A)(vi). (Complete Part II)														
9															
10	10 An organization organized and operated exclusively to test for public safety See section 509(a)(4).														
11	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														
е	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															
	check this box														
g		Since August	17, 20	106, has the orga	anızat	tion accepted any gift or	contribu	ition fror	n any of	the foll	owing pe	ersons?		<u> </u>	T
		(i) a narcan	who	directly or indire	otly o	controls, outbor along or t	ogothor i	with nor	one doe	oribad i	n (u) an	d (m)		Yes	No
		(i) a person below, th	ne gov	verning body of the	he su	controls, either alone or t upported organization?	ogether	with beis	sons des	ici ibeu i	11 (11) a11	iu (iii)	11 g (i)		
		(ii) a family	mem	ber of a person	desc	ribed in (i) above?							11 g (ii)		
		(iii) a 35% co	ontrol	led entity of a pe	erson	described in (i) or (ii) at	ove?						11 g (iii)		
h		Provide the fol	lowin	g information ab	out th	he supported organizatio	ns.						-		
	(i	Name of Supporter Organization	d	(ii) EIN		(ui) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) lister gove	Is the tion in col d in your erning ment?	(v) Did y the organ col i your su	ou notify ization in (i) of ipport?	organizat	Is the tion in col zed in the S ?	(vii) Amou	int of Su	pport
							Yes	No	Yes	No	Yes	No			
							<u> </u>								

Schedule A (Form 990 or 990-EZ) 2009

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Par	(Complete only if you checke	_			ns (VI)(A)(I)(d	а ти(в)(т)(А)	(VI)
Sec	tion A. Public Support	a the box on line	5, 7, 01 8 01 Part	1.)			
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	1,704,150.	1,472,548.	1,744,776.	1,346,821.	2,031,367.	8,299,662.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-through 3	1,704,150.	1,472,548.	1,744,776.	1,346,821.	2,031,367.	8,299,662.
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)						
	Public support. Subtract line 5 from line 4						8,299,662.
Sec	tion B. Total Support	T	Т	ı	ī		T
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,704,150.	1,472,548.	1,744,776.	1,346,821.	2,031,367.	8,299,662.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	49,111.	48,638.	69,607.	43,366.	29,305.	240,027.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	254,171.	340,841.	523,387.	460,455.	545,843.	2,124,697.
11	Total support. Add lines 7 through 10						10,664,386.
12	Gross receipts from related activ	rities, etc (see ins	tructions)			12	
13	First five years. If the Form 990 organization, check this box and		ition's first, secon	d, third, fourth, oi	fifth tax year as	a section 501(c)(3	3) ▶ □
Sec	tion C. Computation of Pu	blic Support P	Percentage				
14	Public support percentage for 20	09 (line 6, column	(f) divided by line	e 11, column (f)		14	77.83%
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14			15	78.55%
16 a	33-1/3 support test – 2009. If the and stop here. The organization	e organization did qualifies as a pub	not check the box licly supported or	on line 13, and ganization	the line 14 is 33-1	/3 % or more, che	eck this box
t	33-1/3 support test — 2008. If the and stop here. The organization				and line 15 is 33	1/3% or more, ch	eck this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-ai	nd-circumstances	test, check this b	ox and stop here	. Explain in Part l	V how
ł	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-ai	nd-circumstances	test, check this b	ox and stop here	. Explain in Part I	
18	Private foundation. If the organi		-	•		•	tructions

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (f) Total (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 Calendar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 5 7a Amounts included on lines 1. 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support (e) 2009 (f) Total Calendar year (or fiscal yr beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form sımılar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 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 b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
Other Income Part II, Line 10
Description: Stadium Booth Rentals
2005: 169325.
2006: 210925.
2007: 219425.
2008: 176000.
2009: 176400.
Description: Change in Value - Split Interest Agreement
2005: -20000.
2006: 0.
2007: 0.
2008: 0.
2009: 0.
Description: Other Income
2005: 104846.
2006: 129916.
2007: 303962.
2008: 284455.
2009: 369443.

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, lines 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 organiza	tion			Employer Identification number
Coordia So	uthern University Ath	latic Foundation 1	[nc	58-1485954
	nizations Maintaining Dono			-1
	rganization answered 'Yes' t	to Form 990, Part IV, line	e 6.	counts complete ii
		(a) Donor advised	funds (b)	Funds and other accounts
1 Total numb	er 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 org	anization inform all donors and don he organization's property, subject t	or advisors in writing that the a to the organization's exclusive l	assets held in donor advised legal control?	Yes No
used only to purpose co	anization inform all grantees, donor or charitable purposes and not for t nferring impermissible private bene	he benefit of the donor or dono fit??	or advisor or for any other	Yes No
Part II Cons	ervation Easements Compl	ete if the organization ar	swered 'Yes' to Form 9	990, Part IV, line 7.
1 Purpose(s)	of conservation easements held by	the organization (check all tha	at apply)	
Preser	vation of land for public use (e g , re	ecreation or pleasure)	Preservation of an historic	cally important land area
H	ion of natural habitat		Preservation of certified h	nistoric structure
	vation of open space			
2 Complete I last day of	ines 2a through 2d if the organization the tax year.	on held a qualified conservation	contribution in the form of a	
				Held at the End of the Year
	er of conservation easements		2a	· · · · · · · · · · · · · · · · · · ·
	ge restricted by conservation easer		2b	
	conservation easements on a certif		`'	
	conservation easements included in	• • •	. 2d	
3 Number of year ►	conservation easements modified,	transterred, released, extinguis	ned, or terminated by the org	ganization during the tax
,	states where property subject to co	nservation easement is located	ı ►	
	rganization have a written policy recement of the conservation easemen		, inspection, handling of viola	ations, Yes No
	olunteer hours devoted to monitorin		onservation easements	
7 Amount of during the	expenses incurred in monitoring, in year ►	specting, and enforcing conser	vation easements \$	
	conservation easement reported or 8)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the req	juirements of section	. Yes No
include, if	, describe how the organization rep applicable, the text of the footnote to an easements	orts conservation easements in the organization's financial st	n its revenue and expense sta latements that describes the	atement, and balance sheet, and organization's accounting for
Part III Orga Com	anizations Maintaining Colleplete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or Other Si	milar Assets
treasures,	nization elected, as permitted under or other similar assets held for publ the footnote to its financial stateme	ic exhibition, education, or rese		
treasures,	nization elected, as permitted under or other similar assets held for publi lating to these items.	SFAS 116, to report in its reve ic exhibition, education, or rese	enue statement and balance search in furtherance of public	sheet works of art, historical service, provide the following
(i) Reveni	ues included in Form 990, Part VIII,	line 1		. ►\$
(ii) Assets	included in Form 990, Part X			▶ \$
	nization received or held works of an equired to be reported under SFAS 1		similar assets for financial g	ain, provide the following
a Revenues	ncluded in Form 990, Part VIII, line	1		► \$
b Assets incl	uded in Form 990, Part X .			►\$

Schedule D (Form 990) 2009 Georgi	a Southern U	niversity Athleti	c Foundation, Inc.	58-148					
Part III Organizations Maintai	ning Collect	ions of Art, Histo	rical Treasures, or	Other Similar Ass	ets (continued)				
3 Using the organization's acquisition items (check all that apply):	3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):								
a Public exhibition		d 🔲 Loan o	or exchange programs						
b Scholarly research		e 💹 Other							
c Preservation for future genera									
4 Provide a description of the organ Part XIV.		·	-		ın				
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or red other than to be	eive donations of art, maintained as part of	historical treasures, or the organization's collection	other similar ction?	∏Yes ∏No				
Part IV Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1 a is the organization an agent, trust included on Form 990, Part X?	1 a 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	g table	r					
					Amount				
c Beginning balance				1c					
d Additions during the year				1 d	·				
e Distributions during the year		•		1e 1f					
f Ending balance	marint on Form	000 Dort V June 212		[11]	Yes No				
2a Did the organization include an ai b If 'Yes,' explain the arrangement		990, Part A, line 21			∐ les				
Part V Endowment Funds Co		anization answer	ed 'Yes' to Form 99	0 Part IV. line 10.					
Tutt V Endowment and Co	(a) Current ye				(e) Four years back				
1 a Beginning of year balance	(u) ourrent ye	(5) (110) (30)	(0) 1110)0010 2001	(4) 111100 30410 0041	(0) 1021)0210 22011				
b Contributions									
c Net Investment earnings, gains, and losses					-				
d Grants or scholarships									
Other expenditures for facilities and programs									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage	of the year end	d balance held as							
a Board designated or quasi-endow	ment ►	%							
b Permanent endowment ▶	%								
c Term endowment ►	%								
3a Are there endowment funds not in organization by	the possession	n of the organization th	hat are held and adminis	stered for the	Yes No				
(i) unrelated organizations					3a(i)				
(ii) related organizations					3a(ii)				
b If 'Yes' to 3a(II), are the related o	rganizations list	ed as required on Sch	nedule R?		3b				
4 Describe in Part XIV the intended	uses of the org	anızatıon's endowmer	nt funds						
Part VI Investments-Land, B	uildings, an	d Equipment. See	e Form 990, Part X	, line 10.					
Description of investment	(6	a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value				
1 a Land	<u></u>		80,301.		80,301.				
b Buildings	<u></u>		1,620,491.	148,487.	1,472,004.				
c Leasehold improvements		·							
d Equipment	-		109,690.	99,195.	10,495.				
e Other					1 500 000				
Total. Add lines 1a through 1e (Column	n (d) must equa	Form 990, Part X, co	olumn (B), line 10(c))	<u>►</u>	1,562,800.				
BAA				Sched	dule D (Form 990) 2009				

Schedule I	D (Form 990) 2009 Georgia Southern Unive	rsity Athletic Foundation	n, Inc. 58-1485	954 Page
Part VII	Investments-Other Securities See Fo			
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	on et value
Financial of				
Closely-he	eld equity interests			
Other				
				
	mn (b) must equal Form 990 Part X, col (B) line 12)			
Part VIII	I Investments-Program Related (See			
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year marke	on at value
		 	Cost of end-of-year marke	st value
		 	···· ·	=
				
			•	
Total. (Colui	mn (b) must equal Form 990, Part X, Col (B) line 13)			
Part IX	Other Assets (See Form 990, Part X,	line 15)		· · · · · · · · · · · · · · · · · · ·
	(a) De	escription		(b) Book value
Total (Co	alumn (h) must squal Form 000. Bort V and (D) to	15\	•	
Part X	Other Liabilities (See Form 990, Part X, col (B), III			
raitA	(a) Description of Liability			
Fodoral In	come Taxes	(b) Amount		
	e to GSU	647,312.		
Tayabi	e to 650	047,312.		
_				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 25)	647,312.		
2. FIN 48 I	Footnote In Part XIV, provide the text of the footn	ote to the organization's financia	al statements that reports the org	anızatıon's lıabılıty
tor uncerta	ain tax positions under FIN 48			

58-1485954

Page 3

	edule D (Form 990) 2009 Georgia Southern University Athletic Foundation, Inc.	58-14859	54 Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statem	ents	0.606.515
٠ 1	Total revenue (Form 990, Part VIII,column (A), line 12)	<u> </u>	2,606,515.
2	Total expenses (Form 990, Part IX, column (A), line 25)		1,789,218.
3	Excess or (deficit) for the year Subtract line 2 from line 1	<u> </u>	817,297.
4	Net unrealized gains (losses) on investments	·	
5	Donated services and use of facilities	<u> </u>	
6	Investment expenses .		
7	Prior period adjustments	· · <u> </u>	
8	Other (Describe in Part XIV)	· <u>L</u>	
9	Total adjustments (net) Add lines 4 through 8	<u> </u>	
10		<u>_</u>	817,297.
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue	e per Return	
1		. 1	2,606,515.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
;	a Net unrealized gains on investments . 2a		
1	b Donated services and use of facilities . 2b		
	c Recoveries of prior year grants		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,606,515.
Δ	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		=, ==, ====
7	a Investments expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV) 4b		
	c Add lines 4a and 4b	4c	
		5	2,606,515.
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XIII Reconciliation of Expenses per Audited Financial Statements With Expen		2,000,313.
	Total expenses and losses per audited financial statements	1	1,789,218.
		 	1,709,210.
	· · · · · · · · · · · · · · · · · · ·		
			
	b Prior year adjustments 2b		
	c Other losses 2c		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	1 700 010
3	Subtract line 2e from line 1	3	1,789,218.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV)		
	c Add lines 4a and 4b	4c	
5		5	1,789,218.
Pa	rt XIV Supplemental Information		
line	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete rmation	Part IV, lines 1b an	ed 2b, Part V, e any additional
- -			
- -			
BA	TEEA3304 02/02/10	Schedul	e D (Form 990) 2009

Schedule D (Form 990) 2009	Georgia Southern University Athletic Foundation, Inc. Information (continued)	58-1485954	Page 5
Part XIV Supplemental	Information (continued)		
•			
	-		
		- 	
			-
		- 	
	·	 	
			
			
- 			

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See instructions for Form 990.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

Georgia Southern University Athletic Foundation, Inc. 58-1485954

Ranking Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<u>Employees</u>		,				_				
(A)	(B)	Post	(C) ition (check all that apply)		(D)	(E)	(F)			
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Willis NeSmith Board Member	0.00	Х						0.	0.	0.
Wanda Parrish Chair	0.00	х						0.	0.	0.
Matt Phillips Board Member	0.00	х						0.	0.	0.
David Pittman										
Board Member Jo Helen Propes	0.00	Х						0,.	0.	0.
Board Member Mike Proseri	0.00	Х						0.	0.	0.
Board Member	0.00	х		_				0.	0.	0.
Holmes Ramsey Board Member	0.00	х						0.	0.	0.
John Richardson Board Member	0.00	x						0.	0.	0.
Mike Sanders										
Board Member Trey Sheppard	0.00	Х						0.	0.	0.
Board Member Derek Sills	0.00	X		_				0.	0.	0.
Board Member	0.00	х	_				_	0.	0.	0.
Michael Sizemore Board Member	0.00	х						0.	0.	0.
Chip Smith Board Member	0.00	x						0.	0.	0.
Marshall Smith Board Member	0.00	x						0.	0.	0.
Teddy Solomon										
Board Member Connell Stafford	0.00	Х					-	0.	0.	0.
Board Member Rob Stockton	0.00	Х	ļ	<u> </u>	ļ		-	0.	0.	0.
Board Member	0.00	_X			ļ.			0.	0.	0.
George Story Board Member	0.00	х						0.	0.	0.
Athen Walden Board Member	0.00	х						0.	0.	0.
Gene Ward										
Board Member Joe M Whitaker	0.00	Х				-	-	0.	0.	0.
Board Member	10.00	х						0.	0.	0.

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

Open to Public

2009

Department of the Treasury Internal Revenue Service Name of the Organization

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See instructions for Form 990.

Employler Identification number

Georgia Southern University Athletic Foundation, Inc. 58-1485954

[Pärtix] Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees												
(A) Name and Title	(B) Average hours	Posi	tion (C) call t	hat appl	y)	(D) Reportable	(E) Reportable	(F) Estimated		
	Average hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
Joseph F Whitaker Board Member	0.00	х						0.	0.	0.		
Cleve White	0.00	<u> </u>			_							
Board Member	0.00	х	ļ					0.	0.	0.		
David Whitlaw												
Board Member	0.00	х	İ					0.	0.	0.		
Wendel Wilson												
Board Member	0.00	х					İ	0.	0.	0.		
John Mulherin												
President	0.00	Х						0.	0.	0.		
Billy Griffis												
Ex Officio	0.00	Х						0.	0.	0.		
			<u> </u>									
	_						<u> </u>					

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047 2009

Open to Public

Internal Revenue Service	e ► Attac	h to Form	990 or	Form 990-	EZ. ► See se	parate in:	structions.				mep	cion	1.		
Name of the organization							Em	ployer i	dentifica	tion nu	mber				
Georgia Sou	thern University	Athlet	cic F	oundat:	ion, Inc.		58	3-148	3595	4					
Partil Exce	ess Benefit Transaction	ıs (sect	ion 50	1(c)(3) a	ind section	501(c)(4) organiza	ations Part V	only	/). 40h					
Compi	ete ii the organization answ	cicu ies	0111011	11 330, 1 al	117, 11116 234 (71 235, 01	101111 330-LZ,	Tare	, 11110	100.		(c) Cor	rected		
1	(a) Name of disqualified person				1	(b) Description	n of transaction					Yes	No		
						-						163			
		-													
													<u> </u>		
															
									_						
2 Enter the am section 4958	nount of tax imposed on the	organizati	on man	agers or di	squalified per	sons durii	ng the year u	nder	▶ \$			I			
	nount of tax, if any, on line 2	. above, r	eımburs	ed by the	organization				⊳ \$	_					
	s to and/or From Inter				- -										
	lete if the organization answ				t IV, line 26 oi	Form 990)-EZ, Part V, I	ine 38	a.						
(a) Name of :	nterested person and purpose		to or from		Original (d) Balance due ipal amount		(d) Balance due				In default? (f) Appro- by board committee		ard or		/ritten ment?
		То	From					Yes	No	Yes	No	Yes	No		
•								↓	ļ						
			 					+							
			ļ					+							
					•			 							
Total					▶ \$					S. 73.					
Part III Gran	nts or Assistance Bene plete if the organizatio	efitting l	I nteres ered 'Y	ted Pers	orm 990, F	art IV,	ine 27.								
(a) Nar	me of interested person		(b) Relatioi	nship between the orgar	interested persor nization	and	(4	c) Amoui	nt and ty	pe of as	sistano	е			
					_										
	•														
PartelV Busi Com	ness Transactions Inv plete if the organizatio	olving n answe	Interes	sted Pers	sons. orm 990, Pa	art IV, lı	ne 28a, 28	Bb, or	28c.						
(a) Nar	me of interested person					interested person and the transaction \$		p between (c) Amount of (d) Description of transaction on and the transaction \$			(d) Description of transaction			(e) Sharing organization	
		<u> </u>										Yes	No		
John Mulher	rin	Boar	d men	nber	2,09	4,978.	1					ļ	Х		
					!		bank for w	which	the p	presi	dent		<u></u>		

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

Board Member

Schedule L (Form 990 or 990-EZ) 2009

Х

is a board member

bank for which the president is a board member.

317,424. Outstanding loan at a

or 990-EZ.

John Mulherin

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047 2009

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Inspection Employer identification number

	Georgia Southern University Athletic Foundation, Inc. 58-148							
Par	t I Types of Property	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Metho	(d od of d rever	letermın	ıng
1	Art-Works of art .							
2	Art-Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	Х	11	83,000.				
7	Boats and planes							
8	Intellectual property .							
9	Securities-Publicly traded							
10	Securities-Closely held stock .						-	
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution— Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial	 						
17	Real estate—Other							
18	Collectibles							
19	Food inventory	x	13	34,220.				
20	Drugs and medical supplies			31/2201	•			
21	Taxidermy						•	
22	Historical artifacts				-			
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (Services)	X	57	163,748.				
26		- A	3,	105/740.				
27	`'						-	
28	Other ► ()							
	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	on during the t e Acknowledge	ax year for contribution	ns for which the	29			
				_			Yes	No
30 a	During the year, did the organization receive by combined for at least three years from the date of the purposes for the entire holding period?					30 a		Х
t	If 'Yes,' describe the arrangement in Part II							<u></u>
31	Does the organization have a gift acceptance poli	cy that require:	s the review of any noi	n-standard contributions	?	31	Х	
32 a	Does the organization hire or use third parties or noncash contributions?	related organiz	ations to solicit, proce	ss, or sell		32 a		х
t	If 'Yes,' describe in Part II							
33	If the organization did not report revenues in colu	mn (c) for a ty	oe of property for whic	h column (a) is checked	•			
	describe in Part II							

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
,

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Open to Public Inspection

Employer identification number

	Employer identification number
Georgia Southern University Athletic Foundation, Inc.	58-1485954
Pt_VI-B, Line 11A The 990 is distributed to the executive committee via email pr	ior to its filing for approval.
Pt_VI-C, Line 19 Available upon reguest	
Pt_VI-B, Line 12c Conflict of interest statements are maintained	annually
in a board file that the president maintains.	At the end
of each year, the executive committee discussed	potential
conflicts_of_interest_after_reviewing_the_year'	s_transactions
during a committee meeting.	
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