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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)

Open to Public

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

Inspection

A	For the	2010 calendar year, or tax year beginning APR 1, 2010 and ending	MAR 31, 2011						
В	Check if	C Name of organization	D Employer identifi	cation number					
	applicable	LIBERTY BOWL FESTIVAL ASSOCIATION							
2	Addre: change	C/O LIBERTY BOWL VENTURE, INC.							
Name change Doing Business As 62-6064									
Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number									
Terminated and street (017.0. BOX in main is not delivered to street address) 101 (901) 795 – 101 (901) 795 –									
F	Amend		G Gross receipts \$	6,605,514.					
F	Applic		H(a) Is this a group re						
	pendir	F Name and address of principal officer: PERRY WINSTEAD	for affiliates?	Yes X No					
		SAME AS C ABOVE	H(b) Are all affiliates ind						
	Tav.ov	empt status:							
		te: > HTTP: //WWW.LIBERTYBOWL.ORG		list (see instructions)					
			H(c) Group exemption						
_	art I	Summary	rear of formation: 1967	M State of legal domicile: TN					
		Briefly describe the organization's mission or most significant activities: PROMOTE	COCTAT /ECONOM	TO WELLSON					
õ	1								
Jan		OF MID-SOUTH & CITIZENS; SUPPORT MISSION OF							
Governance	2	Check this box I if the organization discontinued its operations or disposed of r		ssets.					
ő	3	Number of voting members of the governing body (Part VI, line 1a)	3	7					
9	*	Number of independent voting members of the governing body (Part VI, line 1b)	4	7					
Activities &		Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0					
ΞΞ		Total number of volunteers (estimate if necessary)	6	0					
Act	1	Total unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	0.					
	<u>b</u>	Net unrelated business taxable income from Form 990-T-line-34	7b	0.					
		_KECEIVED	Prior Year	Current Year					
ē	8	Contributions and grants (Part VIII, line 1h)	28,450.	27,960.					
Revenue	9	Program service revenue (Part VIII, line 2g)	7,342,359.	6,230,504.					
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1 6 2011	4,591.	20,470.					
•	11	Other revenue (Part VIII, column (A), lines 5, 6d 8c, 9c, 10c, and 11e)	71,640.	63,374.					
	12	Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,447,040.	6,342,308.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,650,000.	2,650,000.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.					
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.					
ĝ	ь	Total fundraising expenses (Part IX, column (D), line 25)							
Ω	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,797,040.	3,692,308.					
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	7,447,040.	6,342,308.					
	19	Revenue less expenses Subtract line 18 from line 12	0.	0.					
10 S	3		Beginning of Current Year	End of Year					
Net Assets or	20	Total assets (Part X, line 16)	4,479,049.	3,459,018.					
ASS.	21	Total liabilities (Part X, line 26)	2,518,506.	1,498,475.					
Set	22	Net assets or fund balances. Subtract line 21 from line 20	1,960,543.	1,960,543.					
	art II	Signature Block	2730073131	1750075150					
Und	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of m	v knowledge and helief it is					
		t, and complete. Declaration of preparer (other than officer) is based on all information of which pre		1					
1	,	Lem Windland	7 7	1/2011					
Sig	ın	Signature of officer	Date	r/acil					
3 He		PERRY WINSTEAD, CFO		·					
, , ,	16	Type or print name and title							
· —			Date Check	PTIN					
Pai	d	Print/Type preparer's name CAROL A. JOHNSON BISHOP CAROL A. JOHNSON BI		-					
Preparer Firm's name DIXON HUGHES GOODMAN LLP Firm's EIN									
UBE	Use Only Firm's address 999 S. SHADY GROVE RD, STE 400								
	u dla a 15	MEMPHIS, TN 38120	Phone no (901)761-3000					
		RS discuss this return with the preparer shown above? (see instructions)	· · ·	X Yes No					
032	001 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2010)					

LIBERTY BOWL FESTIVAL ASSOCIATION Form 990 (2010) C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Page 2 Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response to any question in this Part III Bnefly describe the organization's mission: SEE SCHEDULE O

2			services during the year which were not	listed on	
	the prior Form 990				Yes X No
		hese new services on Schedule O.			
3	Did the organizatio	n cease conducting, or make signific	cant changes in how it conducts, any pro	gram services?	Yes X No
	If "Yes," describe t	hese changes on Schedule O.			
4			f the organization's three largest program		
	Section 501(c)(3) a	nd 501(c)(4) organizations and secti	on 4947(a)(1) trusts are required to report	the amount of grants and	
	allocations to other	rs, the total expenses, and revenue,	if any, for each program service reported		
4a	(Code) (Expenses \$ 3,984,	716 including grants of \$ 2,650),000.)(Revenue\$	6,230,504.
	THE LIBER	TY BOWL FESTIVAL A	SSOCIATION IS HOST TO	THE ANNUAL A	UTOZONE
			OOTBALL GAME AND RELA		
			E CITY AND ITS CITIZE		
			TO A NATIONAL TELEVI		
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	CITIZENS.		PROMOTES AND SUPPORT		
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			···	<u>.</u> .	 .
4b	(Code:	\/Evnansas \$	including grants of \$	\ /Poyonus \$	
70	(Oode	/ (Expenses #	including grants of \$) (Hevenue \$	
			 -		
				_	
					
					
					
					
					
					 -
	<u> </u>				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$ _	
					<u> </u>
					
					_
			· · · · · · · · · · · · · · · · · · ·		
4d	Other program serv	vices. (Describe in Schedule O.)			

(Expenses \$ including grants of \$ 4e Total program service expenses

Form **990** (2010)

3,984,716.

) (Revenue \$

62-6064769

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5	X	
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_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	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	11b		x
С	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	11c		X
d	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	11d		x
е		11e	Х	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		\mathbf{x}_{-}
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	<u></u>	
_	-	Form	990	2010)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_ X_
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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		_X
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		<u> </u>
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	_	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	_35		<u> </u>
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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		
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_		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2010)

Form 990 (2010) C/O LIBERTY BOWL VENTURE, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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. u.	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	.		l
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ı		l
	(gambling) winnings to prize winners?	1c		Ĺ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	.		l
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for 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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		— —
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	6b		
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	70		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		
Ū	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		L.
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.			
a	Gross income from members or shareholders Gross income from ether courses /De not not amounts due or poul to other courses accused.			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	. 1		
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	40.		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ĺ
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.	-iJa		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			ļ
-	organization is licensed to issue qualified health plans . 13b			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u></u> _
		Form !	990 (2010)

Form 990 (2010)

C/O LIBERTY BOWL VENTURE, INC.

62-6064769

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

	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	7		
þ	Enter the number of voting members included in line 1a, above, who are independent	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	X
6	Does the organization have members or stockholders?	6		X
7a	,, , , , , , , , , , , , , , , , , , , ,			
	governing body?	7a_		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_	<u> </u>	Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following		ļ	
	• • •	8a	X_	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
S00	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	X
Jec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
100	Does the organization have local chapters, branches, or affiliates?	40-	Yes	No X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		Λ
	and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1 la		
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120		
_	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	122		
	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		Х
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		X
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, 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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed TN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	ble for		
	public inspection. Indicate how you make these available. Check all that apply.			
45	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy	, and fina	incial	
~	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	zation 🕨		_
	LIBERTY BOWL VENTURE, INC 901-795-7700 959 RIDGEWAY LOOP, MEMPHIS, TN 38120			
	JULY KIDGERAL DOOF, MEMERIS, IN JOILU	Form	990	2010
		COUL	330	ZU 101

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

-	Check if Schedule O contains a response to any question in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	yees

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

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

(A)	(B)	1		(0	>)			(D)	(E)	(F)	
Name and Title	Average		Position					Reportable	Reportable	Estimated	
	hours per week (describe	\vdash	heck	allt				compensation from the	compensation from related organizations	amount of other compensation	
	hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
KEVIN KANE	2 00	,,						•	0	,	
CHAIRMAN	2.00	A		_				0.	0.	0	
PATRICIA SHANNON	2 00	,,							•		
VICE PRESIDENT	2.00	X						0.	0.	0	
WILLIE GREGORY	2.00	.						_	^	,	
PRESIDENT	2.00	X	1					0.	0.	0	
RAY POHLMAN	2.00	7.				İ		_	^	,	
SECRETARY	2.00	^		-			-	0.	0.	0	
BILLY HICKS, JR	2.00	v						0.	0.	,	
FREASURER	2.00	^	 	-		├		<u> </u>	U.	C	
STEVE EHRHART	2.00			х				0.	0.	,	
EXEC, DIRECTOR	2.00	H	┢	^	\vdash		\vdash		<u> </u>	0	
PERRY WINSTEAD	2.00			х				0.	0.	0	
CFO	2.00	\vdash	\vdash	^							
		<u> </u>	<u> </u>			<u> </u>					
		╁	_	<u> </u>		├					
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Form **990** (2010)

Par	VII Section A. Officers, Directors, Tru	istees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)			
	(A)	(B)			(0	-			(D)	(E)		(F)	
	 Name and title 	Average							Reportable	Reportable		Estimated	
		hours per week	neck	all	inat	арр	(y)	compensation	compensation				
		(describe	흕						from the	from related organizations		othe	
		hours for	Individual trustee or director	g .			ated		organization	(W-2/1099-MISC)		from ti	
		related	ustee	truste		يو ا	bens		(W-2/1099-MISC)		Ì	organiza	tion
		organizations in Schedule	leal t	tional		ege e	st com	_				and rela	
		O)	ndivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organizat	tions
		,	F	-		_					\dashv		
							\vdash			 	_		
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	Sub-total	L	_		L	l			0.		o .		0.
	Total from continuation sheets to Part V	II. Section A							0.		5.	_	0.
	Total (add lines 1b and 1c)	,					•		0.		0.		0.
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed al	bove	e) wł	no re	eceived more than \$100	,000 in reportable			
	compensation from the organization												0
											г	Yes	No
3	Did the organization list any former officer,			, ke	y em	ıplo	yee,	or h	nighest compensated er	nployee on			
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si			ama.	ones	ation	200	+ a+l	her componention from	the erganization	-	3	X
*	and related organizations greater than \$15								•	ine organization		4	<u>x</u>
5	Did any person listed on line 1a receive or									dual for services	-	-	
	rendered to the organization? If "Yes," com					_						5	<u> </u>
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of compe	ensa	tion from	
	the organization NONE							Т					
	(A) Name and business	address							(B) Description of s	services	Сс	(C) mpensati	on
			_		-			\dashv	· · · · · · · · · · · · · · · · · · ·			_ 	
								٦					
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							_				—		
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								_					
2	Total number of independent contractors (including but r	ot I	mite	d to	tho	se la	stec	above) who received n	nore than			
	\$100,000 in compensation from the organi	zation					0						
											F	orm 990	(2010)

Part VIII Statement of Revenue (**D)** Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 27,960. 1b Membership dues b Fundraising events 1c 1d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 27,960 **Business Code** 2 a GAME TICKET SALES 711300 2532590 Program Service 2532590 TV & RADIO RIGHTS 711300 2074000. 2074000 c SPONSORSHIPS 711300 1222272. 1222272 PROG. LICENSES & ADS. 711300 184,077. 184,077 e PREMIUM SEATING CHARGE 711300 133,400. 133,400 84,165. f All other program service revenue 711300 84,165 6230504 g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and 20,470 20,470. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 326580 Part IV, line 18 263206 b Less. direct expenses 63,374 c Net income or (loss) from fundraising events 63,374. 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a All other revenue Total. Add lines 11a-11d 6342308. Total revenue. See instructions. 6230504 83,844. Form 990 (2010)

62-6064769 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 commot include amounts reported on lines 6b, 3b, 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	2,650,000.	2,650,000.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				,
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	·			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)			-	
а	Management .	2,357,592.		2,357,592.	
b	Legal			•	
С	Accounting	14,400.	14,400.		
d	Lobbying				,
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	285,491.	285,491.		
12	Advertising and promotion	34,489.	34,489.		,
13	Office expenses	36,685.	36,685.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	40,410.	40,410.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	70.	70.		
23	Insurance	79,993.	79,993.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	COMMISSIONS	432,795.	432,795.		
b	OFFICIALS/GAME RELATED	158,231.	158,231.		
С	OTHER OPERATING EXPENSE	152,343.	152,343.		
d	STADIUM RENT	75,000.	75,000.		
е	TICKET OUTLET CHRGS/BNK	24,809.	24,809.		
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	6,342,308.	3,984,716.	2,357,592.	0
26	Joint costs. Check here ▶ ☐ If following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form 990 (2010)

Part X Balance Sheet (A) Beginning of year End of year 139,928. 1 Cash - non-interest-bearing 4,427,667. 2 Savings and temporary cash investments 3,214,750. 2 3 Pledges and grants receivable, net 3 13,858. 65,427. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets Notes and loans receivable, net 7 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 3,340. 4,799. 9 10a Land, buildings, and equipment cost or other 8,930. basis. Complete Part VI of Schedule D 10a 8,816. 184. b Less accumulated depreciation 10b 114. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 34,000. 34,000. 15 Other assets. See Part IV, line 11 15 4,479,049. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,459,018. 17 Accounts payable and accrued expenses 146,546. 151,581 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities 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 23 Unsecured notes and loans payable to unrelated third parties 24 25 2,371,960. 1,346,894. Other liabilities. Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 2,518,506. 1,498,475. 26 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,960,543. 27 Unrestricted net assets 27 1,960,543. 28 Temporanly restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

> 3,459,018. Form **990** (2010)

1,960,543.

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,960,543.

4,479,049.

33

Form **990** (2010)

	C/O BIBERTI BOWN VENTORE, INC.	02 00	0 2 / 0 3	, a	yo
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,34	2,3	08.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,34	2,3	08.
3	Revenue less expenses. Subtract line 2 from line 1	3			0.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,96	0,5	43.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,96	0,5	43.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	i on a			
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

➤ See separate instructions.

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• Se	ection 501(c)(4), (5), or (6) organiza	tions. Complete Part III.			,
Name	of organization LIBERTY	BOWL FESTIVAL A	ASSOCIATION	Empl	oyer identification number
	C/O LIE	ERTY BOWL VENTUE	RE, INC.		62-6064769
Par	t I-A Complete if the or	ganization is exempt und	der section 501(c) or is a section 527 o	rganization.
2 F	Provide a description of the organi Political expenditures Olunteer hours	zation's direct and indirect politi	cal campaign activities	_	
Parl	t I-B Complete if the or	ganization is exempt und	der section 501(c)(3).	·
1 E	Enter the amount of any excise tax	•		· *	
2 E	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	_	
3 II	f the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a V	Vas a correction made?				Yes No
	f "Yes," describe in Part IV			<u> </u>	
Par	t I-C Complete if the or	ganization is exempt un	der section 501(c), except section 501(c)(3).
1 E	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 E	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities			▶ \$	
	otal exempt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	ne 17b			▶ \$	
	Old the filing organization file Form				Yes No
	Enter the names, addresses and en				
	nade payments. For each organiza contributions received that were pi	· · · · · · · · · · · · · · · · · · ·			•
	political action committee (PAC). If				no sogregates faria of a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
					If none, enter -0-
•					
		<u> </u>			
					
				- -	

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Schedule C (Form 990 or 990-EZ) 2010

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

LIBERTY BOWL FESTIVAL ASSOCIATION

Schedule C (Form 990 or 990-EZ) 2010 Part II-A Complete if the org	C/O LIBERT	Y BOWL VENT	URE, INC.	62-(5064769 Page 2
(election under sec		iipt ulidel sectio	in soricito) and me	d F0/111 5/00	
		inted group			
	tion belongs to an affi tion checked box A ar	- ·	overene annh		
B Check ir the filing organiza	HOTI CHECKED DOX A ar	iu iliniteu control pr	ovisions apply.	(-) Elina	(h) Affiliated group
	ts on Lobbying Exper ditures" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	ience a legislative boo	ly (direct lobbying)	Ī		-
c Total lobbying expenditures (add li		-	Γ		
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and 1c)			
f Lobbying nontaxable amount Enter	er the amount from the	e following table in bo	th columns.		
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	0 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,00	0 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (en	iter 25% of line 1f)				
h Subtract line 1g from line 1a If zer	o or less, enter -0-		Ļ		
i Subtract line 1f from line 1c If zero	or less, enter -0-		Ĺ		<u> </u>
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
		eraging Period Under	· ·		
•			n do not have to comp		
			es 2a through 2f on pag	je 4.) 	
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period	 ·	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
]		
c Total lobbying expenditures					-
d Grassroots nontaxable amount			 		
e Grassroots ceiling amount					
(150% of line 2d, column (e))			<u> </u>		
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

LIBERTY BOWL FESTIVAL ASSOCIATI Schedule C (Form 990 or 990-EZ) 2010 C/O LIBERTY BOWL VENTURE, INC.	OIN	62-6	064769	Page
Part II-B Complete if the organization is exempt under section 501(c)(3) and	has NOT f	iled Form	1 5768	, rage
(election under section 501(h)).				
	(;	a)	(k	o)
	Yes	No	Amo	ount
 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. Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
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), sec	tion 501(c)	(5), or se	ction	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		х
Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P "Yes."	• • •			l
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	itical			
expenses for which the section 527(f) tax was paid).				
a 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 e	xcess			
	d political			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?		4		
• • • •		5		

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

Schedule C (Form 990 or 990-EZ) 2010

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.

2010 Open to Public Inspection

Name of the organization

LIBERTY BOWL FESTIVAL ASSOCIATION C/O LIBERTY BOWL VENTURE, INC.

Employer identification number 62-6064769

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 6.	
	-	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor	_	
-	for charitable purposes and not for the benefit of the donor		-
	impermissible private benefit?		Yes No
Pai		ganization answered "Yes" to Form 990. Pa	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	`	oncally important land area
	Protection of natural habitat	Preservation of a certifi	
	Preservation of open space		ind indicate directard
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of	f a conservation easement on the last
_	day of the tax year		Ta donder varion decombine on the least
	au, or mo tax you.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	nucture included in (a)	2c
ď	Number of conservation easements included in (c) acquired	` '	
•	listed in the National Register	and of 17700, and not on a historio structur	2d
3	Number of conservation easements modified, transferred, re	eleased extinguished or terminated by the	
Ū	year >	the terminated by the	organization during the tax
4	Number of states where property subject to conservation ea	seement is located	
5	Does the organization have a written policy regarding the pe		
Ū	violations, and enforcement of the conservation easements	- · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
·	and section 170(h)(4)(B)(ii)?	To salary the requirements of section 1700	Yes No
9	In Part XIV, describe how the organization reports conservation	tion essements in its revenue and expense	
J	include, if applicable, the text of the footnote to the organiza		
	conservation easements	ation o interioral statements that describes the	te organization s accounting for
Pai	rt III Organizations Maintaining Collections	of Art. Historical Treasures, or Ot	her Similar Assets
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	· · · · · · · · · · · · · · · · · · ·	ent and balance sheet works of art
	historical treasures, or other similar assets held for public ex	•	•
	the text of the footnote to its financial statements that descri		or provide, provide, in trace, in the
ь	If the organization elected, as permitted under SFAS 116 (A		and halance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, e		
	relating to these items.	baddaton, or robbaton in farther ance of publi	inc scratce, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		▶ ¢
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre		
~	the following amounts required to be reported under SFAS		gam, provide
а	Revenues included in Form 990, Part VIII, line 1	to food and teleting to make items.	▶ ¢
a b	Assets included in Form 990, Part X		
U	radota included in Form 350, Fall A		🖊 🐧

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Schedule D (Form 990) 2010

LIBERTY BOWL FESTIVAL ASSOCIATION

		ERTY BOWL							<u>64769</u>	
Par	t III Organizations Maintaining C	ollections of A	rt, Histo	orical Tre	easures, c	r Othe	r Simila	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that	t are a si	gnıficant ı	use of its (collection	tems
	(check all that apply).									
а	Public exhibition	d	ı 🗀 L	oan or excl	hange progra	ıms				
b	Scholarly research	е	- 🗀 c	ther						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how the	ey further th	ne organizatio	on's exer	npt purpo	se in Part	XIV.	
5	During the year, did the organization solicit o	r receive donations	of art, his	toncal treas	sures, or othe	er sımılar	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he organ	ization's co	llection?				Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered '	'Yes" to	Form 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	rt X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	dary for c	ontribution	s or other as	sets not	ıncluded		·	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing ta	able:						
			_						Amount	
С	Beginning balance						1c			
	Additions during the year	•					1d			
e	Distributions during the year	•					1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990. Part X. line	212				لستنسا		Yes	No
	If "Yes," explain the arrangement in Part XIV	, , , , , , , , , , , , , , , , , , , ,								
Par		f the organization ar	swered "	Yes" to For	rm 990, Part	IV, line 1	0			
	· .	(a) Current year		or year	(c) Two year			ears back	(e) Four y	ears back
1a	Beginning of year balance	(-)	1-2	,	107 **** 700				(6) . 55. 7	
b	Contributions									
_	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
•	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	r end halance held a	ae.		1	<u> </u>				
_	Board designated or quasi-endowment	a cha balanco nola t								
		%	'							
_	Are there endowment funds not in the posse	• •	ation that	t are held a	nd administe	red for th	a organi	zation		
Ja	by	Joseph of the organiz	adon tha	aro ricia a	and administr		.o organiz	Lation	T.	es No
	(i) unrelated organizations								3a(i)	23 140
	(ii) related organizations								3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sched	ula B2					3b	+
4	Describe in Part XIV the intended uses of the	•							[00]	
Pai	rt VI Land, Buildings, and Equipm									
	Description of investment	(a) Cost or o			or other	(c) Ac	ccumulate	ed	(d) Book	value
	Description of investment	basis (investi			(other)		preciation	- 1	(G) DOOK	. 4.00
10	Land									
	Buildings									
	Leasehold improvements								· · · · ·	
	Equipment				8,930.		8,8	16	·····	114.
	Other .		-		0,000.		0,0			<u> </u>
	L Add lines 1a through 1a (Column (d) must a	oual Form 000 Port	V colum	n /P) /mo 1	10(a))					111

Schedule D (Form 990) 2010

Schedule [(Form 990) 2010 C/O LIBERT	Y BOWL VEN	TURE,	_INC.	62	<u>-6064769</u>	Page 3
	Investments - Other Securities.	See Form 990, Part	X, line 12.	·			
((a) Description of security or category . (including name of security)	(b) Book val	ue	Cos	(c) Method of valua t or end-of-year mar		
	ial derivatives						
(2) Closely	y-held equity interests						
(3) Other							
(A)							
(B)							
(C)		. <u> </u>	<u>-</u>				
(D)							
<u>(E)</u>							
(F)				 		 	
(G)							
<u>(H)</u>							
(I)	(h) must equal Form 000. Part V. col (P) line 12 \		 			_	<u> </u>
Part VII	b) must equal Form 990, Part X, col (B) line 12.)	See Form 990, Part	X, line 13				
	(a) Description of investment type	(b) Book val	lue	Cos	(c) Method of valua st or end-of-year mar		
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)	 .						
(9)		_	-				
(10)	(1)					··	
Dart IX	(b) must equal Form 990, Part X, col (B) line 13.) Other Assets. See Form 990, Part X, lir	15					
rartix	·	a) Description				(b) Book va	alue
(1)		a) Boomphon			 	(B) Book vo	1100
(2)							
(3)							
(4)			-				
(5)							
(6)							
(7)							
(8)					· =-=- ··		
(9)							
(10)			·				
Total. (Col	lumn (b) must equal Form 990, Part X, col (B) li Other Liabilities. See Form 990, Part			·	<u> </u>		
1.	(a) Description of liability			(b) Amount			
	deral income taxes	RZ	1	346 904			
	<u>UE TO MANAGEMENT COMPAN</u>	<u> </u>		1,346,894.			
(3)							
<u>(4)</u> (5)			_	 _			
(6)							
(7)	-						
(8)							
(9)							
(10)							
(11)	-	·- ·					
_	lumn (b) must equal Form 990, Part X, col (B) II ASC 740) Footnote In Part XIV, provide the text of the footnot	ne 25)	▶ 1	1,346,894.			
2. FIN 48 (A 032053	ASC 740) Footnote in Part XIV, provide the text of the footnot ASC 740).	e to the organization's fina	ncial statemer	nts that reports the organi	· · · · · · · · · · · · · · · · · · ·		
12-20-10			4.0		Sch	edule D (Form 9	990) 201

SCHEDULE G

(Form 990 or 990-EZ)

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.

2010

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

LIBERTY BOWL FESTIVAL ASSOCIATION

Employer identification number

C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations • In-person solicitations 2 a 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 services? Yes No b 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. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

032081 01-13-11

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Schedule G (Form 990 or 990-EZ) 2010

LIBERTY BOWL FESTIVAL ASSOCIATION Schedule G (Form 990 or 990-EZ) 2010 C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events FORMAL PREGAME (add col (a) through DINNER BUFFET col. (c)) (event type) (total number) (event type) 169,050 105,550 51,980 326,580. Gross receipts 2 Less: Charitable contributions 169,050. 105,550. 51,980. 326,580. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages Entertainment 110,851. 76,858 75,496 263,205. Other direct expenses 263,205 10 Direct expense summary Add lines 4 through 9 in column (d) 63,375. 11 Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash pnzes Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities. a is the organization licensed to operate gaming activities in each of these states? b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 」Yes **b** If "Yes," explain:

032082 01-13-11

LIBERTY BOWL FESTIVAL ASSOCIATION 62-6064769 Schedule G (Form 990 or 990-EZ) 2010 C/O LIBERTY BOWL VENTURE, INC 11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in: a The organization's facility **b** An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name > Address > Yes No 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 of the third party. Name > Address > Gaming manager information: Name > Gaming manager compensation > \$_____ Description of services provided Director/officer Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to Yes retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

Schedule G (Form 990 or 990-EZ) 2010

SCHEDULE 1 (Form 990) Internal Revenue Service

Department of the Treasury

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection

, , ,

å X Employer identification number 62-6064769 ☐ Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection LIBERTY BOWL FESTIVAL ASSOCIATION INC C/O LIBERTY BOWL VENTURE, Part I | General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization

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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II

pepe	(h) Purpose of grant or assistance	TO SUPPORT THE MISSION OF AMERICAN UNIVERSITIES OF HIGHER EDUCATION WHO PARTICIPATE IN THE	TO SUPPORT THE MISSION OF AMERICAN UNIVERSITIES OF HIGHER EDUCATION WHO PARTICIPATE IN THE		
additional space is nee	(g) Description of non-cash assistance				
l can be duplicated if	(f) Method of valuation (book, FMV, appraisal, other)				
an \$5,000. Part I	(e) Amount of non-cash assistance	0	0		
nt received more th	(d) Amount of cash grant	1,650,000,	1,000,000,		
s box if no one recipier	(c) IRC section if applicable	501(C)(3)	501(C)(3)		
\$5,000 Check thi	(b) EIN	56-2334448	58-0652518		
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government	UNIVERSITY OF CENTRAL FLORIDA 4000 CENTRAL FLORIDA BLVD ORLANDO, FL 32816	UNIVERSITY OF GEORGIA COLLEGE STATION ROAD ATHENS, GA 30602		

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2010)

62-6064769

Page 2

Schedule I (Form 990) (2010)

(Form 990) (2010) C/O LIBERTY BOWL VENTURE, INC.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					•
		:			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	line 2, and any other	additional information.	
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT: UN		SITY OF CE	IVERSITY OF CENTRAL FLORIDA	IDA	
(H) PURPOSE OF GRANT OR ASSISTANCE: TO		ORT THE M	SUPPORT THE MISSION OF AMERICAN	AMERICAN	
NIVERSITIES OF HIGHER EDUCATION WHO PARTICIPATE IN THE LIBERTY BOWL GAME	HO PARTIC	IPATE IN	THE LIBERT	Y BOWL GAME	
SACH YEAR					

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF GEORGIA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE MISSION OF AMERICAN

UNIVERSITIES OF HIGHER EDUCATION WHO PARTICIPATE IN THE LIBERTY BOWL GAME

032102 01-13-11

SCHEDULE O

. . . .

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

LIBERTY BOWL FESTIVAL ASSOCIATION C/O LIBERTY BOWL VENTURE, INC.

Employer identification number 62-6064769

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE LIBERTY BOWL FESTIVAL ASSOCIATION IS HOST TO THE ANNUAL AUTOZONE
LIBERTY BOWL NCAA COLLEGE FOOTBALL GAME AND RELATED EVENTS HELD
ANNUALLY IN MEMPHIS, TN. THE CITY AND ITS CITIZENS ARE HOSTS TO GUESTS
FROM AROUND THE COUNTRY AND TO A NATIONAL TELEVISION AUDIENCE. THE
ASSOCIATION SPONSORS ATHLETIC, CULTURAL, CIVIC AND RELATED ACTIVITIES
TO PROMOTE THE SOCIAL AND ECONOMIC WELFARE OF THE MID-SOUTH AND ITS
CITIZENS. THE ASSOCIATION PROMOTES AND SUPPORTS THE MISSION OF
AMERICAN UNIVERSITIES OF HIGHER EDUCATION.
FORM 990, PART VI, SECTION B, LINE 11: THE TAX RETURN IS CURRENTLY REVIEWED BY THE CFO AND THE ASSOCIATION'S TAX CONSULTANT.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC IN ITS
OFFICE AND UPON REQUEST.