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Form **990**

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the	2009 cal	endar yea	r, or tax year beginning 07	-01-2009 and	ending 06-30-201	0	1 n c		
			Please	C Name of organization University of Central Florida I	oundation Inc				identification r	1umber
	dress ch	nange	use IRS label or	Doing Business As				59-6211 E Telephone		
	me cha		print or type. See					(407) 88	2-1220	
	tıal retu		Specific Instruc-	Number and street (or P O b 12424 Research Parkway	ox ıf maıl ıs not de	livered to street addre	ss) Room/suite		ots \$ 85,586,037	
	mınate		tions.							
	ended			City or town, state or country Orlando, FL 32826	, and ZIP + 4					
A pı	plication	n pending								
				ne and address of principa T J HOLMES JR - CEO	officer			is a group ret		- E N
			12424	RESEARCH PARKWAY			аппп	ates?	, res	s 🔽 No
			ORLAN	DO,FL 32826				ll affiliates incl		Yes No
— Та	x-exen	npt status	▼ 501(c)	(3) ◄ (insert no)	(a)(1) or			o," attach a lı		ıctıons)
							H(c) Gro	up exemption	number 🟲	
		e: ► www							ı	
			<u> </u>	ion Trust Association C	other 🟲		L Year of fo	ormation 1968	M State of lega	al domicile FL
Pa	rt I	Summ Briefly de		e organization's mission oi	most significa	nt activities				
	-	The UCF	Foundation	on, Inc is a not for profit o			sion and visi	on of the Univ	ersity of Cent	ral Florida
ತ		through i	ts many f	undraising activities						
Governance										
ĘĘ.										
<u> </u>	2	Check th	ıs box 🛏	if the organization discor	itinued its opera	ations or disposed	of more than	25% of its ne	t assets	
2 6	3	Number	of voting r	nembers of the governing l	oody (Part VI, li	ne 1a)			3	
ĭes	4			dent voting members of th)	•	4	
Activities	5			nployees (Part V, line 2a)					5	
Ą	6			lunteers (estimate if nece					6	600
				ted business revenue from			•		7a	, and the second second
	Ь	Net unre	lated busi	ness taxable income from	Form 990-1, III	ne 34			7b	72,375
		Control		d aranta (Davit VIII duna 1 h	. \		Pric	or Year	Current	
ē	8			l grants (Part VIII, line 1h revenue (Part VIII, line 2ç				14,964,623		9,517,815
ē	9 10			revenue (Part VIII, line 2ç ne (Part VIII, column (A),		74)		-8,396,363		520,121 7,451,040
Raveni	11			art VIII, column (A), lines	• •	•		5,740,153		4,078,232
	12			dd lines 8 through 11 (mus				3,7 10,133		1,070,232
	ļ	12) .		<u> </u>	<u> </u>	<u> </u>		12,921,329		21,567,208
	13			r amounts paid (Part IX, c		•		14,785,996	1	13,446,659
	14			r for members (Part IX, co						0
88	15	Salaries 10)	s, other co	empensation, employee be	nefits (Part IX,	column (A), lines 5	5 –	9,257,148		8,371,551
Expenses	16a	•	ıonal fund	raising fees (Part IX, colui	nn (A), line 11¢	e)		43,530		6,500
\$	ь			enses (Part IX, column (D), line						
Ш	17			Part IX, column (A), lines		24f)		4,241,265		4,812,364
	18	Total ex	kpenses A	Add lines 13–17 (must eq	ual Part IX, colu	umn (A), line 25)		28,327,939	2	26,637,074
	19	Revenu	e less exp	enses Subtract line 18 fr	om line 12 .			-15,406,610	-	-5,069,866
\$ 8 8 8							_	g of Current	End of	Year
Not Assets or Fund Balances	30	T-1-1-	note /5-	+ V lung 15\				/ear		
ASS HB:	20 21			t X, line 16)				232,873,165 49,152,733	1	25,958,256
発展	22		-	d balances Subtract line 2				183,720,432		\$1,755,174 34,203,082
	121		ture Blo		.1 Hom file 20	<u> </u>		103,720,432	1	14,203,002
				лигу, I declare that I have exam	nined this return, ir	ncluding accompanying	schedules and s	statements, and	o the best of my	knowledge
		and belief	f, it is true, o	correct, and complete Declaration	n of preparer (oth	er than officer) is base	d on all informat	tion of which pre	parer has any kn	owledge
Sigr	1						2011	-05-12		
Here		Signat	ure of office	r			Date	-03-12		
		GEOR	GE ROCKY Y	EARWOOD CFO						
			or print nam							
		Preparer's			Date		Check If		ntıfyıng number	
Paid		signature					self- empolyed 🕨 🦵	(see instruction	ons)	
	arer's		ne (or yours	ERNST & YOUNG US LLP			•	FTA: b		
Use	Only	ıf self-em address, a	ployed), and ZIP + 4	55 IVAN ALLEN BLVD SUITE	1000			EIN Þ		
			·	ATLANTA, GA 30308	= =			Phone no 🕨	(404) 874-8300)
May '	the IR	RS discuss	this retu	rn with the preparer shown	above? (see in	structions)				

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

SEE SCHEDULE O

2	Did the organization the prior Form 990	, -	ant program se	rvices during the year v	which were not listed on	☐ Yes ☑ No
	If "Yes," describe th	iese new services on S	chedule O			
3	Did the organization services?		make sıgnıfıcan	t changes in how it con	ducts, any program	┌ Yes ┌ No
	If "Yes," describe th	iese changes on Sched	lule O			
4	Section 501(c)(3) a	ind 501(c)(4) organiza	tions and sectio	-	argest program services by e required to report the amo ervice reported	•
4a	(Code) (Expenses \$	10,447,550	ıncludıng grants of \$	8,636,107) (Revenue \$	6,228)
	ACADEMIC SUPPORT -	SEE SCHEDULE O				
4b	(Code) (Expenses \$	3,025,711	ıncludıng grants of \$	2,948,702) (Revenue \$	2,695)
	Scholarships are desigr	ned to reward, encourage a	nd assist students ir	n pursuing academic exceller		olarships to benefit UCF students verse student body that continues ministration and processing
	(Code) (Expenses \$	2,537,407	ıncludıng grants of \$	5,200) (Revenue \$	278,166)
		nhances the lives of UCF ali ningful services and engagi			s them by fostering mutually ben	eficial relationships The alumni
	Other program ser	vices (Describe in Sc	hedule O)			
	(Expenses \$	3,457,457 in	cluding grants o	f\$ 1,856,6	50) (Revenue \$	234,692)
4e	Total program serv	rice expenses►\$	19,468,12	5		
						Form 990 (2009)

Part IV	Ched	klist	of Re	auire	d Sche	dule
	~ ~	-KIISt	01 110	uunci	4 2011	·uuics

	•		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		N o
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		N o
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		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V 🗗	10	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	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ĺ	ĺ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
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	Yes	
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		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		N o

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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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	Yes	
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		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? 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	

orm	990 (2009)			Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable	3		
L		4		
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	. 1c	Yes	
	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			
		0		
	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		
	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	
	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		l No
	·			110
	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		Νο
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		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		100	
	file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
_	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
_	benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	7		
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	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	-		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	7		
	against amounts due or received from them)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			1

12424 Research Parkway Suite 140

Orlando, FL 32826 (407) 882-1220

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

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 47			
b	Enter the number of voting members that are independent 1b 44			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		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		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
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		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
- 110	venue deuci,		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11				
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		.,	
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	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		Νo
b	Other officers or key employees of the organization	15b		Νο
	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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	Let the Chates with which a compatible form 000 to recover the fields			
17	List the States with which a copy of this Form 990 is required to be filed			
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 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, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n ►
	George 'Rocky' Yearwood			

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	me and Title A verage hours		(C tion (hat a	ched	ckal)	I		(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										

1b Total	1,333,833	0 228,560
----------	-----------	-----------

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 11

			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	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? 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 J for such person	5	Yes	

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
CUSHMAN WAKEFIELD 12424 RESEARCH PARKWAY ORLANDO, FL 32826	MANAGEMENT SERVICES	562,949
D A BUILDING SERVICES 321 GEORGIA AVENUE LONGWOOD, FL 32750	MAINTENANCE	432,086
J TUFFORD ASSOCIATES 1031 SUNSHINE LANE ALTAMONTE SPRINGS, FL 32714	CONSTRUCTION	296,507
MECHANICAL SERVICES OF CENTRAL FLOR 9820 SATELLITE BLVD ORLANDO, FL 32837	MAINTENANCE	271,542
SHAFFER AC REFRIGERATION SERVICE 12488 KIRBY SMITH ROAD ORLANDO, FL 32832	A/C & HEAT MAINT	203,737
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 1-16

Page 8

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
\$ \$	1a	Federated campaigns	la				
돌	ь	Membership dues 1	.b 255,072				
ΣĘ	С	Fundraising events 1	27,890				
Contributions, gifts, grants and other similar amounts	d	Related organizations 1					
	e	Government grants (contributions)	e 3,913,734				
	f	All other contributions, gifts, grants, and			İ		i
호	g	similar amounts not included above Noncash contributions included in					
ntri do	9	lines 1a-1f \$ 40,726					
a O∎	h	Total. Add lines 1a-1f	▶	9,517,815			
			Business Code				
Ę	2a	PROGRAM REVENUE	611,710	520,121	518,024	2,097	
e ve	ь		·	,		· · · · · · · · · · · · · · · · · · ·	
ē. H	c						
ž	d	·					
33	e						
<u>.</u>	f	All other program service revenue					
Program Serwce Revenue	-						
т.	g	Total. Add lines 2a-2f		520,121			
	3	Investment income (including divide	 	2,659,015			2,659,015
	4	and other similar amounts)	 	2,033,013			2,033,013
	5	Royalties		255,016		41,900	213,116
		(i) Real	(II) Personal			<u> </u>	· ·
	6a	Gross Rents 11,347,865	(11)				
	ь	Less rental 7,666,106					
	l c	expenses Rental income 3,681,759					
	d	or (loss) Net rental income or (loss)		3,681,758		41,952	3,639,806
	<u> </u>	(i) Securities	(II) O ther	3,001,730		11,332	3,033,000
	7a	Gross amount from sales of assets other than inventory	(II) O thei				
	b	Less cost or 56,330,281 other basis and sales expenses					
	С	Gain or (loss) 4,792,025		4 700 005			4 702 025
	d	Net gain or (loss)		4,792,025			4,792,025
Other Revenue	8a	Gross income from fundraising events (not including \$\frac{27,890}{\text{of contributions reported on line 1c}}\$\$\$	a 35,882				
ije B	ь	Less direct expenses	b 22,442				
ŏ	с	Net income or (loss) from fundraising		13,440			13,440
	9a	Gross income from gaming activities See Part IV, line 19	a				
	ь	·	ь				
	С	Net income or (loss) from gaming ac	tivities	0			
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of in	ventory ►	o			
		Miscellaneous Revenue	Business Code				
	11a	A dvertising	541,800	124,261		124,261	
	ь	Miscellaneous Revenue	900,099	3,757	3,757		
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		120.010			
			▶	128,018			
	12	Total revenue. See Instructions .	►	21,567,208	521,781	210,210	11,317,402
							Form 990 (2009)

	990 (2009)				Page 10	
Part IX Statement of Functional Expenses						
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).						
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	13,436,875	·			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	9,784	9,784			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	3,704			
4	Benefits paid to or for members	0]		
5	Compensation of current officers, directors, trustees, and key employees	1,067,135	638,263	269,306	159,566	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0				
7	Other salaries and wages	5,809,457	1,891,967	2,490,655	1,426,835	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	480,755	108,094		190,471	
9	Other employee benefits	670,039	136,580	 	229,369	
10	Payroll taxes	344,165	79,387	133,605	131,172	
11	Fees for services (non-employees)	544,103	73,307	155,005	131,172	
		0				
a	Management			20.102	4.250	
b	Legal	25,977	1,535	 	4,250	
C	Accounting	140,186	170 770	140,186	0	
d	Lobbying	170,778	170,778	0	0	
e	Professional fundraising See Part IV, line 17	6,500			6,500	
f	Investment management fees	152,619	132,817	 	0	
g	Other	955,361	718,628	 	96,371	
12	Advertising and promotion	227,663	145,363	 	79,041	
13	Office expenses	412,213	212,878	97,030	102,305	
14	Information technology	145,367	2,194	132,279	10,894	
15	Royalties	0				
16	Occupancy	0				
17	Travel	352,163	295,424	21,576	35,163	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings	437,443	360,047	20,268	57,128	
20	Interest	189,840	189,031	809		
21	Payments to affiliates	0				
22	Depreciation, depletion, and amortization	173,877	6,667	167,210		
23	Insurance	106,539	41,571	61,569	3,399	
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	Banquets & Receptions	368,161	307,030	9,543	51,587	
b	Printing & Reproduction	159,945	88,091	15,792	56,062	
С	External Event Sponsorships	143,786	87,478	0	56,308	
d	Rental - Other	141,385	70,181	49,112	22,092	
e	DUES & MEMBERSHIPS - ORG	84,883	74,904	5,218	4,760	
f	All other expenses	424,179	262,558	· · · · · · · · · · · · · · · · · · ·	99,053	
25	Total functional expenses. Add lines 1 through 24f	26,637,074	19,468,125	· ·	2,822,326	
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	20,037,074	15,100,125	1,510,022	2,022,320	
	,g	1				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			102,100	1	102,100
	2	Savings and temporary cash investments			21,774,129	2	22,633,887
	3	Pledges and grants receivable, net			12,912,003	3	6,647,016
	4	Accounts receivable, net			362,588	4	256,336
	5	Receivables from current and former officers, directors, trustees 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 of		n 4958(f)(1)) and			
		Schedule L		6			
Assets	7	Notes and loans receivable, net				7	
8	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			1,137,787	9	1,102,629
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	88,315,621			
	ь	Less accumulated depreciation	10b	12,942,934	76,080,333	10c	75,372,687
	11	Investments—publicly traded securities			120,365,705	11	115,207,895
	12	Investments—other securities See Part IV, line 11				12	4,476,734
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11			138,520	15	158,972
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			232,873,165	16	225,958,256
	17	Accounts payable and accrued expenses .			9,692,757	17	3,072,502
	18	Grants payable			291,908	18	215,349
	19	Deferred revenue			2,765,993	19	2,604,662
	20	Tax-exempt bond liabilities			18,785,000	20	0
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties		•	16,758,181	23	34,959,226
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			858,894	25	903,435
	26	Total liabilities. Add lines 17 through 25			49,152,733	26	41,755,174
es		Organizations that follow SFAS 117, check here ▶ ☐ and comp through 29, and lines 33 and 34.	olet e l	ines 27			
anc	27	Unrestricted net assets				27	
- 60 60	28	Temporarily restricted net assets				28	
<u> </u>	29	Permanently restricted net assets				29	
<u>.</u> =		Organizations that do not follow SFAS 117, check here ▶ 🔽 ar	ıd con	ıplet e			
or Fund Balance		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			33,370,230	30	32,209,602
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			43,645,277	31	43,358,129
	32	Retained earnings, endowment, accumulated income, or other fu	ınds		106,704,925	32	108,635,351
Net	33	Total net assets or fund balances			183,720,432	33	184,203,082
-	34	Total liabilities and net assets/fund balances			232,873,165	34	225,958,256

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
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 Consolidated basis Both consolidated and separated basis			
3а	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)

OMB No 1545-0047

45 NO 1545-00-

2009

2009

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

ns. Inspection
Employer identification number

University of Central Florida Foundation Inc

59-6211832

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

Pa	rt I	Reaso	n for Pub	olic Charity Stat	us (All orga	anızatıons	must compl	ete this par	t.) See inst	ructions	
he o	organız	zation is i	not a private	foundation because	ıtıs (Forlır	nes 1 throug	h 11, check d	only one box)		_
1	\vdash	A churc	h, conventic	n of churches, or as:	sociation of d	hurches se	ction 170(b)	(1)(A)(i).			
2	Г	A schoo	Idescribed	ın section 170(b)(1)	(A)(ii). (Atta	ach Schedul	eЕ)				
3				erative hospital serv				170(b)(1)(A	.)(iii).		
4	F	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
_	<u></u>	An organization operated for the honefit of a college or university ewind or operated by a governmental unit described in									
5	<u> </u>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)									
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)				al public					
8	г			described in section		Myi) (Com	nlete Part II)	1			
9	<u>'</u>			normally receives					tions mamba	rchin foos	and arose
9	'			ties related to its ex							
		•		ss investment incom	•	-		• •	` '		
				anızatıon after June 3						() IIOIII Dus	illesses
10	_			anization after June 1	•			•	•		
10 11	<u> </u>			anized and operated						arry out th	a nurnosas of
	,	one or m	nore publicly	supported organization or supported organization of supported organization of supported by Type II	tions describ rting organiz	ed in sectionation	n 509(a)(1) d	or section 50 11e through	9(a)(2) See	section 509	
e	Γ	other th		x, I certify that the o in managers and oth							
f			-	eceived a written de	termination f	rom the IRS	that it is a Ty	ype I, Type I	I or Type III	supporting	organization,
g			ugust 17, 2	006, has the organız	atıon accept	ed any gift o	or contribution	n from any of	the		l
		-	g persons?		ntrolo ostbos		aathar with no		ubad up (u)		V N-
				ectly or indirectly co			-	ersons descr	ibea in (ii)	11/:	Yes No
				overning body of the			.ion?			11g(i	
		• •	•	r of a person describ						11g(ii	
				ed entity of a person						11 g(ii)
h		Provide	the followin	g information about t	ne supported	1 organizatio	on(s)				
(ii) Name of supported organization (see (iii) Name of supported organization (see (iii) Civ) Is the organization in col (i) listed in your governing document? (iv) Is the organization in col (i) of your support? (v) Did you notify the organization in col (i) of your support? Is the organization in col (i) of your support? in the U S ?					(vii) A mount of support?						
				instructions))	Yes	No	Yes	No	Yes	No	
ot a	ī										

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

	(Complete only if y	ou checked the	box on line 5, 7	<u>, or 8 of Part I.</u>	.)			
	ection A. Public Support	1	<u> </u>					
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	43,021,110	66,756,629	30,259,329	15,149,322	9	,661,947	164,848,337
_	grants ")							
2	Tax revenues levied for the organization's benefit and either							
	paid to or expended on its							
	behalf							
3	The value of services or facilities furnished by a governmental unit							
	to the organization without							
	charge							
4	Total. Add lines 1 through 3	43,021,110	66,756,629	30,259,329	15,149,322	9	,661,947	164,848,337
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included							28,746,718
	on line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public Support. Subtract line 5							136,101,619
	from line 4							
	ection B. Total Support							
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total
7	A mounts from line 4	43,021,110	9,406,760	30,259,329	15,149,322	9,	661,947	164,848,337
8	Gross income from interest,							
	dividends, payments received on	7,094,648	9,406,760	9,979,551	9,204,809	6	511,937	42,197,705
	securities loans, rents, royalties and income from similar	7,094,646	9,406,760	9,979,551	9,204,809	0,	311,937	42,197,703
	sources							
9	Net income from unrelated							
	business activities, whether or	48,866	51,170	211,458	253,608	27,878		592,980
	not the business is regularly carried on							
10	Other income (Explain in Part							
	IV) Do not include gain or loss	72,481	327,608	478,611	132,621		3,757	1,015,078
11	from the sale of capital assets Total support (Add lines 7							
	through 10)							208,654,100
12	Gross receipts from related activit	ies, etc (See inst	ructions)			12		1,582,222
13	First Five Years If the Form 990 is	for the organizati	on's first, second,	thırd, fourth, or fı	fth tax year as a !	501(c)(3) organız	atı <u>o</u> n,
	check this box and stop here							►
S	ection C. Computation of Pu	blic Support P	ercentage					
14	Public Support Percentage for 200			.1 column (f))		14		65 228 %
15	Public Support Percentage for 200	8 Schedule A . Pa	rt II. line 14			15		83 642 %
	33 1/3% support test-2009. If the	·	•	on line 13 and li	ne 14 is 33 1/3%		check t	
	and stop here. The organization qu	_		•	2 2 2 2,3 %		,	₩V
b	b 33 1/3% support test - 2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this							
17a	box and stop here. The organization 10%-facts-and-circumstances test				a 13 16a or 16h	and line	1 4	►
., u	is 10% or more, and if the organiz							
	in Part IV how the organization me	ets the "facts and	l cırcumstances" t	est The organiza	ition qualifies as a	a publicly	y support	. -
L	organization		anization did not -	hack a bay an !	a 12 16a 16h -	r 1 7	dlina	► □
ט	10%-facts-and-circumstances test 15 is 10% or more, and if the orga	-						
	Explain in Part IV how the organiz							
	supported organization			16- 161 17	476			▶ □
18	Private Foundation If the organizations	tion ald not check	a DOX ON line 13,	10a, 10b, 1/a or	1/D, cneck this l	ox and s	ee	▶ □

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						
	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

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

DLN: 93493133034481

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.

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

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

Νa	ection 501(c)(4), (5), or (6) organ time of the organization eversity of Central Florida Foundation Ir	·		Employer	ıdentıfıcatıon number
				59-6211	
'a r	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section	527 organization.
1	Provide a description of the or	ganization's direct and indirect p	olitical campaign ac	tivities in Part IV	
2	Political expenditures			•	\$
3	V olunteer hours				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization	under section 495!	5	▶ \$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under sectio	n 4955	> \$
3	If the organization incurred a	section 4955 tax, did it file Form	4720 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Pai	rt I-C Complete if the or	ganization is exempt und	er section 501(c) except section	501(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	r section 527 exem	pt function activities	- \$
2	Enter the amount of the filing exempt funtion activities	organızatıon's funds contrıbuted t	o other organization	s for section 527	> \$
3	Total exempt function expend	itures Add lines 1 and 2 Enter h	ere and on Form 112	:0-POL, line 17b	▶
3 4 5	Did the filing organization file				\$ Yes No tions to which payments
4	Did the filing organization file State the names, addresses a were made For each organizat contributions received that we	Form 1120-POL for this year?	r (EIN) of all sectior from the filing organ d to a separate polit	ı 527 political organiza ızation's funds Also er ıcal organization, such	tions to which payments iter the amount of political
4	Did the filing organization file State the names, addresses a were made For each organizat contributions received that we	Form 1120-POL for this year? nd employer identification numbe tion listed, enter the amount paid ere promptly and directly delivere	r (EIN) of all sectior from the filing organ d to a separate polit	ı 527 political organiza ızation's funds Also er ıcal organization, such	tions to which payments iter the amount of political as a separate segregated om contributions received
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file State the names, addresses a were made For each organizate contributions received that we fund or a political action comm	Form 1120-POL for this year? Independent of the amount paid of the promptly and directly delivere in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and directly delivered in the amount space of the promptly and the amount space of the promptly and th	r (EIN) of all sectior from the filing organ d to a separate polit s needed, provide in	i 527 political organiza ization's funds Also er ical organization, such formation in Part IV (d) Amount paid fr filing organization	tions to which payments iter the amount of political as a separate segregated (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

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

f Grassroots lobbying expenditures

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).							
	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	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?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	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?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV	Yes		170,778
j	Total lines 1c through 1i			170,778
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			
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	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	
b	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	4	
	political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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	Ret urn Reference	Explanation
,	EXPENSES	The Foundation provides funding for governmental relations and lobbying efforts on behalf of the University The government relations include cultivating, maintaining, and enhancing the link between UCF and the public it serves The Foundation seeks to create and implement community-based programs This is to increase knowledge and understanding of the university within key external communities

DLN: 93493133034481

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.

Name of the organization Employer identification number

ersity of Central Florida Foundation Inc		50 6311033	
t I Organizations Maintaining Donor A	Advised Funds or Other Simila	59-6211832 r Funds or Acco	unts. Complete if th
organization answered "Yes" to Form 9	90, Part IV, line 6.		·
	(a) Donor advised funds	(b) Funds	and other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor adv funds are the organization's property, subject to the	-		☐ Yes ☐ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit	5 5	•	┌ Yes ┌ No
Conservation Easements. Complete	e if the organization answered "Ye	s" to Form 990, Pa	art IV, line 7.
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreative Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	tion or pleasure) Preservation o	of an historically imported for a certified historic form of a conservation	structure
easement on the last day of the tax year			
Total number of conservation easements			t the End of the Year
Total acreage restricted by conservation easement	5	2a 2b	
Number of conservation easements on a certified hi		2b 2c	
Number of conservation easements included in (c) a	` ,	2d	
Trained or conservation casements menace in (c)			
Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, inspect A mount of expenses incurred in monitoring, inspect	ng the periodic monitoring, inspection, s? specting and enforcing conservation ea	handling of violations	Yes Volume Vear ► 000
Does each conservation easement reported on line			F ⊅
170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?			「Yes ▼ No
In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's final	•	•
Organizations Maintaining Collection Complete if the organization answered			ilar Assets.
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets helpprovide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or res	earch in furtherance	
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or resear		•
(i) Revenues included in Form 990, Part VIII, line	1	► \$_	
(ii) Assets included in Form 990, Part X		► \$_	
If the organization received or held works of art, his following amounts required to be reported under SFA		_	
Revenues included in Form 990, Part VIII, line 1		► \$_	
Assets included in Form 990, Part X		► \$	

Sche	dule D (Form 990) 2009								Page 2
Par	Organizations Maintaining Co	llections of Art,	Historical Tre	asures, or	Othe	r Simila	r Ass	ets (c	ontinued
3	Using the organization's accession and othe items (check all that apply)	r records, check any	_	-			ollectio	n	
а	Public exhibition		d Loan or	exchange prog	grams				
b	Scholarly research		e Γ Other						
c	Preservation for future generations								
ŀ	Provide a description of the organization's co Part XIV	ollections and explair	n how they further t	the organizatio	n's ex	cempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t		,			nılar	_	Yes	┌ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Complet	e if the organiza	ation answer		es" to For			,
la	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	lary for contribution	ons or other as	sets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	llowing table			1			
							A mo	unt	
c	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				
la	Did the organization include an amount on Fo	orm 990, Part X, line	21?				Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete							\F \	
a	Beginning of year balance	(a)Current Year 92,261,535	(b) Prior Year 115,271,254	(c)Two Years Ba	ск (а) inree Years	васк (e) Four Y	ears Baci
a b	Contributions	2,017,999	3,017,683						
c	Investment earnings or losses	11,461,317	-19,660,744						
d	Grants or scholarships	72,140	953,120						
e	Other expenditures for facilities and programs	614,850	3,410,961						
f	Administrative expenses	2,265,383	2,002,577						
g	End of year balance	102,788,478	92,261,535						
!	Provide the estimated percentage of the yea	r end balance held as					I		
a	Board designated or quasi-endowment	1.000 %							
_									
Ь	remailent endowment F								
c Ba	Term endowment • U % Are there endowment funds not in the posses	on of the organizat	uon that are hold a	nd administra	. d for	+h o			
oa	organization by	ssion of the organizat	ion that are held a	na aammister	eu 101	trie		Yes	No
	(i) unrelated organizations						3a(i)		No
	(ii) related organizations						3a(ii)		Νο
b	If "Yes" to $3a(II)$, are the related organizatio	ns listed as required	on Schedule R?				3b		
	Describe in Part XIV the intended uses of th								
ar	t VI Investments—Land, Buildings	s, and Equipmen	t. See Form 990), Part X, line	<u> 10.</u>				
	Description of investment		(a) Cost or oth basis (investme			(c) Accumu depreciat		(d) Bo	ok value
.a	Land			47,64	0,384			4	7,640,384
b	Buildings			31,98	9,066	8,6	07,992	2	3,381,074
c	Leasehold improvements			6,99	0,331	3,5	32,262		3,458,07
d	Equipment			62	1,064	48	86,205		134,85
е	Other			1,07	4,776	3:	16,475		758,300

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	ļ , ,	Cost or end-of-year market va	lue
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se		13	
		(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market va	alue
	1		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
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Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
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Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
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Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book v	alue
Part IX Other Assets. See Form 990, Part X, III (a) Descri	ne 15. otion		alue
Part IX Other Assets. See Form 990, Part X, III (a) Description (b) Should equal Form 990, Part X, col.(B) line	ne 15. ption	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line: Part X Other Liabilities. See Form 990, Part X	ne 15. ption (5.) (7. June 25.		alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	15.) (, line 25. (b) A mount		alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 2 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	75.) (7. line 25. (8. line 25.		alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	15.) (, line 25. (b) A mount		alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line : Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes ANNUITY PAYMENT LIABILITY	75.) (7. line 25. (8. line 25.		alue
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Total. (Column (b) should equal Form 990, Part X, col.(B) line: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes ANNUITY PAYMENT LIABILITY COMPENSATED ABSENCES	(, line 25. (b) A mount 0 516,536 365,307		alue
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Par	t 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	21,567,208
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	26,637,074
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-5,069,866
4	Net unrealized gains (losses) on investments	4	5,552,517
5	Donated services and use of facilities	5	
6	Investment expenses	6	-
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	5,552,517
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	482,651
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	34,710,350
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	-	34,710,330
	Net unrealized gains on investments		
a			
b			
с	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	13,295,761
3	Subtract line 2e from line 1	3	21,414,589
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)		
С	Add lines 4a and 4b	4c	152,619
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	21,567,208
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	34,227,699
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	-	
- а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	7,743,244
3	Subtract line 2e from line 1	3	26,484,455
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:	 	20,404,433
a L	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV)	,	150.610
C E	Add lines 4a and 4b	4c	152,619
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	26,637,074
i C	t 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	CONSERVATION EASEMENT	The Foundation has one conservation easement (50 foot conservation easement for drainage along the easterly boundary of the property) which was included in the value of the land on the Foundation's balance sheet
PART V	ENDOWMENT FUNDS	The Foundation authorizes spending from its endowment to support the University's student scholarships, academic chairs, professorships, and academic programs
PART X, LINE 2	FIN 48	The Foundation's audited financial statements include the following footnote. As permitted by Government Accounting Standards Board (GASB) Statement number 20, Accounting and Financial Reporting for Proprietary Funds and Other governmental Entities That use Proprietary Fund Accounting, the Foundation has elected not to apply Financial Accounting Standards Board (FASB) statements and interpretations issued after November 30, 1989. Therefore the Foundation is not subject to FIN 48.
PART XII, LINE 2D	RECONCILIATION OF REVENUE	A mounts included on Line 1, not on 990 Part VIII Line 12 total Revenue The Foundation has \$7,666,106 in rent expenses which are netted against rent revenue on the 990 but are included in expenses in the Foundation's audited financial statements. In addition, the Foundation has \$22,442 in fundraising event expenses netted against Fundraising event revenue on the 990 but are included in expenses in the Foundation's audited financial statements. The Foundation has a reimbursement of \$19,741 in professional fees which was recorded as revenue in the financial statements, but reclassified to expenses on the 990. The Foundation received a refund of \$34,955 for unused salary expenses which was credited against salary expenses on the 990, but is recorded as miscellaneous revenue on the Foundation's audited financial statements.
PART XII, LINE 4B	RECONCILIATION OF REVENUE	A mounts on 990, Part VIII line 12 total revenue not on line 1 of Part XII The Foundation has \$152,619 in investment fees However, these investement fees are netted against investment revenue on the Foundation audited financial statements
PART XIII, LINE 2D	RECONCILIATION OF REVENUE	A mounts included on Line 1, not on 990 Part VIII Line 12 total Revenue The Foundation has \$7,666,106 in rent expenses which are netted against rent revenue on the 990 but are included in expenses in the Foundation's audited financial statements. In addition, the Foundation has \$22,442 in fundraising event expenses netted against Fundraising event revenue on the 990 but are included in expenses in the Foundation's audited financial statements. The Foundation has a reimbursement of \$19,741 in professional fees which was recorded as revenue in the financial statements, but reclassified to expenses on the 990. The Foundation received a refund of \$34,955 for unused salary expenses which was credited against salary expenses on the Foundation's audited financial statements.
PART XIII, LINE 4B	RECONCILATION OF EXPENSES	A mounts on 990, Part VIII line 12 total revenue not on line 1 of Part XII The Foundation has \$152,619 in investment fees However, these investement fees are netted against investment revenue on the Foundation audited financial statements

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

University of Central Florida Foundation Inc

DLN: 93493133034481

Employer identification number

Statement of Activities Outside the United States

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

2009

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE F (Form 990)

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

					59-6211832	
Pa	rt I General Infor			de the United States	s. Complete if the organ	nization answered
1	For grantmakers. Do assistance, the grante	es the organiza ees' eligibility fo	ition maintain r or the grants or	assistance, and the se	the amount of the grant: lection criteria used to a	ward
2	For grant makers. Descr United States	ibe in Part IV the	organization's pr	ocedures for monitoring th	ne use of grant funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
	ral America and the obean	0	0	Program Services	UCF program service -	34,000
Tota	ls ▶	0	0			34,000

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
	+	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493133034481

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" 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. See separate instructions.

Name of the organization Employer identification number University of Central Florida Foundation Inc Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations 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? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (iii) Did fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual (iv) Gross receipts (or retained by) custody or (ii) Activity (or retained by) or entity (fundraiser) fundraiser listed in control of from activity organization contributions? col (i) No Yes

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 I	Fundraising Events. Commore than \$15,000 on Form					report	:ed
			(a) Event #1 Golf Tournament (event type)	(b) Event #2 Fndrsing event (event type)	(c) O ther Events 6 (total number)	(d) Tot (Add col co		
Φ	1	Gross receipts	15,126	15,310	33,336		6	3,772
Revenue	2	Less Charitable contributions	1,100	7,625	19,165		2	7,890
<u>~</u>	3	Gross income (line 1 minus line 2)	14,026	7,685	14,171		3	5,882
	4	Cash prizes						
မှာ	5	Non-cash prizes	1,157	63	28			1,248
euse	6	Rent/facility costs		1,580				1,580
Direct Expenses	7	Food and beverages	3,501	2,190	4,976		1	0,667
g g	8	Entertainment			405			405
Δ	9	Other direct expenses .	5,292	455	2,795			8,542
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)			2.	2,442
	11	Net income summary Combine li	nes 3, column d, and line	10			1	3,440
Par	t II	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1	Gross revenue						
ses	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	┌ Yes <u>%</u>	Г Yes	┌ Yes	•		
	7	Direct expense summary Add line						
	8	Net gaming income summary Com	nbine lines 1, column d, a	nd line 7	<u> </u>		Yes	No
9 a b	Is	ter the state(s) in which the organize the organization licensed to operate "No," Explain				. 9a		
_	_	•						
10a b		ere any of the organization's gaming "Yes," Explain	licenses revoked, susper	nded or terminated during	the tax year?	10a		
11 12	Is	es the organization operate gaming the organization a grantor, beneficia med to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	ıp or other entity	11		
					Schedule G (Form 9		EZ) 20	09

		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 Director/officer I Employee 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	

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

OMB No 1545-0047

DLN: 93493133034481

Employer identification number

University	University of Central Florida Foundation Inc	
Part I	General Information on Grants and Assistance	

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (c) IRC Code section (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) University of Central Florida 592924021 501(c)(3) 12,037,778 FUNDING TO 4000 Central Florida Blvd SUPPORT Orlando, FL 32816 SCHOLARSHIPS AND PROGRAMS WHICH ARE ADMINISTERED BY THE UNIVERSITY UCF Golden Knights 592334448 501(c)(3) 1,200,529 ATHLETIC STADIUM Corporation IncPO Box SUPPORT 163555 Orlando, FL 32826 8,083 CONVOCATION UCF Convocation 161733312 501(c)(3) Corporation Inc4000 CENTER SUPPORT Central Florida Blvd Millican Hall 383 Orlando, FL 32816 35,982 UCF Athletic Association 592334448 501(c)(3) ATHLETIC SCHOLARSHIP IncPO Box 163555 Orlando, FL 32826 PROGRAM SUPPORT University Central Florida 593086453 104,278 RESEARCH 501(c)(3) ACTIVITY SUPPORT Research Foundation In 12201 Research Parkway Suite 501 Orlando, FL 32826 Florida Hospital601 East 590724459 501(c)(3) 50,225 MEDICAL RESEARCH SUPPORT Rollins Street Orlando, FL 32803

Enter total number of section 501(c)(3) and government organizations

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

(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
Books for students taking UCF Cornerstone class	800	5,544			
Travel and other payments for various students	60	4,240			
See Addıtıonal Data Table					

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
Form 990, Schedule I	Description of Organization's Procedures for Monitoring the Use of Grants	THE FOUNDATION MAINTAINS THE APPROVED EXPENDITURE REQUESTS WHICH SUBSTANTIATE THE GRANT AMOUNTS PROVIDED TO THE RECIPIENTS THE FOUNDATION MAINTAINS DONOR INFORMATION, RELATED CONTRIBUTION DOCUMENTATION, AND ANY DONOR RESTRICTIONS OUTLINED BY THE DONOR INCLUDING SCHOLARSHIP CRITERIA THE GRANTS ARE MADE TO UNIVERSITY OR UNIVERSITY AFFILIATED ENTITIES AND THE FOUNDATION RELIES ON THE POLICIES, PROCEDURES, AND CONTROLS ESTABLISHED BY THESE ENTITIES FOR EXPENDITURE TRACKING AND PROPER ADMINISTRATION OF THE GRANTS FOR SCHOLARSHIP AWARDS, THE UNIVERSITY COLLEGES AND DEPARTMENTS ADMINISTER AND REVIEW STUDENT APPLICATIONS FOR THE SCHOLARSHIPS AND FINALIZE THE STUDENT RECIPIENTS IN ACCORDANCE WITH THE CRITERIA ESTABLISHED ONCE THE RECIPIENTS AND AMOUNTS AWARDED ARE FINALIZED BY THE UNIVERSITY, THE UNIVERSITY SUBMITS DOCUMENTATION TO THE FOUNDATION TO TRANSFER FUNDS TO THE UNIVERSITY'S STUDENT FINANCIAL ASSISTANCE OFFICE FOR PROCESSING THE AWARD DIRECTLY TO THE STUDENTS

Compensation Information

DLN: 93493133034481

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

University of Central Florida Foundation Inc

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

			59-6211832			
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 t					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	굣	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 reimbursement orprovision of all the expenses descri			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 organization organization's CEO/Executive Director Check all that Compensation committee Independent compensation consultant Form 990 of other organizations		y Written employment contract			
4	·	art V I :	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	avmer	nt?	4a		l _{No}
ь	Participate in, or receive payment from, a supplement	•		4b		No
c	Participate in, or receive payment from, an equity-bas			4c		No
·	If "Yes" to any of lines 4a-c, list the persons and pro-			40		NO
5	Only 501(c)(3) and 501(c)(4) organizations only mus For persons listed in form 990, Part VII, Section A, li compensation contingent on the revenues of	_				
а	The organization?			5a		Νo
b	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, li compensation contingent on the net earnings of	ine 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
Ь	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, I 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 I					
				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)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	:W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	W-2 and/or 1099-MISC compensation (ii) Bonus & (iii) Other reportable compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
ROBERT J HOLMES JR	(ı) (ıı)	229,541	. , ,	14,072	24,338 0	13,004	309,955	0 0
GEORGE A YEARWOOD	(ı) (ıı)	134,655	0	1,494 0	18,323 0	18,595 0	173,067	0
JOYCE HENCKLER	(ı) (ıı)	142,023	0	11,053	15,081	11,284 0	179,441	. 0
KIM MINANA	(ı) (ıı)	140,068	- 1	12,970 0	14,945 0	8,441 0	176,424	0
THOMAS MESSINA	(ı) (ıı)	135,558 0	0	8,180	14,373 0	11,268 0	169,379	0 0
JAMES STEWART	(ı) (ıı)	130,873	0	1 ' 1	14,167 0	11,263 0	3 158,972 0 0	0 0
				1				
			<u> </u>	 '				
,	'	<u> </u>	 	 		 	<u> </u>	
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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	Ret urn Ref erence	Explanation				
Supplemental Compensation Information		The foundation provided first class travel to the President for health reasons and to accomodate preparation for meetings. Charter flights are provided for the President and other executive leadership to travel together and sufficiently prepare en route to meetings. The foundation paid social club dues or initiation fees, specifically for fundraising purposes, for certain employees listed in part vii. The personal portions of the membership are included in the individuals' taxable compensation. For various university employees, the foundation made supplement payments which included grossed-up amounts for tax purposes. The total grossed-up amounts were included in the employees' reportable taxable compensation.				
Payments from unrelated organization	1'	All the employees listed in schedule J are employees of the University of Central Florida which has been determined to be an unrelated organization for purposes of 990 reporting				

Schedule J (Form 990) 2009

DLN: 93493133034481

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

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

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

Part I Bond Issues

University of Central Florida Foundation Inc

Schedule K

(Form 990)

► Attach to Form 990. ► See separate instructions.

Employer identification number

59-6211832

	Dolla 155ac5													
(a) Issuer Name (b) Issuer EIN (c) CUSIP #		(d) Date Issued		(e) Issue	(e) Issue Price		(f) Description of Purpose			(g) Defeased		On alf of uer		
											Yes	No	Yes	No
A	UNIVERSITY OF CENTRAL A FLORIDA FOUNDATION INC 59-6211832		12-30-	2008	10,4	00,000	refund prior	ssue (see	sch O)		х		X	
В	UNIVERSITY OF CENTRAL B FLORIDA FOUNDATION INC 59-6211832			12-17-2009		12,5	40,000	refund prior	efund prior issue (see sch O)			х		Х
Pa	rt III Proceeds			1	<u> </u>									
				ı	4	ı	В		С	I	D		E	
1	Total proceeds of issue			1	0,400,000	1	2,540,00	00						
2	Gross proceeds in reserve funds				()		0						
3	Proceeds in refunding or defeasan	nce escrows			(0						
4 Other unspent proceeds			0		0		0							
5 Issuance costs from proceeds			0		0		0							
6	Working capital expenditures from	n proceeds		0		0		0						
7	Capital expenditures from proceed	ds			(0						
8	Year of substantial completion			2029		2025								
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	a current refunding is:	sue?	Х		Х								
10	Were the bonds issued as part of	an advance refunding	ıssue?		Х		Х							
11	Has the final allocation of proceed	ds been made?		Х		Х								
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?			Х		х								
Pa	rt IIII Private Business Use					_								
					<u> </u>	В				D			E	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	S	No
1	Was the organization a partner in which owned property financed by	tax-exempt bonds?	,		Х									
2	Are there any lease arrangements which may result in private busine		nanced property	Х										
For	Privacy Act and Paperwork Reduction A	ct 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)

			A		В		С		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?	Х									
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		1 920 %								
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										
6	Total of lines 4 and 5		1 920 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х									
Da	rt IV Arhitrage										

Part IV Arbitrage

			Α		В		c		D		 E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x		x						
2	Is the bond issue a variable rate issue?		Х		Х						
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		x		х						
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х		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?		х		×						
6	Did the bond issue qualify for an exception to rebate?		х		х						
									Cahadul	o V /Form 00/	3) 2000

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DLN: 93493133034481

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

RITA LOWNDES

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization University of Central Florida Foundation Inc 59-6211832 Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (b) Loan to Approved (g)Written (e) In or from the (a) Name of interested person and (c)O riginal default? by board or agreement? (d)Balance due organization? principal amount purpose committee? Τо From Yes No Yes Yes No Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship organization's between interested (c) A mount of (a) Name of interested person (d) Description of transaction revenues? person and the transaction organization Yes No DR JOHN HITT BOD SUNTRUST ORLANDO EXOFFICIO DIR OF 4,745,326 Νo UCFF SEE SCH O LARRY TOBIN DIRECTOR OF UCFF LOAN PAYMENT SEE SCH O Νo

DIRECTOR OF UCFF

SCH 0

Nο

PAYMENT TO LAW FIRM SEE

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DLN: 93493133034481

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization University of Central Florida Foundation Inc

Employer identification number

					59-6211832			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of do reven	etermi	nıng	
1	Art—Works of art	X	2	_				
	Art—Historical treasures .							
	Art—Fractional interests							
4	B 1 11 11 1							
	Clothing and household							
6	goods							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	6	40.726	cost/selling price			
	Securities—Closely held stock .		0	40,728	cost/sening price			
	Securities—Partnership, LLC,							
	or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	OTHER (HISTORICAL							
25	Other \blacktriangleright (DOCUMENTS)	Х	1	0	0			
26	O ther ► ()							
27	O ther ▶()							
28	O ther ► ()							
29	Number of Forms 8283 received for which the organization compl				29			3
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangeme	ent in Part I	I					
31	Does the organization have a gif					31	Yes	
32a	Does the organization hire or us contributions?			to solicit, process, or sell i	non-cash	32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues ı	n column (c) for a type of p	roperty for which column (a) is checked,			

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
PART I, LINE 32A	USE OF THIRD PARTY TO SELL NONCASH CONTRIBUTIONS	The Foundation uses SunTrust as Custodian of investments SunTrust sells any stock gifts received by the Foundation
Schedule M	Line 1 Art-Works of Art	The Foundation received gifts in kind works of art. These gifts in kind passed through the Foundation to the University and are not included in the Foundation's revenue because the Foundation serves only as an agent for the University
Schedule M	Line 25 Other historical documents	The Foundation received gifts in kind of historical documents for the library. These gifts in kind passed through the Foundation to the University and are not included in the Foundation's revenue because the Foundation serves only as an agent for the University

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 59-6211832

Name: University of Central Florida Foundation Inc

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SCHEDULE 0 (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

University of Central Florida Foundation Inc

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.

OMB No 1545-0047

DLN: 93493133034481

► Attach to Form 990. **Employer identification number** 59-6211832

		<u> </u>
ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 1	ORGANIZATION'S MISSION	The UCF Foundation, Inc. is a not for profit organization that enhances the mission and vision of the University of Central Florida through its many fundraising activities. It is the channel for private support of the university in the form of annual and planned gifts, capital and other special-purpose campaigns. The central function of the foundation is to secure and manage the charitable resources of the university and to always act with integrity and honesty. This is carried out through relationship building among alumni, friends, faculty, staff, and community partners. The Foundation is a 501(c)(3) charitable organization and a direct support organization to the University of Central Florida. FORM 990, PART III, LINE 4A DESCRIPTION OF PROGRAM SERVICES FOR LINE 4A Academic support expenses paid in support of the University of Central Florida for programs which include capital funding, salaries for university employees, and support for the UCF health sciences campus. Academic support helps the university's outstanding faculty inspire students, foster and enhance strong academic programs, and serve as a key element to institutional greatness. Endowed chairs, eminent scholars, and distinguished visiting professors are prestigious academic positions held by the university's most accomplished faculty. Spending to support these positions means that academic excellence will be maintained. Support to research projects and innovative programs are at the heart of the UCF learning experience. Opportunities, curriculum development, internships, interdisciplinary work, experiential learning, and academic enrichment all require private support. FORM 990, PART IIII, LINE 4D DESCRIPTION OF OTHER PROGRAM. SERVICES Other programs assist UCF. Athletics in enhancing the overall academic and athletic experience and help provide funds necessary for UCF. Athletics to continue developing a nationally competitive athletics program. Funds help assist UCF. Athletics in providing the resources necessary for UCF student-athletes to succ

	ldentifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 2	DESCRIPTION OF RELATIONSHIPS	The Following Board of Directors have business relationships. Randy Berridge has a business relationship with Dr. John Hitt, Blaine Sweatt has a business relationship with Richard Walsh and Raymond Gilley has business relationships with Dr. John Hitt, Randy Berridge and Rasesh Thakkar
•			

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 4	DESCRIPTION OF SIGNIFICANT CHANGES TO ORGANIZING OR ENABLING DOCUMENT	The Foundation updated its Bylaw's during the fiscal year which were approved by the Board of Directors on June 30, 2010 Major modifications were made as follows 1 Ex-Officio Directors added - The addition of the Chair of the Seminole County Board of County Commissioners and the Mayor of the City of Oviedo. The addition of the President of the UCF Athletics Association. 2 Quorum and Voting - The act of a majority of the elected directors and ex-officio directors present will be the act of the board 3 Resignation and removal of directors and officers - The President of the University of Central Florida will have the ability to remove ex-officio directors. 4 Audit Committee - The Audit Committee was added as a standing committee of the board.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 11A	DESCRIPTION OF THE PROCESS USED BY MANAGEMENT AND/OR GOVERNING BODY TO	REVIEW 990 The following is the review and distribution process for the Foundation's annual Form 990. This process shall be followed each year prior to filing these documents with the IRS 1. The CFO and COO or CEO shall review both the Form 990 and the Form 990-T and resolve any outstanding issues or questions with the independent accounting firm reviewing or preparing the Forms before distribution to the Audit Committee or the Board. It is the CFO's and CEO's responsibility to confirm that these Forms do not contain any untrue statements or omit any material facts as well as ensure the financial information fairly represents the Foundation's financial condition for the period being reported. 2. The Audit Committee shall review the draft Form 990 prior to filing with the IRS and shall document their discussion and review of the documents in the committee meeting minutes. Final review of the Form 990 is specifically delegated to the Audit Committee and no further review shall be required before such Forms are filed with the IRS. 3. The draft Form 990 shall be provided to each voting Board Member of the Board of Directors prior to filing with the IRS. Distribution may be in the form of electronic mail, notification link to an electronic website, or actual mailing of the document.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 12C	DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST	All directors, officers, committee members and key employees shall be required to complete an annual disclosure form. This annual disclosure form will request specific information regarding the terms of any contract or transaction with the foundation and whether process for approval set forth in this policy was used. An interested person who has or learns about a potential conflict should disclose promptly to the Chair of the Board Due Diligence Committee and the foundation's CFO the material facts surrounding any potential conflict of interest, including specific information concerning the terms of any contract or transaction with the foundation. All effort should be made to disclose any such contract or transaction and have it approved by the committee before the arrangement is entered into Following receipt of information concerning a contract or transaction involving a potential conflict of interest, the Board Due Diligence Committee shall consider the material facts concerning the proposed contract or transaction, including the process by which the decision was made to recommend entering into the arrangement on the terms proposed. The committee shall approve only those contracts or transactions in which the terms are fair and reasonable to the foundation and the arrangement are consistent with the best interest of the foundation. Fairness includes, but is not limited to, the concepts that the foundation should pay no more than fair market value for any goods or services which the foundation receives and that the foundation should receive fair market value consideration for any goods or services that it furnishes others. When an interested person becomes aware of a proposed conflict of interest transaction, he or she will have a duty to take the following actions: (a) immediately disclose the existence and circumstances of such conflict of interest transaction to the Chair of the Due Diligence Committee and to the Foundation's CFO, (b) refrain from using his or her personal influence to encourage the found

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 15A	PROCESS FOR DETERMINING COMPENSATION OF EXECUTIVES	The University human resources department review's comparable salary data. Market data from salary survey sources is used to assign an accurate value to the position in the external labor market. Survey matches are based on the primary job duties of the position. The survey data provides salary and demographic data for selected positions nationwide and are reported in a statistical format indicating the average and median salaries and additional percentiles (i.e. 25th 75th).

the discussion of and the vote on the transaction or arrangement that results in the conflict of interest

ldentifier	Return Reference	Explanation
· ·	AVAILABILITY TO PUBLIC OF ORGANIZATION INFORMATION	The Foundation's governing documents, conflict of interest policy, 990 tax documents, and financial statements are published on the Foundation's website, the policy IQ software, or available upon request

ldentifier	Return Reference	Explanation
SCHEDULE L, PART IV	TRANSACTIONS WITH INTERESTED PERSON - LARRY TOBIN	Mr Tobin is President and CEO of Fairw inds Credit Union. The Foundation obtained a line of credit from Fairw inds Credit Union in 2004. A competitive request for proposals was issued to bank and credit institutions for the construction of the Alumni Center, with Fairw inds providing the most favorable terms. Subsequent to this transaction, during 2009, Mr. Tobin became a member of the Foundation's Board of Directors. The transaction amount relates to payments of principal and interest related to the bank loan originally obtained for the construction.

ldentifier	Return Reference	Explanation
SCHEDULE L, PART IV	INTERESTED PERSON - DR	Dr Hitt is a Director of SunTrust, Central Florida. The UCF Foundation previously obtained several real estate loans from SunTrust Banks and made principal and interest payments during the current year to SunTrust Banks for these loans. In addition, the UCF Foundation has made payments to Suntrust Banks for custodial services related to the Foundation's investments.

Explanation

ldentifier

Return Reference

ldentifier	Return Reference	Explanation
SCHEDULE K, PART I, COLUMN F	TAX EXEMPT ISSUE 10,400,000	Refund of prior issue from 12/21/2004 2004A and 20004B Series Notes Issue price was \$10,400,000 00 for the University Tower and The Bio-Molecular Research Annex Building. The two office buildings were acquired for use by the University of Central Florida.

ldentifier	Return Reference	Explanation
SCHEDULE K, PART I, COLUMN F	TAX EXEMPT ISSUE 12,540,000	Refund of prior issue from 02/08/96 The Foundation had bonds for the following buildings 1996 A Research Pavilion, partial bond funding on 2000 A Orlando Tech Center The buildings were purchased for use by the University of Central Florida

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DLN: 93493133034481

OMB No 1545-0047 2009

Employer identification number

Open to Public Inspection

SCHEDULE R (Form 990)

Name of the organization

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

University of Central Florida Foundation Inc 59-6211832 Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) End-of-year assets Name, address, and EIN of disregarded entity Primary activity Legal domicile (state Total income Direct controlling or foreign country) entity Univ Central Florida Real Estate Fdn LLC 12424 Research Pkwy Ste 140 Real Estate FL 0 28,701,403 Orlando, FL 32826 59-6211832 Knights Krossing Student Housing LLC 12424 Research Pkwy Ste 140 Real Estate FL 9,733,000 Orlando, FL 32826 59-6211832 Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity or foreign country) (if section 501(c)(3)) entity

(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 Disprop allocat	ortionate	Code amount ır Sched	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)) ral or iging ner?
								Yes	No			Yes	No
												+	
				s a Corporation on treated as a corpo				nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it flad offe t		elated organizations				(f))		(-)	(5)		
(a) Name, address, and EIN o	f related organization	(b) Primary a	ctivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share o	f total	Sh end-	(g) nare of -of-year ssets	(h) Percentag ownership		
									1				

(6)

Pa	art V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, II	ne 34, 35, or 36.)			
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1.0	ouring th	e tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV	>			
а	Receij	pt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		
ь	Gıft, g	rant, or capital contribution to other organization(s)		1b		
c	Gıft, g	rant, or capital contribution from other organization(s)		1c		
d	Loans	or loan guarantees to or for other organization(s)		1d		
e	Loans	or loan guarantees by other organization(s)		1e		
f	Sale o	f assets to other organization(s)		1f		
g	Purch	ase of assets from other organization(s)		1 g		
h	Excha	inge of assets		1h		
i	Lease	of facilities, equipment, or other assets to other organization(s)		1 i		
j	Lease	of facilities, equipment, or other assets from other organization(s)		1j		
k		mance of services or membership or fundraising solicitations for other organization(s)		1k		
ı		mance of services or membership or fundraising solicitations by other organization(s)		11		
n		g of facilities, equipment, mailing lists, or other assets		1m		
n	Sharır	ng of paid employees		1n		
o	Reimb	oursement paid to other organization for expenses		10		
p		ursement paid by other organization for expenses		1р		
q	Other	transfer of cash or property to other organization(s)		1q		
		transfer of cash or property from other organization(s)		1r		
2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships		lds		
		(a) Name of other organization	(b) Transaction type(a-r)	Amouni	(c) t involv	ed
(1) (2)						
(-)						
(3)	_					
(4)			-			
						
(5)						

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	(b) Primary activity	(c) Legal domicile (state or foreign country)	501(c)(3) organizations?		(e) Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) eneral or nanaging partner?	
			Yes	No		Yes	No		Yes	N	
										+	
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Software ID: Software Version:

EIN: 59-6211832

Name: University of Central Florida Foundation Inc

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

Compensated Employees, and Independent Contractors											
(B) Average hours		tıon (che)			(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	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
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1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
1 0	Х						0	0	0		
	(B) A verage hours per week 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1	(B) Average hours per week Post of the hours per week 1 0 X 1 0	(B) A verage hours per week 1 0	C	C	C	CB	C	CB		

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 (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	
SCOTT BUESCHER DIRECTOR	1 0	x						0	0	0	
MICHAEL MANGLARDI DIRECTOR/VICE CHAIR	1 0	Х		х				0	0	0	
NAN MCCORMICK DIRECTOR/CO-VICE CHAIR	1 0	х		х				0	0	0	
MARK CALABRESE DIRECTOR/TREASURER	1 0	Х		х				0	0	0	
MARCOS MARCHENA DIRECTOR/SECRETARY	1 0	Х		х				0	0	0	
RASESH THAKKAR DIRECTOR	1 0	Х						0	0	0	
LARRY TOBIN DIRECTOR	1 0	Х						0	0	0	
CRAIG MILLER DIRECTOR	1 0	Х						0	0	0	
OLGA R CALVET DIRECTOR/IMMEDIATE PAST CHAIR	1 0	Х		х				0	0	0	
JOHN D' ALBORA DIRECTOR	1 0	Х						0	0	0	
J GARY MAY DIRECTOR	1 0	Х						0	0	0	
DR JOHN C HITT EX-OFFICIO DIRECTOR/PRESIDENT	40 0	Х						0	0	0	
KEITH F WHITE EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
JACOB V STUART EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
RAYMOND GILLEY EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
VANESSA LITTLETON EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
RANDY E BERRIDGE EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
RICHARD T CROTTY EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
BUDDY DYER EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
RICHARD WALSH EX-OFFICIO DIRECTOR	1 0	Х						0	0	0	
ANN SONNTAG DIRECTOR	1 0	Х						0	0	0	
SETH BERNSTEIN DIRECTOR	1 0	Х						0	0	0	
ROBERT J HOLMES JR CHIEF EXECUTIVE OFFICER	40 0			х				272,613	0	37,343	
GEORGE A YEARWOOD CHIEF FINANCIAL OFFICER	40 0			x				136,149	0	36,917	
JOYCE HENCKLER ASSOCIATE VP DEVELOPMENT	40 0				х			153,076	0	26,366	

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

(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che		I		(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	
KIM MINANA ASSOCIATE VP DEVELOPMENT	40 0				х			153,038	0	23,386	
THOMAS MESSINA ASSOCIATE VP ALUMNI RELATIONS	40 0					Х		143,738	0	25,641	
JAMES STEWART ASSISTANT VP CIO	40 0					Х		133,542	0	25,430	
NANCY KEON SENIOR DIRECTOR OF DEVELOPMENT	40 0					X		121,445	0	18,783	
MARGARET JARRELL-COLE ASSOCIATE VP AND LEGAL COUNSEL	40 0					Х		110,910	0	11,838	
JEANNINE STARR DIRECTOR OF DEVELOPMENT	40 0					х		109,322	0	22,856	

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
Banquets & Receptions	368,161	307,030	9,543	51,587
Printing & Reproduction	159,945	88,091	15,792	56,062
External Event Sponsorships	143,786	87,478	0	56,308
Rental - Other	141,385	70,181	49,112	22,092
DUES & MEMBERSHIPS - ORG	84,883	74,904	5,218	4,760