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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization’s mission

THE MISSION OF THE LSU FOUNDATION IS TO FOSTER PRIVATE FINANCIAL SUPPORT FOR LSU, THE LSU AGRICULTURAL CENTER, THE LSU PAUL M HEBERT LAW CENTER, AND THE LSU SYSTEM OFFICE THE FOUNDATION ENCOURAGES AND RECEIVES PHILANTHROPIC GIFTS AND BEQUESTS, INCLUDING BOTH RESTRICTED AND UNRESTRICTED GIFTS THE FOUNDATION ALSO MANAGES THE INVESTMENT OF ENDOWED FUNDS AND OTHER PRIVATE ASSETS GIFTS TO THE FOUNDATION ADD A MARGIN OF EXCELLENCE OVER AND ABOVE THE APPROPRIATE LEVEL OF STATE SUPPORT AND ARE NOT INTENDED TO REPLACE STATE FUNDS MOST IMPORTANTLY, BEHIND EVERY GIFT TO THE FOUNDATION THERE IS AN INDIVIDUAL OR ORGANIZATION DETERMINED TO ADVANCE THE QUALITY OF EDUCATION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code ) (Expenses \$ 13,613,551 including grants of \$ ) (Revenue \$ )

ACADEMIC AND RESEARCH ACTIVITIES DIRECT SUPPORT OF EXTENSIVE SCOPE OF ACADEMIC AND RESEARCH PROGRAMS CONDUCTED BY THE ACADEMIC COLLEGES AND RESEARCH CENTERS WITHIN LSU, LSU AGRICULTURAL CENTER, AND LAW CENTER THESE PROGRAMS ARE INTEGRAL TO THE ACCOMPLISHMENTS OF LSU'S MISSION, AND THE FOUNDATION PROVIDES CRUCIAL FUNDING TO SUPPLEMENT STATE APPROPRIATIONS

4b

(Code ) (Expenses \$ 4,339,744 including grants of \$ ) (Revenue \$ )

CHAIRS AND PROFESSORSHIPS SUPPORT OF THE SCHOLARLY RESEARCH ACTIVITIES OF LSU'S DISTINGUISHED FACULTY WHO HAVE BEEN HONORED WITH APPOINTMENT BY THE UNIVERSITY TO DESIGNATED CHAIRS AND PROFESSORSHIPS THE WIDE VARIETY OF SUPPORT PROVIDED INCLUDES SALARY SUPPLEMENTS, EQUIPMENT PURCHASES AND RESEARCH-RELATED TRAVEL THIS SUPPORT IS CRITICAL TO THE UNIVERSITY’S ABILITY TO RECRUIT AND RETAIN FACULTY WHO ARE EMINENT IN THEIR FIELDS

4c

(Code ) (Expenses \$ 3,428,676 including grants of \$ ) (Revenue \$ )

SCHOLARSHIPS AND FELLOWSHIPS FINANCIAL SUPPORT TO UNDERGRADUATE AND GRADUATE STUDENTS THROUGH APPROXIMATELY 1,500 AVAILABLE SCHOLARSHIPS AND FELLOWSHIPS

4d



















Other program services (Describe in Schedule O ) See also Additional Data for Description

(Expenses \$ 4,362,482 including grants of \$ ) (Revenue \$ )

4e

Total program service expenses \$ 25,744,453

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 <b>Section 501(c)(3) organizations.</b> 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	No
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 98-19? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	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 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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
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 Yes	
c 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	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e Yes	
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 Yes	
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	No
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 Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 	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, Parts II and IV 	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, Parts III and IV 	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 (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 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	No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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.	1a161		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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.	2a68		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b		
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	Yes	
b	If "Yes," enter the name of the foreign country: CJ 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c	Enter the amount of reserves on hand.	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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.  
Check if Schedule O contains a response to any question in this Part VI

Section 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	24	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	24	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. GINA DUGAS 3838 W LAKESHORE DR BATON ROUGE, LA 70808 (225) 578-3811

Check if Schedule O contains a response to any question in this Part VII ☐ ☒

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2010)

## Part VII

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization: 6

## Section B. Independent Contractors

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

<p><b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization <b>13</b></p>	
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Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . . 1a						
	b Membership dues . . . . . 1b						
	c Fundraising events . . . . . 1c			157,386			
	d Related organizations . . . . . 1d						
	e Government grants (contributions) 1e						
	f All other contributions, gifts, grants, and similar amounts not included above 1f			30,188,744			
	g Noncash contributions included in lines 1a-1f \$			9,156,472			
	h Total. Add lines 1a-1f . . . . .			30,346,130			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f . . . . .						
	Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . .			4,222,166		-6,440
4 Income from investment of tax-exempt bond proceeds . . .							
5 Royalties . . . . .			45,552			45,552	
		(i) Real (ii) Personal					
6a Gross Rents							
b Less rental expenses							
c Rental income or (loss)							
d Net rental income or (loss) . . . . .							
		(i) Securities (ii) Other					
7a Gross amount from sales of assets other than inventory		219,609,007					
b Less cost or other basis and sales expenses		209,720,901					
c Gain or (loss)		9,888,106					
d Net gain or (loss) . . . . .		9,888,106	9,888,106				
8a Gross income from fundraising events (not including \$ 157,386 of contributions reported on line 1c) See Part IV, line 18 . . . . .							
a		271,613					
b Less direct expenses . . . . . b		393,802					
c Net income or (loss) from fundraising events . . .			-122,189			-122,189	
9a Gross income from gaming activities See Part IV, line 19 . . . a							
b Less direct expenses . . . . . b							
c Net income or (loss) from gaming activities . . .							
10a Gross sales of inventory, less returns and allowances . . . . . a		153,585					
b Less cost of goods sold . . . . . b		69,632					
c Net income or (loss) from sales of inventory . . .			83,953			83,953	
Miscellaneous Revenue		Business Code					
11a FUND MANAGEMENT FEES		541900	1,024,322	1,024,322			
b							
c							
d All other revenue . . . . .							
e Total. Add lines 11a-11d . . . . .			1,024,322				
12 Total revenue. See Instructions . . . . .			45,488,040	10,912,428	-6,440	4,235,922	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	17,898,965	17,898,965		
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 . . . . .	937,161		534,746	402,415
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7	Other salaries and wages	3,926,900		1,355,488	2,571,412
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	221,187		77,250	143,937
9	Other employee benefits . . . . .	525,632		205,989	319,643
10	Payroll taxes . . . . .	275,387		110,155	165,232
a	Fees for services (non-employees)				
	Management . . . . .				
b	Legal . . . . .	113,826		113,826	
c	Accounting . . . . .	58,125		58,125	
d	Lobbying . . . . .				
e	Professional fundraising services See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .	203,308		203,308	
g	Other . . . . .	1,109,091	1,041,725	67,366	
12	Advertising and promotion . . . . .	82,007			82,007
13	Office expenses . . . . .	1,036,519	813,494	121,771	101,254
14	Information technology . . . . .	438,355		409,082	29,273
15	Royalties . . . . .				
16	Occupancy . . . . .	166,495		144,917	21,578
17	Travel . . . . .	574,299	529,380	11,089	33,830
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	22,544		12,968	9,576
20	Interest . . . . .	62,698	62,698		
21	Payments to affiliates . . . . .	3,536,405	3,536,405		
22	Depreciation, depletion, and amortization . . . . .	47,452		47,452	
23	Insurance . . . . .	156,618		156,618	
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 O )				
a	OFFICIAL UNIV FUNCTION	1,366,432	1,366,432		
b	UNIVERSITY SUPPORT	495,354	495,354		
c	DEVELOPMENT/PROMOTION	224,805			224,805
d	DUES AND SUBSCRIPTIONS	76,569		47,370	29,199
e	MISCELLANEOUS	17,768		17,768	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	33,573,902	25,744,453	3,695,288	4,134,161
26	Joint costs. Check here <input type="checkbox"/> 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				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .				1	
	2	Savings and temporary cash investments . . . . .			18,483,726	2	20,368,595
	3	Pledges and grants receivable, net . . . . .			27,236,145	3	23,905,580
	4	Accounts receivable, net . . . . .			103,628	4	592,088
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), 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). Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .			33,934	8	36,980
	9	Prepaid expenses and deferred charges . . . . .			125,272	9	73,562
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a	6,585,247	5,543,418	10c	5,099,122
	b	Less: accumulated depreciation . . . . .	10b	1,486,125			
	11	Investments—publicly traded securities . . . . .			300,243,173	11	280,484,874
	12	Investments—other securities. See Part IV, line 11 . . . . .			90,982,292	12	176,749,854
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets. See Part IV, line 11 . . . . .			21,145,886	15	20,606,631
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			463,897,474	16	527,917,286	
Liabilities	17	Accounts payable and accrued expenses . . . . .			2,620,286	17	2,964,740
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .				19	
	20	Tax-exempt bond liabilities . . . . .			7,525,000	20	6,900,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			2,394,367	23	2,113,400
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities. Complete Part X of Schedule D . . . . .			91,506,440	25	103,519,009
	26	Total liabilities. Add lines 17 through 25 . . . . .			104,046,093	26	115,497,149
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			28,830,630	27	31,881,024
	28	Temporarily restricted net assets . . . . .			138,160,732	28	182,380,366
	29	Permanently restricted net assets . . . . .			192,860,019	29	198,158,747
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			359,851,381	33	412,420,137
	34	Total liabilities and net assets/fund balances . . . . .			463,897,474	34	527,917,286

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	45,488,040
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	33,573,902
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	11,914,138
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	359,851,381
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	40,654,618
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	412,420,137

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII ☒

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant?	Yes	
<b>c</b>	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A  
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2010

Open to Public Inspection

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

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

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I

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

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

1

☐

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

2

☐

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

3

☐

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

4

☐

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

5

☒

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

6

☐

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

7

☐

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

8

☐

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

9

☐

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

10

☐

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

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?  
(ii) a family member of a person described in (i) above?  
(iii) a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2010

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	59,688,977	44,566,521	20,137,203	32,547,466	31,370,452	188,310,619
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	59,688,977	44,566,521	20,137,203	32,547,466	31,370,452	188,310,619
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,357,636
6 Public Support. Subtract line 5 from line 4						185,952,983

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	59,688,977	44,566,521	20,137,203	32,547,466	31,370,452	188,310,619
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,895,318	20,123,225	9,312,054	5,255,943	4,267,718	54,854,258
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						243,164,877
12 Gross receipts from related activities, etc (See instructions )					12	1,794,339
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	76 470 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	71 040 %
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part III

Support Schedule for Organizations Described in Section 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 purpose						
3 Gross receipts from activities that 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 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6 )						

Section B. Total Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 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, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> 						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization 		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization 		
20 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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area  
☐ Protection of natural habitat☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1▶ \$ 63,300

(ii) Assets included in Form 990, Part X▶ \$ 4,263,562

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1▶ \$

b

Assets included in Form 990, Part X▶ \$

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

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

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

a

☒ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☒ Loan or exchange programs

e

☒ Other COMMUNITY EDUCATIONAL PROGR

4

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

5

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

☒ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance . . . . .	233,568,579	202,776,443	271,762,671		
b Contributions . . . . .	11,577,812	5,975,663	2,736,124		
c Investment earnings or losses . . . . .	50,027,252	38,723,691	-59,414,992		
d Grants or scholarships . . . . .	4,939,616	13,907,218	12,307,360		
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .	290,234,027	233,568,579	202,776,443		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment 32 000 %

b

Permanent endowment 68 000 %

c

Term endowment 0 %

3a

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

(i)

unrelated organizations . . . . .

3a(i)

Yes

No

(ii)

related organizations . . . . .

3a(ii)

Yes

No

b

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

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .		519,791		519,791
b Buildings . . . . .				
c Leasehold improvements . . . . .				
d Equipment . . . . .		1,479,752	1,439,220	40,532
e Other . . . . .		4,585,704	46,905	4,538,799
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				5,099,122



Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	145,488,040
2	Total expenses (Form 990, Part IX, column (A), line 25)	233,573,902
3	Excess or (deficit) for the year Subtract line 2 from line 1	311,914,138
4	Net unrealized gains (losses) on investments	440,654,616
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	82
9	Total adjustments (net) Add lines 4 - 8	940,654,618
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	1052,568,756

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements . . . . .	187,166,978
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments . . . . .2a40,654,616	
b	Donated services and use of facilities . . . . .2b	
c	Recoveries of prior year grants . . . . .2c	
d	Other (Describe in Part XIV) . . . . .2d1,024,322	
e	Add lines 2a through 2d . . . . .	2e41,678,938
3	Subtract line 2e from line 1 . . . . .	345,488,040
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .4a	
b	Other (Describe in Part XIV) . . . . .4b	
c	Add lines 4a and 4b . . . . .	4c0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	545,488,040

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements . . . . .	134,598,224
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities . . . . .2a	
b	Prior year adjustments . . . . .2b	
c	Other losses . . . . .2c	
d	Other (Describe in Part XIV) . . . . .2d1,024,322	
e	Add lines 2a through 2d . . . . .	2e1,024,322
3	Subtract line 2e from line 1 . . . . .	333,573,902
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .4a	
b	Other (Describe in Part XIV) . . . . .4b	
c	Add lines 4a and 4b . . . . .	4c0
5	Total Expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	533,573,902

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE MAIN COLLECTIONS OWNED BY THE LSU FOUNDATION CONSIST OF ARTWORK AND HISTORICAL ITEMS ON DISPLAY AND IN THE CUSTODY OF LSU'S MUSEUM OF ART, A COMPONENT UNIT WHICH FURTHERS THE PUBLIC SERVICE MISSION OF THE UNIVERSITY THE MUSEUM OF ART'S DIVERSE PERMANENT COLLECTION INCLUDES SIGNIFICANT PORTRAITURE AND DECORATIVE ARTS, NEWCOMB POTTERY, AND CHINESE JADE FROM THE CHI QING DYNASTY
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ORGANIZATION'S ENDOWMENT FUNDS PROVIDE FINANCIAL SUPPORT IN FURTHERANCE OF THE ACADEMIC AND RESEARCH COMPONENTS OF THE UNIVERSITY'S MISSION, INCLUDING SCHOLARSHIPS, GRADUATE ASSISTANTSHIPS AND FELLOWSHIPS, AND FACULTY CHAIRS AND DISTINGUISHED PROFESSORSHIPS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE FOUNDATION HAS EVALUATED ITS POSITION REGARDING THE ACCOUNTING FOR UNCERTAIN INCOME TAX POSITIONS AND DOES NOT BELIEVE THAT IT HAS ANY MATERIAL UNCERTAIN TAX POSITIONS WITH FEW EXCEPTIONS, THE FOUNDATION IS NO LONGER SUBJECT TO FEDERAL, STATE, OR LOCAL TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE JUNE 30, 2008
PART XI, LINE 8 - OTHER ADJUSTMENTS		ROUNDING 2
PART XII, LINE 2D - OTHER ADJUSTMENTS		SERVICE FEES 1,024,322
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SERVICE FEES 1,024,322
		IN JUNE 2006, THE FASB ISSUED FASB INTERPRETATION NO 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ("FIN 48"), AN INTERPRETATION OF FASB STATEMENT NO 109 FIN 48 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS IN ACCORDANCE WITH SFAS NO 109, ACCOUNTING FOR INCOME TAXES ("SFAS 109") FIN 48 CLARIFIES THE APPLICATION OF SFAS 109 BY DEFINING A CRITERION THAT AN INDIVIDUAL TAX POSITION MUST MEET FOR ANY PART OF THE BENEFIT OF THAT POSITION TO BE RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS ADDITIONALLY, FIN 48 PROVIDES GUIDANCE ON MEASUREMENT, DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE, AND TRANSITION THE AMOUNT RECOGNIZED IS SUBJECT TO ESTIMATE AND MANAGEMENT JUDGEMENT WITH RESPECT TO THE LIKELY OUTCOME OF EACH UNCERTAIN TAX POSITION THE AMOUNT THAT IS ULTIMATELY SUSTAINED FOR AN INDIVIDUAL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITIONS IN THE AGGREGATE COULD DIFFER FROM THE AMOUNT RECOGNIZED MANAGEMENT HAS COMPLETED ITS EVALUATION OF THE IMPACT OF THIS STANDARD, AND THE FOUNDATION IS UNAWARE OF ANY TAX POSITIONS THAT WOULD REQUIRE DISCLOSURE

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public  
Inspection

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. 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 criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States
- 3 Activites per Region (Use Part V if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, 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/investments in region
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING		0
EUROPE	0	0	FUNDRAISING		0
MIDDLE EAST AND NORTH AFRICA	0	0	FUNDRAISING		0
NORTH AMERICA	0	0	FUNDRAISING		0
CENTRAL AMERICA AND THE CARIBBEAN	0	0	FUNDRAISING		0
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	FUNDRAISING		0
SOUTH AMERICA	0	0	FUNDRAISING		0
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		42,209,586
3a Sub-total	0	0			42,209,586
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			42,209,586

**1**

(i) Method of valuation (book, FMV, appraisal, other)

3 Enter total number of other organizations or entities . . . . . ►

## Part III

[illegible]

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐ Yes ☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

Part V

**Supplemental Information**  
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
OTHER INFORMATION	SCHEDULE F, PART V	LSU FOUNDATION RECEIVES DONATIONS FROM DONORS WHO RESIDE IN FOREIGN COUNTRIES THERE ARE NO EXPENSES ASSOCIATED WITH THESE DONATIONS THE FOLLOWING IS A LIST OF THE REGION AND THE AMOUNTS RECEIVED FROM EACH REGIONS 1) EAST ASIA AND THE PACIFIC - \$4,716 2) EUROPE - \$18,405 3) MIDDLE EAST AND NORTH AFRICA - \$20 4) NORTH AMERICA (NOT INCLUDING UNITED STATES) - \$1,131 5) CENTRAL AMERICA AND THE CARIBBEAN - \$150 6) RUSSIA AND THE NEWLY INDEPENDENT STATES - \$120 7) SOUTH AMERICA - \$75

SCHEDULE G  
(Form 990 or 990-EZ)

Supplemental Information Regarding  
Fundraising or Gaming Activities

OMB No 1545-0047

2010

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,  
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐

Mail solicitations

e

☐

Solicitation of non-government grants

b

☐

Internet and e-mail solicitations

f

☐

Solicitation of government grants

c

☐

Phone solicitations

g

☐

Special fundraising events

d

☐

In-person solicitations
- 2a

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. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total . . . . . ▶						

- 3

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

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>FAMILY WEEKEND</u> (event type)	<u>GOLF TOURNAMENT</u> (event type)	<u>23</u> (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts . . . .	49,265	49,013	330,721
	2	Less Charitable contributions . . . .		32,408	124,978
	3	Gross income (line 1 minus line 2) . . . .	49,265	16,605	205,743
Direct Expenses	4	Cash prizes . . . .			
	5	Non-cash prizes . . . .		16,692	16,692
	6	Rent/facility costs . . . .	24,830	15,309	93,933
	7	Food and beverages . . . .			
	8	Entertainment . . . .			
	9	Other direct expenses . . . .	63,470	12,331	167,237
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶			393,802
	11	Net income summary Combine lines 3 and 10 in column (d). . . . . ▶			-122,189

Part III 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.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
Direct Expenses	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<div><input type="checkbox"/> Yes % <input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes % <input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes % <input type="checkbox"/> No</div>
7 Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
8 Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶					

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? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_

11

Does the organization operate gaming activities with nonmembers?

☐ Yes

☐ No

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?

☐ Yes

☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide 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?

☐ Yes

☐ No

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 Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes

☐ No

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 \$

**Part IV** Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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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)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.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE LSU FOUNDATION PROVIDES GRANTS OR ASSISTANCE, IN ACCORDANCE WITH ITS STATED MISSION, TO LOUISIANA STATE UNIVERSITY, THE LSU PAUL M HEBERT LAW CENTER, THE LSU AGRICULTURAL CENTER AND THE LSU SYSTEM OFFICE, IN THE FORM OF REIMBURSEMENTS OF EXPENSES MADE IN SUPPORT OF THE BENEFICIARY PURPOSES FOR WHICH PRIVATE FUNDS WERE CONTRIBUTED TO THE FOUNDATION THE UNIVERSITY IS PROVIDED WITH THE BALANCE OF FUNDS AVAILABLE IN FOUNDATION ACCOUNTS FOR SPECIFIC RESTRICTED PURPOSES ON A MONTHLY BASIS, THE UNIVERSITY PROVIDES THE FOUNDATION WITH A REPORT OF THE EXPENSES MADE IN SUPPORT OF THOSE SPECIFIC PURPOSES TO BENEFIT THE UNIVERSITY, ON PRESENTATION OF THIS REPORT, THE FOUNDATION REIMBURSES THOSE EXPENSES AS A GRANT OF ASSISTANCE TO THE UNIVERSITY THE UNIVERSITY MAKES AVAILABLE TO THE FOUNDATION ALL DOCUMENTATION IN SUPPORT OF INDIVIDUAL ITEMS OF EXPENSE, AND THIS DOCUMENTATION IS ALSO MADE AVAILABLE TO THE FOUNDATION'S EXTERNAL AUDITORS

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM G BOWDON	(i) (ii)	319,225 0	0 0	14,691 0	17,150 0	3,329 0	354,395 0	0 0
(2) GINA M DUGAS	(i) (ii)	166,355 0	0 0	7,879 0	12,360 0	5,836 0	192,430 0	0 0
(3) JEFFERY L MCLAIN	(i) (ii)	181,029 0	0 0	8,124 0	13,791 0	13,809 0	216,753 0	0 0
(4) GEORGE T MOSS	(i) (ii)	128,145 0	0 0	7,817 0	9,851 0	9,329 0	155,142 0	0 0
( 5 )								
( 6 )								
( 7 )								
( 8 )								
( 9 )								
( 10 )								
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
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Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

DLN: 93493086001302

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A LOUISIANA PUBLIC FACILITIES AUTHORITY	72-0895871	546398FJ2	04-30-2003	31,555,000	SEE PART V		X		X		X

Part II Proceeds

				A	B	C	D		
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue			12,725,000					
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds			220,000					
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds			10,301,523					
11	Other spent proceeds								
12	Other unspent proceeds			2,203,477					
13	Year of substantial completion			2004					
				Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?				X				
15	Were the bonds issued as part of an advance refunding issue?				X				
16	Has the final allocation of proceeds been made?			X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			X					

Part III Private Business Use

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

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

Cat No 50193E

Schedule K (Form 990) 2010

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X						
b	Are there any research agreements that may result in private business use of bond-financed property?		X						
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
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								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?	X							
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?	X							
6	Did the bond issue qualify for an exception to rebate?		X						

Part V

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION		THE FOUNDATION WAS ONE OF SEVERAL PARTICIPANTS BORROWING THE PROCEEDS OF TAX-EXEMPT REVENUE BONDS TOTALING \$31,555,000 ISSUED BY THE LOUISIANA PUBLIC FACILITIES AUTHORITY IN 2003 THE FOUNDATION'S PORTION TOTALED \$12,725,000
FORM 990, SCHEDULE K, PART I, LINE A, COLUMN (F)	DESCRIPTION OF PURPOSE	THE LSU FOUNDATION WAS ONE OF SEVERAL PARTICIPANTS BORROWING THE PROCEEDS OF TAX-EXEMPT REVENUE BONDS TALLING \$31,555,000 ISSUED BY THE LOUISIANA PUBLIC FACILITIES AUTHORITY IN 2003 THE FOUNDATION'S PORTION TOTALED \$12,725,000
FORM 990, SCHEDULE K, PART II, LINE 12	OTHER UNSPENT PROCEEDS	IN 2007, THE FOUNDATION REPAID UNSPENT FUNDS PLUS EARNINGS ON THOSE FUNDS OF \$2,531,958 42
FORM 990, SCHEDULE K, PART IV, LINE 1	ARBITRAGE EXPLANATION	PER ARTICLE III, SECTION 3 2 OF THE LOAN AGREEMENT, THE BONDS WILL NOT CONSTITUTE ARBITRAGE BONDS UNDER SECTION 148 OF THE INTERNAL REVENUE CODE
FORM 990, SCHEDULE K, PART IV, LINE 5	PROCEEDS INVESTED BEYOND TEMPORARY PERIOD	UNSPENT FUNDS WERE HELD SLIGHTLY BEYOND THE 3 YEAR TEMPORARY PERIOD, HOWEVER, THE UNSPENT FUNDS, PLUS INTEREST EARNED ON THOSE FUNDS, WERE REPAID
See Additional Data Table		

Part V

Supplemental Information

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION		THE FOUNDATION WAS ONE OF SEVERAL PARTICIPANTS BORROWING THE PROCEEDS OF TAX-EXEMPT REVENUE BONDS TOTALING \$31,555,000 ISSUED BY THE LOUISIANA PUBLIC FACILITIES AUTHORITY IN 2003 THE FOUNDATION'S PORTION TOTALED \$12,725,000
FORM 990, SCHEDULE K, PART I, LINE A, COLUMN (F)	DESCRIPTION OF PURPOSE	THE LSU FOUNDATION WAS ONE OF SEVERAL PARTICIPANTS BORROWING THE PROCEEDS OF TAX-EXEMPT REVENUE BONDS TALLING \$31,555,000 ISSUED BY THE LOUISIANA PUBLIC FACILITIES AUTHORITY IN 2003 THE FOUNDATION'S PORTION TOTALED \$12,725,000
FORM 990, SCHEDULE K, PART II, LINE 12	OTHER UNSPENT PROCEEDS	IN 2007, THE FOUNDATION REPAID UNSPENT FUNDS PLUS EARNINGS ON THOSE FUNDS OF \$2,531,958 42
FORM 990, SCHEDULE K, PART IV, LINE 1	ARBITRAGE EXPLANATION	PER ARTICLE III, SECTION 3 2 OF THE LOAN AGREEMENT, THE BONDS WILL NOT CONSTITUTE ARBITRAGE BONDS UNDER SECTION 148 OF THE INTERNAL REVENUE CODE
FORM 990, SCHEDULE K, PART IV, LINE 5	PROCEEDS INVESTED BEYOND TEMPORARY PERIOD	UNSPENT FUNDS WERE HELD SLIGHTLY BEYOND THE 3 YEAR TEMPORARY PERIOD, HOWEVER, THE UNSPENT FUNDS, PLUS INTEREST EARNED ON THOSE FUNDS, WERE REPAID

Schedule L  
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total . . . . . ▶ \$										

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ROBERT M STUART JR	BOARD MEMBER		ROBERT M STUART, JR IS THE LOUISIANA PRESIDENT OF CAPITAL ONE BANK, WHICH HAS FACILITATED DEBT FINANCING ARRANGEMENTS INVOLVING LSU FOUNDATION MR STUART WAS NOT A MEMBER OF THE FOUNDATION'S BOARD OF DIRECTORS WHEN THE MAJORITY OF THE DEBT FINANCING WAS APPROVED NOR WHEN THE FINANCING ARRANGEMENTS WERE EXECUTED SOME OF THE DEBT FINANCING DID OCCUR DURING THE TIME MR STUART WAS BOARD MEMBER, HOWEVER, HE ABSTAINED FROM PARTICIPATING IN ANY DISCUSSIONS OR NEGOTIATIONS SURROUNDING THESE FINANCING ARRANGEMENTS MR STUART ALSO ABSTAINED FROM VOTING ON ITEMS RELATED TO SUCH TRANSACTIONS LSU FOUNDATION PAID APPROXIMATELY \$62,698 IN INTEREST TO CAPITAL ONE BANK DURING THE FISCAL YEAR ENDED JUNE 30, 2011 LSU PROPERTY FOUNDATION, A RELATED ENTITY, PAID APPROXIMATELY \$158,872 IN INTEREST TO CAPITAL ONE BANK DURING THE FISCAL YEAR ENDED JUNE 30, 2011		No

Part V

Supplemental Information  
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M  
(Form 990)

NonCash Contributions

OMB No 1545-0047

2010

Open to Public Inspection

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

Name of the organization  
L S U FOUNDATION

Employer identification number  
72-6020969

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art . . . .				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles .				
7 Boats and planes . . . .				
8 Intellectual property . .				
9 Securities—Publicly traded	X	52	9,038,685	MARKET PRICE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .	X	3	54,487	OPINION OF EXPERTS
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies				
21 Taxidermy . . . . .				
22 Historical artifacts . .				
23 Scientific specimens . .	X	68	63,300	OPINION OF EXPERTS
24 Archeological artifacts .				
25 Other ► ( _____ )				
26 Other ► ( _____ )				
27 Other ► ( _____ )				
28 Other ► ( _____ )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . .	29			1

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	Yes	No
b	If "Yes," describe the arrangement in Part II		No
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .	Yes	
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

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

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	LSU FOUNDATION HIRES THE FOLLOWING TO SELL NON-CASH CONTRIBUTIONS 1) REAL ESTATE AGENTS - SELL DONATED REAL ESTATE, WHEN APPLICABLE 2) STOCK BROKERS - SELL DONATED STOCK THROUGH BROKERAGE ACCOUNTS 3) AUCTION HOUSES - SELL DONATED ART, WHEN APPLICABLE

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 to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public  
Inspection

Name of the organization L S U FOUNDATION	Employer identification number 72-6020969
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Identifier	Return Reference	Explanation
FORM TD F 90-22 1 REPORTING	FORM 990, PART V, QUESTION 4B	LSU FOUNDATION DOES NOT OWN 50% OR MORE OF THE PROFITS OR CAPITAL OF THE FOREIGN PARTNERSHIPS IN WHICH IT IS INVESTED, ALSO, LSU FOUNDATION DOES NOT HAVE SIGNATURE AUTHORITY OVER THE FOREIGN FUNDS, THEREFORE, THE FOUNDATION IS NOT REQUIRED TO FILE FORM TD F 90-22 1 FOR THE FISCAL YEAR ENDED JUNE 30, 2011

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		CHARLES A LANDRY & ROBERT DAIGLE EACH OWN GREATER THAN 10% OF TRADITIONAL NEIGHBOR CONSULTING, LLC

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4		THE FOUNDATION'S BYLAWS WERE AMENDED IN NOVEMBER 2010 TO STATE THAT THE PRESENCE, EITHER IN PERSON OR BY PROXY, OF A MAJORITY OF THE VOTING DIRECTORS SHALL BE NECESSARY TO CONSTITUTE A QUORUM FOR THE TRANSACTION OF BUSINESS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE FOUNDATION HAS MEMBERS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		BOARD MEMBERS ARE ELECTED BY MEMBERS OF THE FOUNDATION

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE CFO REVIEWS THE FORM 990 WITH THE AUDIT COMMITTEE THE CFO PROVIDES A COPY OF THE FORM 990 TO THE ENTIRE BOARD OF DIRECTORS AND SEEKS COMMENT AND FEEDBACK PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ALL BOARD MEMBERS AND OFFICERS COMPLETE A DISCLOSURE STATEMENT QUESTIONNAIRE ON AN ANNUAL BASIS IN WHICH THEY ARE ASKED TO PROVIDE INFORMATION ON ENTITIES FOR WHICH THEY ARE BOARD MEMBERS, PARTNERS, OFFICERS, OR PRINCIPAL OWNERS THE FOUNDATION LEGAL COUNSEL REVIEWS SUCH DISCLOSURE STATEMENTS FOR IDENTIFICATION OF POTENTIAL CONFLICTS ALSO, PRIOR TO EXECUTION OF ALL CONTRACTS, THE FOUNDATION REQUIRES THE VENDOR TO COMPLETE A DISCLOSURE STATEMENT LISTING THE PRINCIPALS FOR THE CONTRACT THESE VENDOR DISCLOSURE STATEMENTS ARE COMPARED BY THE LEGAL OFFICE TO THE DISCLOSURES PROVIDED BY BOARD MEMBERS AND OFFICERS AND REVIEWED BY THE LEGAL OFFICE TO DETERMINE IF ANY POTENTIAL CONFLICTS OF INTEREST EXIST LEGAL COUNSEL SHALL ADDRESS ANY CONCERNS BROUGHT TO HIM BY THE LEGAL OFFICE REGARDING POTENTIAL CONFLICTS OF INTEREST WITH THE BOARD OF DIRECTORS ADDITIONALLY, THE BOARD PERIODICALLY PERFORMS A DETAILED REVIEW OF THE CONFLICT OF INTEREST POLICY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE FOUNDATION GATHERED EXTERNAL, INDEPENDENT SALARY SURVEYS OF EXECUTIVE COMPENSATION FOR RELEVANT PEER GROUPS. THE FOUNDATION'S EXECUTIVE COMMITTEE REVIEWED AND DISCUSSED THE SURVEYS DURING EXECUTIVE SESSION IN CONJUNCTION WITH AN ANNUAL REVIEW OF COMPENSATION FOR OFFICERS. THE EXECUTIVE COMMITTEE MINUTES REFLECT THE PROCESS DESCRIBED ABOVE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE FOUNDATION'S GOVERNING DOCUMENTS ARE FILED WITH THE LOUISIANA SECRETARY OF STATE'S OFFICE AND ARE AVAILABLE TO THE PUBLIC THE CONFLICT OF INTEREST POLICY AND CONSOLIDATED AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE FOUNDATION'S WEBSITE

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 40,654,616 ROUNDING 2 TOTAL TO FORM 990, PART XI, LINE 5 40,654,618

Identifier	Return Reference	Explanation
	FORM 990, PART XII, QUESTION 2C	THE LSU FOUNDATION HAS AN AUDIT COMMITTEE OF THE BOARD OF DIRECTORS WHICH IS RESPONSIBLE FOR THE OVERSIGHT OF THE EXTERNAL INDEPENDENT AUDIT, AS WELL AS THE SELECTION OF THE AUDITORS

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

L S U FOUNDATION

Employer identification number

72-6020969

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) LSU PROPERTY FOUNDATION  3838 WEST LAKESHORE DRIVE  BATON ROUGE, LA 70808 72-1295979	FOSTER SUPPORT VIA GIFTS OF REAL ESTATE & EQUIP FOR LSU, LAW & AG CENTERS	LA	501(C)(3)	LINE 5	N/A		No
(2) LSU MARINE PROPERTY FOUNDATION  3838 WEST LAKESHORE DRIVE  BATON ROUGE, LA 70808 71-0865718	FOSTER SUPPORT VIA GIFTS OF MARINE VESSELS FOR LSU, LAW & AG CENTERS	LA	501(C)(3)	LINE 7	N/A		No

Part III

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

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

Part IV

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

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

Part V

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

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

1

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

a

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

b

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

c

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

d

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

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

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

j

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

k

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

l

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

m

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

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

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

r

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

Yes

No

Yes

No

No

No

No

No

No

No

No

Yes

Yes

No

No

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) LSU PROPERTY FOUNDATION	B	3,536,405	CASH
(2) LSU PROPERTY FOUNDATION & LSU MARINE PROPERTY FOUNDATION	M	0	
(3) LSU PROPERTY FOUNDATION & LSU MARINE PROPERTY FOUNDATION	N	0	
(4) LSU PROPERTY FOUNDATION	D	6,900,000	LOAN VALUE
(5)			
(6)			

Schedule R (Form 990) 2010

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

[illegible]

**Part VII**   **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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**Note:** To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2010 Functional Currency and  
Exchange Rate QBU Statement**

**Name:** L S U FOUNDATION  
**EIN:** 72-6020969

QBU Id	Country of Operation	Functional Currency
STERLING		1

TY 2010 Other Deductions Schedule

Name: L S U FOUNDATION

EIN: 72-6020969

Trade or Business Activity	Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount	Code
	PORTFOLIO DEDUCTIONS		25,906	

**TY 2010 Itemized Total Foreign Taxes  
Schedule**

**Name:** L S U FOUNDATION  
**EIN:** 72-6020969

Description	Foreign Amount	US Amount	Date	Exchange Rate
TOTAL FOREIGN TAXES PAID		916		

Additional Data

Software ID:  
Software Version:  
EIN: 72-6020969  
Name: L S U FOUNDATION

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
J LANIER YEATES DIRECTOR	1 00	X						0	0	0	
CHARLES A LANDRY CHAIRPERSON/PAST CHAIRPERSON	2 00	X		X				0	0	0	
ROBERT H CROSBY III DIRECTOR	1 00	X						0	0	0	
MARK K ANDERSON DIRECTOR	1 00	X						0	0	0	
JEFF H BENHARD DIRECTOR	1 50	X						0	0	0	
J HERBERT BOYDSTUN DIRECTOR	1 50	X						0	0	0	
J TERRELL BROWN DIRECTOR	1 50	X						0	0	0	
LAURA L DAUZAT CHAIRPERSON-ELECT/CHAIRPERSON	2 00	X		X				0	0	0	
WILLIAM T FIRESHEETSII DIRECTOR	1 50	X						0	0	0	
T CASS GAIENNIE DIRECTOR	1 50	X						0	0	0	
G LEE GRIFFIN DIRECTOR	1 50	X						0	0	0	
FRANK W HARRISON III DIRECTOR	1 50	X						0	0	0	
GARY L LABORDE DIRECTOR / CHAIRPERSON-ELECT	1 50	X						0	0	0	
GENE W LAFITTE DIRECTOR	1 00	X						0	0	0	
LAURA A LEACH DIRECTOR	1 00	X						0	0	0	
WILLIAM B OWENS DIRECTOR	1 00	X						0	0	0	
JAMES R PELTIER DIRECTOR	1 00	X						0	0	0	
JOHN F SHACKELFORD III DIRECTOR	1 00	X						0	0	0	
SUE W TURNER DIRECTOR	1 00	X						0	0	0	
BURTON D WEAVER JR DIRECTOR	1 00	X						0	0	0	
WILLIAM H WRIGHT JR DIRECTOR	1 00	X						0	0	0	
FELIX R WEILL DIRECTOR	1 50	X						0	0	0	
ROBERT W DAIGLE DIRECTOR	1 00	X						0	0	0	
ROBERT M STUART JR DIRECTOR	1 50	X						0	0	0	
DAVID B MEANS III DIRECTOR	1 50	X						0	0	0	

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM G BOWDON PRESIDENT & CEO	40 00			X				333,916	0	20,479
GINA M DUGAS CHIEF FINANCIAL OFFICER	40 00			X				174,234	0	18,196
JEFFERY L MCLAIN VP FOR DEVELOPMENT	40 00			X				189,153	0	27,600
WILLIAM L SILVIA JR CORPORATE SECRETARY	1 00			X				0	0	0
GEORGE T MOSS CHIEF INVESTMENT OFFICER	40 00			X				135,962	0	19,180
ANN M MARMANDE-FRENZEL DIRECTOR OF DEVELOPMENT	40 00					X		104,201	0	16,834
MICHAEL R ROBINSON SR DIR/DEVELOPMENT	40 00					X		107,370	0	13,278

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

4d. Other program services			
(Code	) (Expenses \$	4,362,482	including grants of \$ (Revenue \$ )
OTHER PROGRAM SERVICES INCLUDE (1) CAPITAL OUTLAY ACQUISITION OF EQUIPMENT AND CONSTRUCTION OF FACILITIES FOR USE IN THE ACADEMIC AND RESEARCH ENDEAVORS OF THE UNIVERSITY (2) SALARY SUPPORT FOR ACADEMIC POSITIONS, (3) INSTITUTION-WIDE ACADEMIC PROGRAMS, SUCH AS CHANCELLOR'S DISTINGUISHED LECTURE SERIES AND HOSTING VISITING SCHOLARS, (4) SERVICE AWARDS FOR OUTSTANDING FACULTY AND PROFESSIONAL STAFF, (5) TRAVEL TO NATIONAL AND INTERNATIONAL BUSINESS SEMINARS AND CONFERENCES BY UNIVERSITY FACULTY AND STAFF OF ACADEMIC UNITS, (6) INSTITUTIONAL ADVANCEMENT			