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DLN: 93493136025351

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)

2009

OMB No 1545-0047

Open to Public

Department of the Treasury

Form **990**

Check			r, or tax year beginning 07-01 C Name of organization	-2009 and ending 06-30-2010)	D Employer ide	ntification number
_	: If applications of the second secon	i icasc	THE UNIVERSITY OF FLORIDA FO	DUNDATION INC		59-0974739	
	change	label or print or	Doing Business As			E Telephone nu	
	-	type. See				(352) 392-1	.691
Initial i		Specific Instruc-	Number and street (or P O box PO BOX 14425	ıf maıl ıs not delivered to street addres	s) Room/suite	e G Gross receipts	
Temir		tions.					
Amend	ded retur	'n	City or town, state or country, ar GAINESVILLE, FL 326042425	nd ZIP + 4			
Applica	ation pen	nd ing	,				
			ne and address of principal of	ficer	H(a) Is t	 :hıs a group return	
		Tom m	ıtchell k 14425		affıl	ıates?	⊤Yes 🔽 No
			ville, FL 32604		H(b) Are	all affiliates include	ed? Fyes FN
							(see instructions)
Tax-e	exempt s	tatus 🔽 501(c)(3) ◀(Insert no)	(1) or 527	H(c) Gro	oup exemption nur	mber ►
Web:	site: 🟲	WWW UFF UFL	_ EDU				
orm o	of organia	ration 🔽 Corporat	tion Trust Association Othe	I have been	L Voor of	formation 1964 M	State of legal domicile F
art		ummary	ion nast Association other	: F	L rear or	TOTTIALION 1904	State of legal doffficile 1
,	TH RA	E UNIVERSITY ISE, INVEST, A		ost significant activities N, INC IS A NOT-FOR-PROFI' H ARE USED TO ASSIST WITH			
		ack this hav by	- If the organization discontin	and its operations or disposed	of more that	n 25% of its not a	ccatc
		•		ued its operations or disposed by (Part VI, line 1a)			ssets
		_		overning body (Part VI, line 1b			
		·	nployees (Part V, line 2a)	- , , , , ,	,		1
			olunteers (estimate if necessa			6	7
			•	art VIII, column (C), line 12	_		-3,129,7
		_	iness taxable income from For	•	76 7b		
					Pr	ior Year	Current Year
	8 C	ontributions and	d grants (Part VIII, line 1h)			138,271,443	115,410,38
			revenue (Part VIII, line 2g)				
10		-	, , , , , , , , , , , , , , , , , , , ,	es 3, 4, and 7d)		-14,109,384	9,939,54
1:	.1 0	ther revenue (P	art VIII, column (A), lines 5,		6,632,592	6,763,41	
1:	. 2 To	otal revenue—a	dd lınes 8 through 11 (must e	:			
\perp	12				130,794,651	132,113,34	
						· · ·	
1:	. 3 G	rants and simila	ar amounts paid (Part IX, colu	ımn (A), lınes 1-3)		128,641,194	
14	. 3 G . 4 Be	rants and sımıla enefits paıd to c	ar amounts paid (Part IX, colu or for members (Part IX, colun	ımn (A), lines 1-3)		· · ·	
14	. 3 G . 4 Be . 5 Sa	rants and sımıla enefits paıd to c alarıes, other co	ar amounts paid (Part IX, colu or for members (Part IX, colun	ımn (A), lınes 1-3)	-	· · ·	
14	.3 G .4 Be .5 Sa	rants and simila enefits paid to c alaries, other co D)	ar amounts paid (Part IX, colu or for members (Part IX, colun ompensation, employee benef	imn (A), lines 1-3)	-	128,641,194	21,454,17
14	.3 G .4 Be .5 Sa 10	rants and simila enefits paid to c alaries, other co D) rofessional fund	ar amounts paid (Part IX, colu or for members (Part IX, colun ompensation, employee benef draising fees (Part IX, column	nn (A), lines 1-3) nn (A), line 4) its (Part IX, column (A), lines 5 (A), line 11e)	-	23,447,743	21,454,17
14 19 10	3 G 4 Be 5 Sa 10 6a Pr	rants and simila enefits paid to c alaries, other co D) rofessional fund stal fundraising exp	ar amounts paid (Part IX, colu or for members (Part IX, colun ompensation, employee benef draising fees (Part IX, column denses (Part IX, column (D), line 25)	Imn (A), lines 1-3)	-	128,641,194 23,447,743 30,249	21,454,17
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Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The mission of the University of Florida Foundation, Inc is to support and enhance the University of Florida by encouraging alumni and friends to provide private funds and other resources for the University's benefit, to manage those assets, to provide volunteer leadership in support of the University's objectives, and to perform all business-related matters to accomplish these purposes

2	Did the organizatio the prior Form 990		ant program se		r which were not listed on	┌ Yes ┌ No
	If "Yes," describe t	hese new services on S	chedule O			
3		n cease conducting, or		nt changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Yes," describe t	hese changes on Scheo	lule O			
4	Section 501(c)(3)		tions and secti	on 4947(a)(1) trusts a	largest program services by are required to report the amo service reported	•
4a	(Code) (Expenses \$	28,602,557	ıncludıng grants of \$	26,744,143) (Revenue \$)
	The University of Flor of the University of Fl		and administers p	rivate support, in accordan	ce with donor restrictions, to the ma	ny colleges, units, and programs
4b	(Code) (Expenses \$	13,829,756	ıncludıng grants of \$	12,931,185) (Revenue \$)
	The Foundation received body at the University		the University, do	nor-provided financial aid t	o qualified students in order to attra	ct and maintain a diverse student
	(Code) (Expenses \$	12,270,524	ıncludıng grants of \$	11,473,263) (Revenue \$)
	The Foundation received endowed chairs and p		support for faculty a	and staff of the many colle	ges and units of the University of Fk	orida including, but not limited to,
4d	Other program se	rvices (Describe in Sc	hedule O) See :	also Additional Data f	or Description	
	(Expenses \$	45,175,633 in	cluding grants o	of \$ 42,240	,404) (Revenue \$)
4e	Total program ser	vice expenses►\$	99,878,47	0		
						Form 990 (2009)

art TV	Chacl	list of	Dequire	d Schedule	
	CHECK	AIISL UI	REUUIIEI	J SCHEUUIE	

			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	Yes	
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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	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		
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	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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	Yes	
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	Yes	
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, line10? 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		No
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			
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		Νο
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? <i>If</i> " <i>Yes,"</i> 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		N o
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? <i>If</i> " <i>Yes," complete Schedule G, Part I</i> "	17	Yes	
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		Νo

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	22		No
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? If "Yes," complete Schedule J	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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	Yes	
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		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? If "Yes," complete Schedule L, Part I	25b		Νο
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		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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33		No
34	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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other	IRS Filings	and Tax	Compliance
--------	------------	-----------	-------	-------------	---------	------------

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
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	Yes	
2a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	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		Νο
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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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		
ia	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	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
	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	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
u	Ti res, indicate the number of forms 5252 med during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
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		
3	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		Νο
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		Νο
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
l 1	Section 501(c)(12) organizations. Enter			
а	Gross income from 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)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

ALAN WEST

2012 W University Avenue GAINESVILLE,FL 32603 (352) 392-5958

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b

Section A G	overning Body and Management
proce	esses, or changes in Schedule O. See instructions.
pelov	v, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances,

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 97			
ь	Enter the number of voting members that are independent 1b 87	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1		
	other officer, director, trustee, or key employee?	2	Yes	
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		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
10-	Does the organization have local chapters, branches, or offiliates?	100	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
D	affiliates, and branches to ensure their operations are consistent with those of the organization?	10Ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		N o
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	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	104		140
	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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►AK, AZ, CA, CO, IL, KY, MD, MI, M NY, OH, OK, OR, SC, UT, WA, WI	N , NH	, NJ , N	ΙΜ ,
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			
4.0	Own website Another's website 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 inhysical address, and telephone number of the person who possesses the books and records of the	ie orda	nization	ո 🕪

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

		, age t
.6	3.715.960	668.25

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 14

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

Section B. Independent Contractors

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
University of Florida Investment Corp 4510 NW 6th Place 2nd Floor Gainesville, FL 32607	Investment Management	2,358,971
Marketing Communication Resource 731 Beta Dr Mayfield Village, OH 44143	Printing and Publications	447,546
CNS Telecommunications PO Box 112050 Gainesville, FL 32611	Computing and Networking	215,444
James Moore & Co 5931 NW 1 PI Gainesville, FL 32607	Auditing and Tax	148,677
Blue State Digital 734 15th St NW Ste 1200 Washington, DC 20005	Consulting	129,100
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 🗝 6

Form 99	•		f Davis and					Page 9
Part V	/	Statement o	or 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
nts nts	1a	Federated camp						
gra	Ь	•	es 1b	729,523				
ુંક	C	_	ents 1c					
<u>ਛ</u> ੍ਹੋਰ	d		ations 1d	9,142,384				
a Sign	e	Government grants						
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	ons, gifts, grants, and at included above butions included in 2,184,120	105,538,477				
SE	h	· -	s 1a-1f	▶	115,410,384			
Program Service Revenue	2a			Business Code				
æ	ь							
9	c							
E	d							
E	e							
ٿ ھ	f	All other progra	ım service revenue					
Š	g	Total. Add lines	s 2a-2f					
	3		ome (including dividen					
		and other simila	aramounts)	▶ [9,813,312		-3,136,211	12,949,523
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨				
	5	Royalties			2,723,290			2,723,290
			(ı) Real	(11) Personal				
	6a .	Gross Rents Less rental	358,539					
	Ь	expenses						
	C	Rental income or (loss)	358,539					
	d	Net rental incor	me or (loss)		358,539			358,539
			(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	186,780,085	1,153,383				
	Ь	Less cost or other basis and sales expenses	186,318,389	1,488,845				
	r C	Gain or (loss)	461,696	-335,462 	126,234			126,234
άs	d 8a	Gross income fi			120,234			120,234
Other Revenue		\$	reported on line 1c)					
T	ь	Less direct exp	penses b					
Õ	С	Net income or (loss) from fundraising	events 🕦				
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a					
	ь		penses b					
	c 10a	Gross sales of		vities				
	ь	returns and allo	owances . a oods sold b					
	с		loss) from sales of inve					
		Miscellaneous	s Revenue	Business Code				
	11a	Misc - Related		900,099	2,956,911	2,956,911		
	ь	Reunions and O		900,099	567,743	567,743		
	C	Transfers from		900,099	150,428	150,428		
	d	All other revenu			6,500		6,500	
	12	Total revenue	S 11a-11d	· · · · •	3,681,582			
		rotal levellue.	oce manuchons		132,113,341	3,675,082	-3,129,711	16,157,586 Form 990 (2009)

	990 (2009)				Page 10	
Par	t 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).					
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)	
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses	
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	93,388,995	93,388,995		Скрепосо	
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	707.464		424.000	252.562	
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	787,461		434,898	352,563	
7	Other salaries and wages	13,735,189	533,363	2,723,604	10,478,222	
8	Pension plan contributions (include section 401(k) and section	, ==,===		,,	, ,	
_	403(b) employer contributions)	832,424		832,424		
9	Other employee benefits	5,765,119	274,887	1,168,243	4,321,989	
10	Payroll taxes	333,979		180,257	153,722	
11	Fees for services (non-employees)					
а	Management				_	
b	Legal	-4,050	-12,827	4,889	3,888	
С	Accounting	192,294		192,294		
d	Lobbying	2,550		2,550		
e	Professional fundraising See Part IV, line 17	72,210			72,210	
f	Investment management fees	475,806	485,000	-9,194		
g	Other	869,526	322,486	110,069	436,971	
12	Advertising and promotion	8,673	55,633	-50,832	3,872	
13	Office expenses	1,955,258	525,083	604,066	826,109	
14	Information technology	155,641	2,820	127,126	25,695	
15	Royalties					
16	Occupancy	122,422	105,500	14,122	2,800	
17	Travel	587,317	-7,894	31,412	563,799	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	704,396	106,789	63,243	534,364	
20	Interest	398,502	398,502			
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	518,187	170,388	347,799		
23	Insurance	223,112	15,350	207,762		
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)					
а	Bad Debt Expense	2,630,464	2,630,574	-110		
b	Miscellaneous	219,979	658,156	-402,628	-35,549	
c	Entertainment	145,639	69	477	145,093	
d	Taxes on unrelated busi	140,815	140,815			
е	Allocations	0	84,781	-1,323,865	1,239,084	
f	All other expenses					
25	Total functional expenses. Add lines 1 through 24f	124,261,908	99,878,470	5,258,606	19,124,832	
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					

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	•		859,199	1	1,543,881
	2	Savings and temporary cash investments			176,812,040	2	55,004,902
	3	Pledges and grants receivable, net			74,554,660	3	78,603,564
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net			566,631	7	438,027
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	15,681,969			
	ь	Less accumulated depreciation	10b	4,787,465	8,701,484	10c	10,894,504
	11	Investments—publicly traded securities			247,890,413	11	6,810,473
	12	Investments—other securities See Part IV, line 11			812,140,624	12	1,269,738,710
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			54,703,982	15	87,481,435
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	tal assets. Add lines 1 through 15 (must equal line 34)				
	17	Accounts payable and accrued expenses .	7,675,920	17	9,540,010		
	18	Grants payable		18			
	19	Deferred revenue	revenue				2,873,500
	20	Tax-exempt bond liabilities	•			20	15,104,501
Şəļ	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	/				
ä		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	s .		1,700,000	23	2,200,000
	24	Unsecured notes and loans payable to unrelated third parties			5,356,435	24	13,205,112
	25	Other liabilities Complete Part X of Schedule D			27,348,058	25	30,834,573
	26	Total liabilities. Add lines 17 through 25			45,084,413	26	73,757,696
\$		Organizations that follow SFAS 117, check here ► ✓ and complet through 29, and lines 33 and 34.	plet e	lines 27			
nc	27	Unrestricted net assets			-40,339,831	27	-17,321,665
39 15	28	Temporarily restricted net assets			370,225,499	28	419,104,070
Fund Balances	29	Permanently restricted net assets			1,001,258,952	29	1,034,975,395
n		Organizations that do not follow SFAS 117, check here ▶ ☐ a	nd cor	nplet e			
Or F		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
As	32	Retained earnings, endowment, accumulated income, or other for	unds			32	
Net	33	Total net assets or fund balances			1,331,144,620	33	1,436,757,800
_	34	Total liabilities and net assets/fund balances			1,376,229,033	34	1,510,515,496
. —							

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	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	2c	Yes	
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			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
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	3b		

Form **990** (2009)

Name of the organization THE UNIVERSITY OF FLORIDA FOUNDATION INC

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection **Employer identification number**

				_							
				instructions))	Yes	No	Yes	No	Yes	No	
(i) Name of supported organization		of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization col (i) list your gover documen	on in ed in rning nt?	(v) Did you not organizati col (i) of support	on in your t?	(vi) Is the organizati col (i) orga in the U	on in inized S ?	(vii) A mount of support?
h				ed entity of a person g information about t						11g(iii)	
		(ii) a fa	mily membe	r of a person describ	ed ın (ı) abov	e?				11g(ii)	
				ectly or indirectly co joverning body of the	•	_	•	rsons descr	ribed in (ii)	11g(i)	Yes No
g		followin	ugust 17, 2 g persons?	006, has the organız							
e f	Γ	other th section If the oi	an foundatio 509(a)(2) rganization r	x, I certify that the o on managers and oth eceived a written de	er than one o	r more publi	cly supported	l organizatio	ns described	ın section 5(09(a)(1) or
10 11	, 	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Other									
10	_	its supp acquire	oort from gro d by the orga	ss investment incom anization after June 3	ne and unrela 30, 1975 Se	ted business e section 50	s taxable inco 9(a)(2). (Cor	ome (less se nplete Part I	ction 511 tax III)		
9	Γ			t normally receives ties related to its ex							
8		A comm	nunity trust (\)(vi) (Complete Pa described in section	170(b)(1)(A						
7	<u> </u>	An orga describ	nization that ed in	t normally receives a	substantial					n the general	public
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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
_	_		,	. ,	of a college o	ar university	owned or one	erated by a d	overnmental	unit docarib	
4	Г		al research l's name, cit	organization operate y, and state	ed in conjunct	tion with a h	ospital descri	ıbed ın secti	on 170(b)(1)((A) (iii) . Ente	r the
3	_			erative hospital serv				170(b)(1)(A	A)(iii).		
2	, -			in section 170(b)(1)				1)(A)(I).			
ne or	ganız —			e foundation because on of churches, or as:)		
Pari	_			olic Charity Stat						ructions	
									59-0974739		

Total

ınstructions

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.)

_	(complete only if yo	ou checked the	DOX OII IIIC 3,	7, 01 0 01 Tait 1	• /		
	ection A. Public Support endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	155,678,664	176,848,396	154,546,590	138,271,443	115,410,384	740,755,477
	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		1,678,256	1,466,742	1,442,256	1,458,225	6,045,479
4	Total. Add lines 1 through 3	155,678,664	178,526,652	156,013,332	139,713,699	116,868,609	746,800,956
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)						42,063,015
6	Public Support. Subtract line 5 from line 4						704,737,941
S	ection B. Total Support						
Cal	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	beginning in)	155,678,664	18,855,001	156,013,332	139,713,699	116,868,609	746,800,956
7 8	A mounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	17,844,008	18,855,001	25,541,149	11,835,903	12,865,141	86,941,202
10	Net income from unrelated business activities, whether or not the business is regularly carried on Other income (Explain in Part IV) Do not include gain or loss	2,046,372	2,337,810	6,383,794	3,484,290	3,675,082	17,927,348
11	from the sale of capital assets Total support (Add lines 7						
	through 10)						851,669,506
12	Gross receipts from related activit	ies, etc (See inst	tructions)		•	12	
13	First Five Years If the Form 990 is check this box and stop here			d, thırd, fourth, or f	fth tax year as a	501(c)(3) organ	ızatıon, ▶Г
	ection C. Computation of Pu						
14	Public Support Percentage for 200	•		11 column (f))		14	82 750 %
15	Public Support Percentage for 200	8 Schedule A, Pa	rt II, line 14			15	84 120 %
	33 1/3% support test—2009. If the and stop here. The organization que 33 1/3% support test—2008. If the	alıfıes as a publıc	ly supported org	anızatıon			►✓
	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization me	n qualifies as a p — 2009. If the org ation meets the "f	ublicly supported anization did not acts and circums	organization check a box on lin tances" test, chec	e 13, 16a, or 16 ck this box and st	o and line 14 c op here. Explain	rted _
ь 18	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organization Private Foundation If the organization	nization meets th ation meets the "f	e "facts and circ acts and circums	umstances" test, o tances" test The	heck this box an organization qua	d stop here. Iıfıes as a public	▶ ┌ y ▶ ┌

►□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

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

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

Explanation

Schedule A, Part II, Line 10, Explanation of Other Income Transfers from component units MISCELLANEOUS REUNIONS & EVENTS

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493136025351

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

						ction
	_	nswered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Po	litical (Camp	aign Activi	ties),
• Se	ection 501(c)(3) org ection 501(c) (other	ganizations Complete Parts I-A and B Do not complete Part I-C than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete tions Complete Part I-A only	Part I-E	3		
If th ♣ Se ♣ Se If th	e organization all ection 501(c)(3) org ection 501(c)(3) org e organization all	nswered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Loganizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A liganizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part IIswered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35), or (6) organizations Complete Part III	Do not c : II-B Do	omple not c	ete Part II-B omplete Part	: II-A
	me of the organiza	RIDA FOUNDATION INC	oyer ide	entific	ation numbe	er
1111	L ONIVERSITY OF TEOR		97473	9		
Par	t I-A Comple	te if the organization is exempt under section 501(c) or is a secti			ganizatio	n.
1	Provide a descri	ption of the organization's direct and indirect political campaign activities in Part IV				
2	Political expend	itures	F	\$		
3	V olunteer hours			-		
Par	t I-B Comple	te if the organization is exempt under section 501(c)(3).				
1	Enter the amoun	t of any excise tax incurred by the organization under section 4955	•	\$_		
2	Enter the amoun	t of any excise tax incurred by organization managers under section 4955	►	\$_		
3	If the organizati	on incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction	n made?			☐ Yes	┌ No
ь	If "Yes," describ	pe in Part IV				
Par	t I-C Comple	te if the organization is exempt under section 501(c) except sect	ion 50)1(c)(3).	
1	Enter the amoun	t directly expended by the filing organization for section 527 exempt function activiti	es 🕨	\$_		
2	Enter the amoun exempt funtion a	at of the filing organization's funds contributed to other organizations for section 527 activities	•	\$_		
3	Total exempt fur	nction expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	►	\$		
4	Did the filing org	anization file Form 1120-POL for this year?			☐ Yes	Г№
5	were made For	, addresses and employer identification number (EIN) of all section 527 political orga each organization listed, enter the amount paid from the filing organization's funds. Als ceived that were promptly and directly delivered to a separate political organization, s	o enter	the a	amount of po	litical

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000 \$1,000,000					
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?	Yes			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		545,041	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i			545,041	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ļ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
ь	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	

Part IV Supplemental Information

Taxable amount of lobbying and political expenditures (see instructions)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	Activities	ALL LOBBYING EXPENDITURES ARE INCURRED IN SUPPORT OF THE UNIVERSITY OF FLORIDA LOBBYING EXPENDITURES INCLUDE PAYMENTS TO LOBBYISTS AND LOBBYING ORGANIZATIONS THESE PAYMENTS CONSIST OF CONSULTING, TRAVEL REIMBURSEMENT, DUES, AND OTHER COSTS, as approved by the university of florida

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DLN: 93493136025351

OMB No 1545-0047

Open to Public Inspection

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.

Employer identification number Name of the organization THE UNIVERSITY OF FLORIDA FOUNDATION INC 59-0974739 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 Total number at end of year 3 100,000 Aggregate contributions to (during year) 1,000 3 Aggregate grants from (during year) Aggregate value at end of year 126,209 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Held at the End of the Year Total number of conservation easements 2a 1 Total acreage restricted by conservation easements 25 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d 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 🛌 1			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	▽ Yes	Γ	No
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌	0	00	
7	A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _	0		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(i)$ and $170(h)(4)(B)(i)$?	┌ Yes	١٧	No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, as balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describe organization's accounting for conservation easements			
)ai	t III. Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar A	ssets.		

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

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

4,598,242

(ii) Assets included in Form 990, Part X

30,599,862

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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D Schedule D (Form 990) 2009

Sch	edule D (Form 990) 2009								Page 2
Par	t IIII Organizations Maintaining Co	llections of Art,	Historical Tre	asures, or	Othe	er Similar	Asset	S (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any o	of the following the	at are a sıgnıf	ıcant ı	use of its col	lection		
а	Public exhibition		d 🔽 Loan or	exchange pro	gram	5			
b	✓ Scholarly research		e						
c	✓ Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further	the organizati	on's e	xempt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t					mılar	▼ Y	es	┌ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an				red "\	Yes" to For	m 990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other intermed	lary for contribution	ons or other a	ssets	not	▽ Y	es	☐ No
b	If "Yes," explain the arrangement in Part XI	V and complete the fo	llowing table						
							A moun		
с	Beginning balance				1c			•	206,010
d	Additions during the year				1d				96,508
е	Distributions during the year				1e			2,9	78,568
f	Ending balance				1f			23,0	23,950
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21?				ΓY	es	√ No
b	If "Yes," explain the arrangement in Part XIV	1							
Pa	rt V Endowment Funds. Complete								
_		(a)Current Year	(b)Prior Year	(c)Two Years	Back (d) Three Years	Back (e)	Four Y	ears Back
1a	Beginning of year balance	1,055,987,256	1,290,712,688						
b	Contributions	34,051,730	39,508,358						
c	Investment earnings or losses	103,431,556	-222,034,088						
d	Grants or scholarships	9,388,443	10,569,246						
e	Other expenditures for facilities and programs	27,518,658	31,159,481						
f	Administrative expenses	12,224,932	10,470,975						
g	End of year balance	1,144,338,509	1,055,987,256						
2	Provide the estimated percentage of the yea	r end balance held as							
а	Board designated or quasi-endowment 🕨								
Ь	Permanent endowment F 100.000 %								
c	Term endowment ►								
3a	Are there endowment funds not in the posses	ssion of the organizat	ion that are held a	nd admınıste	red fo	r the	_		
	organization by					Г		Yes	No
	(i) unrelated organizations						3a(i) 3a(ii)		No No
ь	(ii) related organizations				•	[3b		NO
4	Describe in Part XIV the intended uses of th	•			•		30		
Pa	rt VI Investments—Land, Buildings). Part X. lın	e 10.				
	Description of investment		(a) Cost or other basis (investment)	ner (b) Cost o	r other	(c) Accumul		(d) Bo	ok value
1a	Land			7.5	99,534				7,599,534
	Buildings				02,617		0,237		2,952,380
	Leasehold improvements			3,3	,	3,33	-,-3,		_,,,,,,,,,
	Equipment		_	1 5	79,818	1 23	7,228		342,590
	046		-	1,3	. 2,010	1,23	.,220		312,330
	II. Add lines 1a-1e (Column (d) should equal Fo	orm 990 Part X column	(B) line 10(c))			<u> </u>		1	0,894,504
		JJJ, raic A, colullii	. (=), 10(0)./		• •				90) 2009

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security) Financial derivatives		Cost or end-of-year market value
Closely-held equity interests		
Other		
Corporate Bonds	1,145,150	F
Commingled Funds	23,289,090	F
Hedge Strategies	1,968,761	F
Private Equity	1,243,335,709	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,269,738,710	
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
	. ,	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, lin		
(a) Descrip	otion	(b) Book value
Livestock and other assets		2,919,151
Real Estate Land Preserve		10,193,724
Accrued Interest Receivable		15,719,467 8,400
Permanent Collections		30,599,863
Externally Managed Trusts		2,213,141
Cash Advances		20,577
O ther Receivables		25,807,112
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	(5.)	▶ 87,481,435
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
Trust Liability	14,099,868	
A mounts invested on behalf of UF en	9,774,731	
Present Value of Future Annuity	6,399,182	
Deferred Management Fees	560,792	
Table (Oshura (h) da Harada a con a		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	30,834,573	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	132,113,341
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	124,261,908
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	7,851,433
4	Net unrealized gains (losses) on investments	4	96,461,009
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1,580,738
9	Total adjustments (net) Add lines 4 - 8	9	98,041,747
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	105,893,180
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	232,757,769
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	100,630,270
3	Subtract line 2e from line 1	3	132,127,499
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	-14,158
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	132,113,341
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	124,664,535
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	6,896,934
3	Subtract line 2e from line 1	3	117,767,601
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	6,494,307
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	124,261,908

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

Ident if ier	Return Reference	Explanation
Part II, Line 9	Description of How Organization Reports Conservation Easements	Contributions to the land preserve are generally recorded at their appraised value at the date of the gift, and are considered by management to be non-revenue producing assets. The value of the contributed non-revenue producing assets is included in the statement of activities.
Part III, Line 4		The organization receives and may hold art objects and other collections, including artifacts, books, manuscripts, and documents, either gifted to the organization for the benefit of the university of florida or acquired with funds gifted for that purpose these objects are held for use by the university's museums and libraries in furtherance of the university's educational mission
Part IV, Line 1b		The Foundation accepts gifts subject to split interest agreements. These gifts may be in the form of annuities, retained life estates or charitable remainder trusts. At the time of receipt, a gift is recorded based upon the fair value of assets donated less any applicable liabilities. Liabilities include the present value of projected future distributions to the annuity or trust beneficiaries and are determined using the internal revenue service rate for computing charitable deductions for such gifts in effect at the time of the gift ranging from 2.4% to 8.2%. Funds subject to split interest agreements are classified as temporarily restricted or permanently restricted based upon donor designations.
Part V , Line 4	Description of Intended Use of Endowment Funds	Endowment funds are established for a multitude of reasons to benefit the University of Florida The reasons include, but are not limited to, professorships, scholarships, research, facilities and general college support
Part XI, Line 8 - Other Adjustments		Increase in Split Value Agreement 1545736 recognized Deferred revenue previously recognized for tax purposes 35000 Rounding 2
Part XII, Line 2d - Other Adjustments		UF Alumni Association Activity reported on separate return 2545529 Advertising revenue recognized for book previously recognized for tax 35000 Rounding 1
Part XII, Line 4b - Other Adjustments		Reunions and Activities expenses shown as revenue on the tax return -14158
Part XIII, Line 2d - Other Adjustments		UF Alumni Association expenses reported on separate return 5294047 Reunions and activities expenses shown as revenue on tax return 14158 Rounding -2
Part XIII, Line 4b - Other Adjustments		Transfers to the UF Alumni Association not shown for book purposes 2748517 Pension changes shown as "other" on the financial statements 1119142 provision for doubtful pledges shown as "other" on financial statements 2626648

Additional Data

Software ID: Software Version:

EIN: 59-0974739

Name: THE UNIVERSITY OF FLORIDA FOUNDATION INC

Form 990, Schedule D, Part IX, - Other Assets

(a) Description	(b) Book value
Livestock and other assets	2,919,151
Real Estate	10,193,724
Land Preserve	15,719,467
Accrued Interest Receivable	8,400
Permanent Collections	30,599,863
Externally Managed Trusts	2,213,141
Cash Advances	20,577
Other Receivables	25,807,112

DLN: 93493136025351

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

2009

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

	e organization ERSITY OF FLORIDA FOUNDATION INC	Employer identification number
		59-0974739
Part I	Fundraising Activities. Complete if the organization answered "Yes" to Form 990-EZ filers are not required to complete this part.	n 990, Part IV, line 17.

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees

or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

Ye

The symmetric fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contr contribu Yes	erhave dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Scott I Peek	Fundraising		No	112,000	8,823	103,177
Melda H Bassett	Fundraising		No	111,000	36,779	74,221
	Bequest pledge fundraising		No	27,557	18,036	9,521
gerald h eidson	key donor relations		No	0	8,572	0
Total			250,557	72,210	186,919	

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

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	(d) To	otal Eve ol (a) th ol (c))	
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			. 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I (a) th ol (c))	
	1 (Gross revenue						
Ses	2 (Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			.			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> . .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
Ь		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.	
12		ne organization a grantor, beneficia ied to administer charitable gaming				. .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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General Information on Grants and Assistance

OMB No 1545-0047

DLN: 93493136025351

Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

Inspection

Department of the Treasury Internal Revenue Service

Schedule I (Form 990)

Name of the organization THE UNIVERSITY OF FLORIDA FOUNDATION INC Employer identification number

59-0974739

Form 990, Part IV	, line 21 for any	o Governments and recipient that received (0) if additional space i	I more than \$5,000.	Check this box if no	one recipient rec	eived more than \$5,0	00. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
JNIVERSITY OF FLORIDA PO BOX 113203 GAINESVILLE, FL 32611	596002052		59,568,941	17,244,681	appraisal, fmv	non-cash donations of tangible personal property for use by the university	A llocation
JNIVERSITY OF FLORIDA PO BOX 113203 GAINESVILLE, FL 32611	596002052		13,826,856				Scholarships
JFALUMNI ASSOCIATION PO BOX 14425 GAINESVILLE, FL 32604	592911059	501(c)(3)	2,748,517				A llocation

Part III	Grants and Other Assista	nce 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.					

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	1		<u> </u>	I	

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

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The UF Foundation transfers scholarship monies to the University of Florida Financial Aid Office Monitoring of these funds is done by the University's financial aid office. The UF Alumni Association (UFAA) operates as a unit within the University of Florida Foundation. Therefore, all cash disbursements for the UFAA are subject to the same controls as the UF Foundation. The UF Foundation transfers both cash and non-cash contributions to support the University of Florida, an Affiliated Entity. All contributions received are subject to the policies and procedures of the UF Foundation and are deemed adequate.

DLN: 93493136025351

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

THE UNIVERSITY OF FLORIDA FOUNDATION INC

Compensation Information

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.

Open to Public Inspection

			59-0974739			
Pa	rt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	▼ First-class or charter travel	Γ	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org	-		1b	Yes	
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organizatio organization's CEO/Executive Director Check all the Compensation committee		y			
	✓ Independent compensation consultant	Ţ	·			
	Form 990 of other organizations	Γ	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Por a related organization	art VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymen	nt?	4a		Νο
ь	Participate in, or receive payment from, a supplemen	tal non	qualified retirement plan?	4b		Νο
С				4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and pro					
	Only 501(c)(3) and 501(c)(4) organizations only mus	st comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, I compensation contingent on the revenues of	ıne 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νο
ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, l compensation contingent on the net earnings of	ıne 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de		•	7		No
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in		·			
	in Part III	Reys !	section 33 4330-4(a)(3), 11 Tes, describe	8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebutt	able presumption procedure described in Regulations	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)(1)-(111) 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 (I) Base compensation (I) Davis compensation (II) Davis compensation (III) Other comp									
(i) Base incentive reportable compensation reportable compensation compensation reportable	(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and		(E) Total of columns	
See Additional Data Table			(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation			benefits	(B)(ı)-(D)	Form 990 or
	See Additional Data Table								

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

Ident if ier	Return Reference	Explanation
		PRIVATE AIRCRAFT ARE USED, AS APPROPRIATE, WHEN UNIVERSITY OF FLORIDA FOUNDATION (UFF) DIRECTORS OR OFFICERS NEED TO MAKE A FUNDRAISING TRIP TO A LOCATION BEST ACCESSED BY SUCH PLANES TRAVEL IS PROVIDED, ON FUNDRAISING TRIPS, FOR COMPANIONS OF UFF
		DIRECTORS OR OFFICERS WHEN A BONA FIDE BUSINESS PURPOSE EXISTS

Schedule J (Form 990) 2009

Software ID: **Software Version:**

EIN: 59-0974739

Name: THE UNIVERSITY OF FLORIDA FOUNDATION INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												
(A) Name		(B) Breakdown o	f W-2 and/or 1099-MI\$	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation				
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ				
Larry R Arrington	(I)		0	0 12,485	0 34,071	0 13,908	0 337,852	0				
Brian C Beach	(1)		0	0 63,671	0 33,572	0 13,924	0 318,371	0 0				
Joseph Glover	(1)		0	0 11,404	0 33,398	0 7,037	0 361,155	0				
David S Guzick	(1)		0	0 182,009	0 26,132	0 7,672	0 555,848	0				
Robert H Jerry III	(I)		0	0 11,096	0 33,305	0 11,533	0 336,545	0 0				
J Bernard Machen	(I) (II)		0 225,000	0 455,384	0 29,710	0 14,821	0 1,151,368	0				
Mark R McLellan	(1)		0	0 11,492	0 28,157	0 11,432	0 287,576	0				
Donald P Pemberton	(1)		0	0 1,265	0 29,414	0 11,354	0 311,937	0				
Paul A Robell	(1)		0	11,019 1,224	28,915 3,213	12,747 1,416	289,733 32,192	0				
Leslie D Bram	(I) (II)		0	2,858 318	22,575 2,508	6,656 740	182,543 20,283	0				
Matthew M Fajack	(1)		0	0 10,422	0 23,040	0 13,936	0 257,403	0				
Carter Boydston	(1)		0	4,344 0	22,185 0	11,307 0	215,106 0	0				
Cynthia F Butler	(I) (II)		0	5,313 0	20,822	11,236 0	179,795 0	0				
Ann Mcelwain	(I) (II)		0	2,240	18,104 0	11,245 0	181,278 0	0				
Timothy Wood	(1)		0	3,697 0	16,025	5,508 0	177,387 0	0				
Kenneth DeV ries	(1)		0	5,618 0	19,033	11,234 0	179,195 0	0				
David Woodall	(1)	_	0	1,284	14,835	570 0	160,719 0	0				

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DLN: 93493136025351

OMB No 1545-0047

2009

Open to Public Inspection

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 0 (Form 990).
★ Attach to Form 990.
★ See separate instructions.

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

Name of the organization
THE UNIVERSITY OF FLORIDA FOUNDATION INC

Employer identification number

59-0974739

Pa	rt I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	cription of	Purpose	(g) De	feased	Beh	On alf of uer
											Yes	No	Yes	No
A	UNIVERSITY OF FLORIDA FOUNDATION INC	59-0974739	N O N E avail	01-28-	01-28-2009 15,450,00		50,000	EDUCATION					x	
Pa	rt∎ Proceeds				•	_		•			•			
1	Total proceeds of issue			1	x 5,225,018	 	В		<u> </u>	D	•		E	
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasan	ce escrows												,
4	Other unspent proceeds													
5	Issuance costs from proceeds				44,950									
6	Working capital expenditures from	proceeds			225,018	3								
7	Capital expenditures from proceed	is		1	4,955,050)								
8	Year of substantial completion			20	10			•				•		
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of a	a current refunding iss	sue?		Х									
10	Were the bonds issued as part of a	an advance refunding	ıssue?		Х									
11	Has the final allocation of proceed	s been made?		Х										
12	Does the organization maintain ad the final allocation of proceeds?	equate books and rec	ords to support	х										
Pai	t IIII Private Business Use					1				T				
					A	E L			C 	D			E	
1	Was the organization a partner in a which owned property financed by		mber of an LLC,	Yes	No X	Yes	No	Yes	No	Yes	No	Ye	5	No
2	Are there any lease arrangements which may result in private busine		nanced property		х									
For F	Privacy Act and Paperwork Reduction Ac	t Notice, see the Instr	uctions for Form 990			Cat No 50)193E				Schedule	K (Form	990) 20	09

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

		4	A	l	В	(С	l	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?		Х								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х								
3с	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?		x								
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 %				•		•		
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 %								
6	Total of lines 4 and 5		0 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		х								
Pa	TIV Arbitrage		•	•	•	•	•	•	•	•	•

		Α		В		С		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								
2	Is the bond issue a variable rate issue?		Х								
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		х								
ь	Name of provider						•				
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х								
ь	Name of provider		-				-				
С	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								
6	Did the bond issue qualify for an exception to rebate?		х								
									Cahadul	a V /Earm 00/	0) 2000

DLN: 93493136025351

OMB No 1545-0047

Open to Public

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Inspection **Employer identification number** THE UNIVERSITY OF FLORIDA FOUNDATION INC

59-0974739

Pa	Types of Property							
		(a)	(b)	(c)	(d))		
		Check	Number of Contributions	Revenues reported on	Method of do		nıng	
		ıf applıcable		Form 990, Part VIII, line 1g	reven	ues		
1	Art—Works of art	Х	53		faır market value			
	Art—Historical treasures .			4,070,040	ian market value			
	Art—Fractional interests							
		X		94.745	faır market value			
	Books and publications Clothing and household			34,743	iaii iliaiket value			
,	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	Х	96	2,955,737	fair market value			
	Securities—Closely held stock .			, ,				
	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation							
	contribution—Historic							
4.4	structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other	X	15	6.929.843	faır market value			
	Collectibles	X	1		fair market value			
	Food inventory			,				
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens	X	62	14.902.713	faır market value			
	Archeological artifacts			, ,				
	Other ► (livestock)	X	8	2.630	faır market value			
	equipment			_,				
26	Other ► (and supplies)	X	127	2,518,894	faır market value			
27	Other ► (auction items)	Х	218	62,488	faır market value			
	sponsorship							
28	Other ► (tickets/media)	X	3	1,925	fair market value			
29	Number of Forms 8283 received		=		29			40
	for which the organization compl	eted Form &	3283, Part IV, Donee Ackn	owledgement	25			
20-	During the year, did the organiza		a hu aantrihiitian anu nrana	why reported in Dort I. lines	1 20 +6-+ .+		Yes	No
Sua								
	must hold for at least three year			on, and which is not require	a to be used			NI -
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangeme	ent in Part I	ī.I					
31	Does the organization have a gif	tacceptand	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third parti	es or related organizations	to solicit, process, or sell i	non-cash			
	contributions?					32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report	: revenues i	n column (c) for a type of p	roperty for which 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.

Ident if ier	Return Reference	Explanation
Method for Determining Number of Contributors	, , , , ,	The number of contributions is determined as the number of contributions received
Third Party Use	1	The university of Florida foundation uses auction houses and third-party brokers to sell donated property

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 59-0974739

Name: THE UNIVERSITY OF FLORIDA FOUNDATION INC

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ Form 990 or to provide any additional information. ► Attach to Form 990.

DLN: 93493136025351 OMB No 1545-0047 Inspection

Name of the organization

THE UNIVERSITY OF FLORIDA FOUNDATION INC

Employer identification number

59-0974739

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		The follow ing individuals had a family relationship as self-disclosed annually -Allen Lastinger and Delores Lastinger -Marshall Criser, Jr and Marshall Criser, III

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		all amendments to the bylaw's and articles are subject to approval by the university of florida president

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		As best practices dictates, the IRS form 990 WAS reviewed and approved by the audit committee prior to its filing the board of directors officially delegated the responsibility for reviewing the form 990 to the audit committee by motion adopted by the full board

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The conflict of interest provision of the foundation's bylaw's requires disclosure of conflicts. At the beginning of each fiscal year, disclosure forms are sent to each director and officer. Any responses indicating a possible conflict are reviewed by legal counsel and the associate vice president/coo to determine whether further action is necessary.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Compensation for management is set by the president of the University of Florida, OR HIS DESIGNEE, in accordance with THE UNIVERSITY'S policies

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		The Form 990 is available on the organization's wiebsite. In addition, a copy will be made available upon request. The 1023 is available upon request.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		All are available on the University of Florida Foundation's wiebsite and upon request

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		The process for the selection of the independent auditor has remained consistent from the prior year

ldentifier	Return Reference	Explanation
FORM 990, SCHEDULE D, PART XI, LINES 10		DURING FISCAL YEAR ENDING 6/30/2008, THE UNIVERSITY OF FLORIDA ALUMNI ASSOCIATION (UFAA) ENTERED INTO A 10 YEAR PROMOTIONAL AGREEMENT WITH CHASE BANK USA UNDER THE AGREEMENT UFAA WAS TO RECEIVE TOTAL ADVERTISING REVENUE IN THE AMOUNT OF \$350,000 OVER THE 10 YEAR TERM FOR FINANCIAL STATEMENT PURPOSES THE REVENUE WAS DEFERRED TO BE RECOGNIZED OVER 10 YEARS IN THE AMOUNT OF \$35,000 PER YEAR ON THE FORM 990, ALL OF THE ADVERTISING REVENUE WAS RECOGNIZED AS OF 6/30/2008 CONSEQUENTLY, THERE WAS A BOOK/TAX DIFFERENCE RELATED TO DEFERRED REVENUE AND NET ASSETS REPORTED ON THE 2007 AND 2008 FORM 990'S IN THE CURRENT YEAR, THE ORGANIZATION CHANGED THE PRESENTATION OF THE TIMING DIFFERENCE THE END OF YEAR DEFERRED REVENUE AND NET ASSETS ON FORM 990 PART X HAS BEEN ADJUSTED TO AGREE TO THE FINANCIAL STATEMENTS THIS CHANGE REPRESENTS A RECLASSIFICATION BETWEEN DEFERRED REVENUES AND NET ASSETS ON FORM 990 PART XI AND THERE WERE NO CHANGES TO THE REVENUES OR EXPENSES REPORTED ON THE FORM 990 AS A RESULT OF THIS CHANGE IN PRESENTATION SEE BELOW FOR RECONCILIATION OF NET ASSETS AND CHANGES IN NET ASSETS FROM THE AUDITED FINANCIAL STATEMENTS TO THE TAX RETURN NET ASSETS PER THE FINANCIAL STATEMENTS TO THE TAX RETURN NET ASSETS PER THE FINANCIAL STATEMENTS TOTAL NET ASSETS AS OF 6/30/2010 \$1,436,757,800 EXCESS FOR THE YEAR PER THE FINANCIAL STATEMENTS \$105,893,180 NET ASSETS PER
		FORM 990 TOTAL NET ASSETS AS OF 6/30/2009 \$1,331,144,620 TOTAL NET ASSETS AS OF 6/30/2010 \$1,436,757,800 EXCESS FOR THE YEAR PER FORM 990 \$105,613,180 DIFFERENCE BETWEEN F/S AND FORM 990 \$280,000 SEE BELOW FOR DETAIL OF DIFFERENCE DEFERRED REV ENUE PER FORM 990 AS OF 06/30/2009 \$3,004,000 DEFERRED REV ENUE PER F/S AS OF 06/30/2009 \$3,284,000 DIFFERENCE \$280,000 NET ASSETS - END OF YEAR TOTAL NET ASSETS PER FORM 990 AS OF 6/30/2010 \$1,436,757,800 TOTAL NET ASSETS PER F/S AS OF 6/30/2010 \$1,436,757,800 DIFFERENCE \$0 DEFERRED REV ENUE PER FORM 990 AS OF 06/30/2010 \$2,873,500 DIFFERENCE \$0

ldentifier	Return Reference	Explanation
Schedule R, Part V, Line 2		the value of the amounts reported on line 2 is either the fair market value of services or property transferred, or the amount of cash consideration paid

DLN: 93493136025351

2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization THE UNIVERSITY OF FLORIDA FOUNDATION INC 59-0974739

Part I Identification of Disregarded Entities (Complete	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 Organiza or more related tax-exempt organizations during the		the organization an	swered "Yes" o	n Form 990, Part :	IV, line 34 because it had one									
(a) Name address and FIN of related organization	(b)	(c)	(d)	(e)	(f)									

(if section 501(c)(3)) or foreign country) entity university of florida po box 113203 FL N/A university gainesville, FL 32611 59-6002052 university of florida alumni association 2012 w university ave direct support organization FL 501(c)3 7 N/A gainesville, FL 32603 59-2911059

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 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) Dispropitionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana	j) eral or aging tner?
		'					Yes	No		Yes	No
	investment in other entities	DE	ufico Ilc	related	1,150,359	411,804,957		No	-3,064,233		No
4510 NW 6th NIACE	investment in other entities	DE	ufico Ilc	related	7,233,576	684,802,042		No	-71,972		No
	investment in other entities	DE	ufico Ilc	related	1,316,701	146,723,433		No			No

Identification of Related Organizations Taxable as a Corporation or Trust (Complete of 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

Sched	ıle R (Form 990) 2009		Pa	age 3
Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	lote. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Du	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b	Yes	
С	Gift, grant, or capital contribution from other organization(s)	1 c	Yes	
d	oans or loan guarantees to or for other organization(s)	1d	Yes	
e	oans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1 g		No
h	Exchange of assets	1h		No
i	ease of facilities, equipment, or other assets to other organization(s)	1i	Yes	
j	ease of facilities, equipment, or other assets from other organization(s)	1j	Yes	
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
1	erformance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n	Sharing of paid employees	1n	Yes	
o	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1р	Yes	
q	O ther transfer of cash or property to other organization(s)	1 q	Yes	

q Other transfer of cash or property to other organization(s)		Id fes
r Other transfer of cash or property from other organization(s)		1r No
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relations	hips and transaction thres	sholds
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) university of florida	D	25,272,876
(2) university of florida	I	196,046
(3) university of florida	J	1,458,225
(4) university of florida	N	6,978,047
(5) university of florida	Р	2,114,892
(6) university of florida	Q	90,640,478

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

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

(a) Name, address, and EIN of entity	(state or foreign partners country) section 501(c)(3) organizations?		(e) Share of end-of-year assets (f) Disproprtionate allocations?			(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		h) eral d lagin tner?		
			Yes	No		Yes	No		Yes	N
										+
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Software ID: Software Version:

EIN: 59-0974739

Name: THE UNIVERSITY OF FLORIDA FOUNDATION INC

Form 990, Schedule R, Part V - Transactions With Related Organizations

(c) A mount Involved (\$)	(b) Transaction type(a-r)	(a) Name of other organization		
25,272,876	D	university of florida	university of florida	(1)
196,046	I	university of florida	university of florida	(2)
1,458,225	J	university of florida	university of florida	(3)
6,978,047	N	university of florida	university of florida	(4)
2,114,892	Р	university of florida	university of florida	(5)
90,640,478	Q	university of florida	university of florida	(6)
_ _ _	P	university of florida university of florida university of florida	university of florida university of florida university of florida	(3)

Additional Data

Software ID:

Software Version:

EIN: 59-0974739

Name: THE UNIVERSITY OF FLORIDA FOUNDATION INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other progra	m services										
(Code) (Expenses \$	45,175,633	including grants of \$	42,240,404) (Revenue \$)						
The Foundation receives and administers private support for the University of Florida in other ways, including research funding, new building construction, equipment purchases, and renovation of existing facilities											

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		(C) tion (ch that app		heck all ply)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
William J Alcorn Director	1 00	×						О	0	0		
S Andrew Banks Director	1 00	Х						0	0	0		
Kelley A Bergstrom Dırector	1 00	×						0	0	0		
Laurie B Burns Director	1 00	Х						0	0	0		
Ann B Bussel Dırector	1 00	×						0	0	0		
Robert B Carter Director	1 00	×						0	0	0		
Marshall M Criser III Director	1 00	Х						0	0	0		
Troy M Davis Director	1 00	×						0	0	0		
Thomas M Donahoo Director	1 00	Х						0	0	0		
William E Dudziak Director	1 00	Х						0	0	0		
Maurice O Edmonds Director	1 00	Х						0	0	0		
John W Frost II Director	1 00	Х						0	0	0		
Robert H Gidel Director	1 00	х						0	0	0		
Hariot H Greene Director	1 00	Х						0	0	0		
James R Harper Director	1 00	Х						0	0	0		
Scott G Hawkins Director	1 00	Х						0	0	0		
David H Hughes Director	1 00	Х						0	0	0		
Susan M Ivey Director	1 00	Х						0	0	0		
John W Kırkpatrıck III Dırector	1 00	Х						0	0	0		
Delores T Lastinger Director	1 00	Х						0	0	0		
Carlos E Martinez Director	1 00	Х						0	0	0		
Debra G Nouss Director	1 00	Х						0	0	0		
M Ann O'Brien Director	1 00	Х						0	0	0		
Albert C O'Neill Jr Director	1 00	Х						0	0	0		
Paul T Phillips Director	1 00	×						0	0	0		

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		tion (that a	che	')	_	1	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Michael W Poole Director	1 00	×						0	0	0		
William F Powers Director	1 00	Х						0	0	0		
Kathryn S Pressly Director	1 00	х						0	0	0		
J Crayton Pruitt Sr Director	1 00	Х						0	0	0		
Alexis C Pugh Director	1 00	Х						0	0	0		
Davis M Rembert Jr Director	1 00	Х						0	0	0		
Fred N Roberts Sr Director	1 00	Х						0	0	0		
Garrison A Rolle Director	1 00	х						0	0	0		
Jose M Sanchez Director	1 00	х						0	0	0		
Sachio Semmoto Director	1 00	х						0	0	0		
Thomas J Shannon Jr Dırector	1 00	х						0	0	0		
Jeffrey S Shuman Dırector	1 00	х						0	0	0		
W Crit Smith Director	1 00	х						0	0	0		
Hans G Tanzler III Dırector	1 00	х						0	0	0		
Warren L Tedder Jr Dırector	1 00	х						0	0	0		
John K Vreeland Dırector	1 00	х						0	0	0		
Joel D Wahlberg Dırector	1 00	Х						0	0	0		
B J Wilder Director	1 00	х						0	0	0		
Warren M Cason Lıfe Members	1 00	х						0	0	0		
Nathan S Collier Life Members	1 00	х						0	0	0		
Snead Y Davis Life Members	1 00	Х						0	0	0		
William A Emerson Life Members	1 00	х						0	0	0		
Frederick E Fisher Life Members	1 00	х						0	0	0		
Don Fuqua Lıfe Members	1 00	Х						0	0	0		
Gary R Gerson Life Members	1 00	x						0	0	0		

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		tion (that a	che	')	_		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Pedro J Greer Jr Lıfe Members	1 00	х						0	0	0		
Ben Hill Griffin III Life Members	1 00	Х						0	0	0		
John B Hıgdon Jr Lıfe Members	1 00	х						0	0	0		
Andrew H Hines Jr Life Members	1 00	Х						0	0	0		
William R Hough Life Members	1 00	Х						0	0	0		
Robert F Lanzillotti Life Members	1 00	Х						0	0	0		
Allen L Lastinger Jr Life Members	1 00	Х						0	0	0		
David Lawrence Jr Life Members	1 00	Х						0	0	0		
Robert C Magoon Life Members	1 00	Х						0	0	0		
Wayne K Masur Lıfe Members	1 00	Х						0	0	0		
J Wayne Mixson Life Members	1 00	Х						0	0	0		
Corneal B Myers Jr Life Members	1 00	Х						0	0	0		
Nell W Potter Lıfe Members	1 00	Х						0	0	0		
Judy Lynn Prince Life Members	1 00	Х						0	0	0		
Johnson S Savary Lıfe Members	1 00	Х						0	0	0		
Lewis M Schott Life Members	1 00	Х						0	0	0		
Stephen Shey Lıfe Members	1 00	Х						0	0	0		
Richard T Smith Life Members	1 00	Х						0	0	0		
Alfred C Warrington IV Life Members	1 00	Х						0	0	0		
E Travis York Life Members	1 00	Х						0	0	0		
Carlos J Alfonso Ex-Officio	1 00	Х						0	0	0		
Larry R Arrington Ex-Officio	1 00	Х						0	289,873	47,979		
Brian C Beach Ex-Officio	1 00	Х						0	270,875	47,496		
Karen A Bjorndal Ex-Officio	1 00	Х						0	129,723	19,981		
Robert A Bryan Ex-Officio	1 00	Х						0	0	0		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations
Marshall M Criser Jr Ex-Officio	1 00	Х						0	0	0
Jerry W Davis Ex-Officio	1 00	Х						0	0	0
Juan A Galan Jr Ex-Officio	1 00	Х						0	0	0
Joseph Glover Ex-Officio	1 00	Х						0	320,720	40,435
David S Guzick Ex-Officio	1 00	Х						0	522,044	33,804
Stumpy Harris Ex-Officio	1 00	Х						0	0	0
Mark Hulsey Ex-Officio	1 00	Х						0	0	0
Robert H Jerry III Ex-Officio	1 00	Х						0	291,707	44,838
Jordan Johnson Ex-Officio	1 00	Х						0	0	0
Jeffrey Q Jonasen Ex-Officio	1 00	Х						0	0	0
D Burke Kıbler III Ex-Officio	1 00	х						0	0	0
John V Lombardı Ex-Officio	1 00	Х						0	0	0
J Bernard Machen Ex-Officio	1 00	Х						0	1,106,837	44,531
W A McGriff III Ex-Officio	1 00	Х						0	0	0
Mark R McLellan Ex-Officio	1 00	Х						0	247,987	39,589
Joelen K Merkel Ex-Officio	1 00	Х						0	0	0
Whitfield M Palmer Jr Ex-Officio	1 00	Х						0	0	0
Donald P Pemberton Ex-Officio	1 00	Х						0	271,169	40,768
Doyle Rogers Ex-Officio	1 00	х						0	0	0
Joan D Ruffier Ex-Officio	1 00	Х						0	0	0
A Ward Wagner Jr Ex-Officio	1 00	Х						0	0	0
Charles E Young Ex-Officio	1 00	Х						0	0	0
Lında C McGurn Chaır	1 00			х				0	0	0
Keith T Koenig Vice Chair	1 00			х				0	0	0
Paul A Robell Executive Vice President	32 00			х				248,071	27,563	46,291

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

compensated Employees, and Independent contractors										
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Leslie D Bram Associate V P	32 00			х				153,312	17,035	32,479
Matthew M Fajack Treasurer	1 00			х				0	220,427	36,976
Alan M West Assistant Treasurer	40 00			х				97,507	0	17,467
Susan G Goffman Secretary	40 00			х				125,450	0	13,517
Carter Boydston Senior Associate Vice Pres	40 00				х			181,614	0	33,492
Cynthia F Butler Assistant Vice President	40 00					Х		147,737	0	32,058
Ann Mcelwain Assistant Vice President	40 00					х		151,929	0	29,349
Timothy Wood Assistant Vice President	40 00					х		155,854	0	21,533
Kenneth DeVries Associate Vice President	40 00					х		148,928	0	30,267
David Woodall Sr Dir for Strategic Initiatives	40 00					х		145,314	0	15,405

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

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Bad Debt Expense	2,630,464	2,630,574	-110	
Miscellaneous	219,979	658,156	-402,628	-35,549
Entertainment	145,639	69	477	145,093
Taxes on unrelated busi	140,815	140,815		
Allocations	0	84,781	-1,323,865	1,239,084