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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
SUGAR BOWL

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1500 SUGAR BOWL DRIVE

City or town, state or country, and ZIP + 4
NEW ORLEANS, LA 70112

D Employer identification number
72-0272830

E Telephone number
(504) 828-2440

G Gross receipts $ 42,934,832

F Name and address of principal officer
PAUL HOOLAHAN
1500 SUGAR BOWL DRIVE
NEW ORLEANS, LA 70112

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW ALLSTATESUGARBOWL ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1935 | **M** State of legal domicile LA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
CONDUCTING AMATEUR AND COLLEGIATE SPORTING EVENTS TO PROMOTE TOURISM

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	24
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	**5**	15
6	Total number of volunteers (estimate if necessary)	**6**	124
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	0	0
	9 Program service revenue (Part VIII, line 2g)	12,165,088	40,791,035
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,591,510	1,127,643
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,775	16,154
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,761,373	41,934,832
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,638,800	15,764,843
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,931,347	2,434,289
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,490,813	8,615,681
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	13,060,960	26,814,813
	19 Revenue less expenses Subtract line 18 from line 12	700,413	15,120,019

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	38,720,389	52,932,102
	21 Total liabilities (Part X, line 26)	814,873	563,866
	22 Net assets or fund balances Subtract line 21 from line 20	37,905,516	52,368,236

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** 2013-05-13
Signature of officer — Date

PAUL HOOLAHAN CHIEF EXECUTIVE OFFICER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: AMY E WALTERS CPA CCIFP | Date | Check if self-employed ☐ | Preparer's taxpayer identification number (see instructions) P01078383

Firm's name (or yours if self-employed), address, and ZIP + 4: LAPORTE APAC, 111 VETERANS MEMORIAL BLVD SUITE 60, METAIRIE, LA 700054958 | EIN ▶ 72-1088864 | Phone no ▶ (504) 835-5522

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

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

ESTABLISHED TO SEEK OUT, PROMOTE, FINANCE, SPONSOR, SCHEDULE, CONDUCT, AND OPERATE AN ANNUAL CALENDAR OF LOCAL, STATE, NATIONAL AND INTERNATIONAL AMATEUR AND COLLEGIATE SPORTING EVENTS IN THE GREATER NEW ORLEANS AREA AND THE STATE OF LOUISIANA, FOR THE PURPOSE OF GENERATING TOURISM

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 $ 13,212,683 including grants of $ 8,000,000) (Revenue $ 28,382,464)

ON JANUARY 9, 2012, THE ORGANIZATION HOSTED THE ALLSTATE BCS NATIONAL CHAMPIONSHIP GAME, AN ANNUAL COLLEGIATE FOOTBALL POST-SEASON BOWL GAME DETERMINING THE NATIONAL CHAMPION OF THE 2011 NCAA DIVISION I FBS FOOTBALL SEASON 78,327 ATTENDED THE BSC CHAMPIONSHIP GAME, WITH APPROXIMATELY 71 1% OF THOSE ATTENDEES COMING FROM OUTSIDE THE GREATER NEW ORLEANS AREA IN ADDITION TO THE VISITORS WHO ATTENDED THE GAME, THERE WERE THOUSANDS WHO CAME INTO NEW ORLEANS TO BE A PART OF THE BCS EXPERIENCE WHO DID NOT ACTUALLY ATTEND THE GAME THE ALLSTATE BCS CHAMPIONSHIP GAME AND RELATED FESTIVITIES PROVIDED AN ESTIMATED ECONOMIC IMPACT TO THE NEW ORLEANS AND LOUISIANA ECONOMIES OF $260 38 MILLION THE ORGANIZATION LAST HOSTED THE BCS NATIONAL CHAMPIONSHIP GAME IN 2008 THE ECONOMIC IMPACT FROM THE 2012 EVENT GENERATED AN ECONOMIC IMPACT OF 20 8% HIGHER THAN THE 2008 EVENT THE 2012 BCS CHAMPIONSHIP GAME GENERATED THE LARGEST ECONOMIC IMPACT OF ANY SUGAR BOWL SPONSORED FOOTBALL GAMES IN THE ORGANIZATION'S HISTORY

4b (Code) (Expenses $ 9,250,921 including grants of $ 6,000,000) (Revenue $ 11,765,592)

THE ORGANIZATION HOSTS THE ALLSTATE SUGAR BOWL, AN ANNUAL COLLEGIATE FOOTBALL POST-SEASON BOWL GAME THE ALLSTATE SUGAR BOWL IS ONE OF THE OLDEST BOWL GAMES IN THE COUNTRY, HOSTING ITS 78TH ANNUAL COLLEGIATE BOWL GAME ON JANUARY 3, 2012 64,512 SPECTATORS ATTENDED THE JANUARY 3, 2012 EVENT, WITH APPROXIMATELY 76 5 PERCENT OF THE ATTENDEES COMING FROM OUTSIDE THE GREATER NEW ORLEANS METROPOLITAN AREA THE ALLSTATE SUGAR BOWL AND RELATED FESTIVITIES PROVIDED AN ESTIMATED ECONOMIC IMPACT TO THE NEW ORLEANS AND LOUISIANA ECONOMIES OF $157 77 MILLION DURING THE 2011-2012 FISCAL YEARS

4c (Code) (Expenses $ 815,362 including grants of $ 674,843) (Revenue $)

THE ORGANIZATION SPONSORS MORE THAN 20 AMATEUR SPORTING EVENTS AROUND THE GREATER NEW ORLEANS METROPOLITAN AREA TO PROMOTE AMATEUR SPORTS IN THE AREA, THE SUGAR BOWL SUPPORTED STATE AND LOCAL ASSOCIATIONS FOR VOLLEYBALL, GOLF, REGATTA, LACROSSE, SOCCER, BASKETBALL, PREP FOOTBALL, AND TENNIS IN ADDITION, THE ORGANIZATION SPONSORS THE MANNING AWARD, NATIONAL FOOTBALL FOUNDATION, NCAA FOOTBALL YOUTH INITATIVE, AND THE LOUISIANA HIGH SCHOOL ATHLETIC ASSOCIATION (LHSAA) EVENT AWARDS

(Code) (Expenses $ 1,000,000 including grants of $ 1,000,000) (Revenue $)

THE SUGAR BOWL DONATED $1,000,000 TO A LOCAL FOUNDATION FOR THE RESTRICTED PURPOSE OF RESTORING THE FACILITIES OF JOE BROWN PARK IN NEW ORLEANS ACCOMPANYING THIS DONATION IS A COMMITMENT TO THE FOUNDATION OF $100,000 PER YEAR FOR 10 YEARS OF DEDICATED MAINTENANCE AND PROGRAMMING

(Code) (Expenses $ 100,000 including grants of $ 100,000) (Revenue $)

THE SUGAR BOWL FINANCIALLY SUPPORTS LOCAL ORGANIZATIONS, SCHOOLS AND UNIVERSITIES TO PROMOTE ATHLETICS WITHIN THE COMMUNITY SINCE THE FISCAL YEAR ENDED JUNE 30, 2006, THE ORGANIZATION HAS DONATED $800,000 TO THE FRIENDS OF CITY PARK, TO HELP RESTORE AND MAINTAIN NEW ORLEANS CITY PARK'S ATHLETICS FACILITIES LOCATED IN NEW ORLEANS, LOUISIANA

4d Other program services (Describe in Schedule O)

(Expenses $ 1,100,000 including grants of $ 1,100,000) (Revenue $)

4e **Total program service expenses** ▶ $ 24,378,966

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 instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, 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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
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, line10? *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		No
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		No
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	Yes	
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		No
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II 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, Part 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*	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		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
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? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	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? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	**35a**		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** 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	**1a**	66		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	**2a**	15			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			**2b**	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
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 or securities account)?			**4a**	Yes	
b	If "Yes," enter the name of the foreign country ▶ BD 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**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
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.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			**13a**		
b	Enter the aggregate 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 aggregate 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			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			No
6	Did the organization have members or stockholders?	6		Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Yes	
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	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete 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 the Form 990				
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a		Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		Yes	
13	Did the organization have a written whistleblower policy?	13		Yes	
14	Did 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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made 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 ▶

THE ORGANIZATION
1500 SUGAR BOWL DRIVE
NEW ORLEANS, LA 70112
(504) 828-2440

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) LANCE AFRICK PRESIDENT	10 00	X		X				0	0	0
(2) JACK LABORDE PRESIDENT-ELECT	5 00	X		X				0	0	0
(3) JOHN JAY BATT VICE PRESIDENT	5 00	X		X				0	0	0
(4) DENNIS WALDRON TREASURER	5 00	X		X				0	0	0
(5) G CHARLES LAPEYRE SECRETARY	5 00	X		X				0	0	0
(6) RICHARD R SMITH EXEC COMMITTEE CHAIRMAN	5 00	X		X				0	0	0
(7) RONALD V BURNS SR BOARD MEMBER	50	X						0	0	0
(8) JOHN BUSENLENER BOARD MEMBER	50	X						0	0	0
(9) RILEY BUSENLENER BOARD MEMBER	50	X						0	0	0
(10) KYLE M FRANCE BOARD MEMBER	50	X						0	0	0
(11) LLOYD FRISCHHERTZ BOARD MEMBER	50	X						0	0	0
(12) MICHELLE GAIENNIE BOARD MEMBER	50	X						0	0	0
(13) GARY J GLUECK BOARD MEMBER	50	X						0	0	0
(14) OSCAR GWIN III BOARD MEMBER	50	X						0	0	0
(15) RAYMOND JEANDRON JR BOARD MEMBER	50	X						0	0	0
(16) WILLIAM J KEARNEY III BOARD MEMBER	50	X						0	0	0
(17) WILLIAM J KEARNEY IV BOARD MEMBER	50	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(18) JAMES LANDIS BOARD MEMBER	50	X						0	0	0
(19) DAVID B MELIUS BOARD MEMBER	50	X						0	0	0
(20) CONRAD MEYER IV BOARD MEMBER	50	X						0	0	0
(21) WARREN MONTGOMERY BOARD MEMBER	50	X						0	0	0
(22) J LEE MOSS BOARD MEMBER	50	X						0	0	0
(23) MIKE READ BOARD MEMBER	50	X						0	0	0
(24) MARK ROMIG BOARD MEMBER	50	X						0	0	0
(25) PAUL J HOOLAHAN CHIEF EXECUTIVE OFFICER	55 00			X				590,869	0	100,711
(26) JEFF HUNDLEY CHIEF OPERATING OFFICER	55 00				X			378,447	0	78,442
(27) KATHY GASPARD DIRECTOR OF BUSINESS OPERATIONS	40 00					X		107,393	0	35,876
(28) JOHN SUDSBURY DIRECTOR OF COMMUNICATIONS	40 00					X		106,268	0	24,284
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								1,182,977	0	239,313

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 4

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

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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ROY KIESEL FORD DOODY & THURMAN APLC 9100 BLUEBONNET CENTRE BLVD BATON ROUGE, LA 70809	LEGAL	258,278
THE VEGA GROUP 7220 WASHINGTON AVENUE NEW ORLEANS, LA 70125	ENTERTAINMENT	200,681
DESTINATION MANAGEMENT INC 4220 HOWARD AVENUE NEW ORLEANS, LA 70125	TRANSPORTATION	124,888

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 3

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				
	d	Related organizations . . . 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f				
	g	Noncash contributions included in lines 1a-1f $				
	h	**Total.** Add lines 1a-1f . . . . . ▶				
Program Service Revenue		Business Code				
	2a	TICKET SALES - BCS NAT	711210	24,306,070	24,306,070	
	b	TICKET SALES - SUGAR B	711210	10,176,735	10,176,735	
	c	SPONSORSHIP - BCS NATI	541800	2,659,849	2,659,849	
	d	SPONSORSHIP - SUGAR BO	541800	1,362,588	1,362,588	
	e	LICENSING - BCS NATION	711300	1,057,062	1,057,062	
	f	All other program service revenue		1,228,731	1,228,731	
	g	**Total.** Add lines 2a–2f . . . . . ▶		40,791,035		
	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		977,643		977,643
	4	Income from investment of tax-exempt bond proceeds . . ▶				
	5	Royalties . . . . . ▶				
		(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: 1,150,000				
	b	Less cost or other basis and sales expenses: 1,000,000				
	c	Gain or (loss): 150,000				
	d	Net gain or (loss) . . . . . ▶	150,000			150,000
Other Revenue	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . a				
	b	Less direct expenses . . . b				
	c	Net income or (loss) from fundraising events . . ▶				
	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				
	b	Less cost of goods sold . . b				
	c	Net income or (loss) from sales of inventory . . ▶				
		Miscellaneous Revenue / Business Code				
	11a	MISCELLANEOUS 900099	16,154	16,154		
	b					
	c					
	d	All other revenue				
	e	**Total.** Add lines 11a–11d . . . . . ▶	16,154			
	12	**Total revenue.** See Instructions . . . ▶	41,934,832	40,807,189	0	1,127,643

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)

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

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 United States See Part IV, line 21	15,724,843	15,724,843		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	40,000	40,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,174,542	939,634	234,908	
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	754,067	81,108	672,959	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	505,680		505,680	
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	313,243		313,243	
c	Accounting	84,160		84,160	
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	20,000		20,000	
12	Advertising and promotion				
13	Office expenses	83,118		83,118	
14	Information technology	33,472		33,472	
15	Royalties . .				
16	Occupancy	98,587		98,587	
17	Travel	22,267		22,267	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	138,396	138,396		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	124,801		124,801	
23	Insurance	101,444	13,950	87,494	
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	BCS NATIONAL CHAMPIONSH	3,898,611	3,898,611		
b	SUGAR BOWL ANNUAL CLASS	3,262,944	3,262,944		
c	UNIFORMS	123,779	123,779		
d	ANCILLARY AMATEUR SPORT	117,695	117,695		
e					
f	All other expenses	193,164	38,006	155,158	
25	**Total functional expenses.** Add lines 1 through 24f	26,814,813	24,378,966	2,435,847	0
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		8,354,201	2	6,238,904
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		308,620	4	1,074,643
	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)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		84,904	9	153,694
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 1,312,010			
	b	Less accumulated depreciation	10b 513,757	908,353	10c	798,253
	11	Investments—publicly traded securities		29,000,750	11	44,652,047
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		63,561	15	14,561
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		38,720,389	16	52,932,102
Liabilities	17	Accounts payable and accrued expenses		477,791	17	563,866
	18	Grants payable			18	
	19	Deferred revenue		337,082	19	0
	20	Tax-exempt bond liabilities			20	
	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			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		814,873	26	563,866
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		37,905,516	27	52,368,236
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ 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		37,905,516	33	52,368,236
	34	Total liabilities and net assets/fund balances		38,720,389	34	52,932,102

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	41,934,832
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,814,813
3	Revenue less expenses Subtract line 2 from line 1	3	15,120,019
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	37,905,516
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-657,299
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	52,368,236

Part XII Financial Statements and Reporting

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

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

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SUGAR BOWL

Employer identification number
72-0272830

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 **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?

	Yes	No
(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? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

h Provide the following information about the supported organization(s)

(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? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
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)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) **12**

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 2011 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2010 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2011.** 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—2010.** 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—2011.** 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—2010.** 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 IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	3,000,000	1,395,000	1,395,000			5,790,000
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	29,765,932	10,288,261	10,350,737	12,165,088	40,791,035	103,361,053
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	32,765,932	11,683,261	11,745,737	12,165,088	40,791,035	109,151,053
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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	350,000	222,427	374,418	595,000	482,152	2,023,997
c Add lines 7a and 7b	350,000	222,427	374,418	595,000	482,152	2,023,997
8 **Public Support** (Subtract line 7c from line 6)						107,127,056

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	32,765,932	11,683,261	11,745,737	12,165,088	40,791,035	109,151,053
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,136,387	1,044,547	889,399	673,726	977,643	4,721,702
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,136,387	1,044,547	889,399	673,726	977,643	4,721,702
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-7,566	1,007	9,428			2,869
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	47,519	28,463	5,075	4,775	16,154	101,986
13 **Total support** (Add lines 9, 10c, 11 and 12)	33,942,272	12,757,278	12,649,639	12,843,589	41,784,832	113,977,610

14 **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

15	Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	93 990 %
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	91 720 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	17	4 140 %
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	5 390 %

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2010.** 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 **stop here.** 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 explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE A, PART II, LINE 12, EXPLANATION OF OTHER INCOME MISC INCOME

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SUGAR BOWL

Employer identification number
72-0272830

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? ☐ Yes ☐ No

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 ☐ Yes ☐ No

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	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

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 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

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 ▶ $ _____

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	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					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
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 Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		994,379	305,688	688,691
d Equipment				
e Other		317,631	208,069	109,562
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				798,253

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	41,934,832
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	26,814,813
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	15,120,019
4	Net unrealized gains (losses) on investments	4	-657,299
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-657,299
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	14,462,720

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	41,277,533
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-657,299		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	-657,299
3	Subtract line **2e** from line **1**			3	41,934,832
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**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	41,934,832

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	26,814,813
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)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	26,814,813
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**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	26,814,813

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION ACCOUNTS FOR UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACS 740 (FORMERLY FINANCIAL ACCOUNTING STANDARDS BOARD INTERPRETATION NO 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF FASB STATEMENT NO 109) FASB ACS 740 PRESCRIBES RECOGNITION THRESHOLD AND MEASUREMENT PROCESS FOR FINANCIAL STATEMENT RECOGNITION OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE INTERPRETATION ALSO PROVIDES GUIDANCE ON RECOGNITION, DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION THERE WAS NO IMPACT ON FINANCIAL POSITION OR RESULTS OF OPERATIONS THE ORGANIZATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2012

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SUGAR BOWL

Employer identification number
72-0272830

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 15

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 3

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
(1) SCHOLARSHIPS	4	40,000			SCHOLARSHIPS FOR ACCOMPLISHED HIGH SCHOOL FOOTBALL STUDENT-ATHLETES

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 SUGAR BOWL PROVIDES FINANCIAL SUPPORT TO HELP UNDERWRITE LOCAL AMATEUR SPORTING EVENTS THESE EVENTS ARE ATTENDED BY MEMBERS OF THE SUGAR BOWL TO MONITOR THE USE OF THE GRANT
		FORM 990, SCHEDULE I, PART I, LINE 1 CHAMPIONSHIP SERIES UNDER THE ORGANIZATION'S CONTRACT WITH THE BOWL CHAMPIONSHIP SERIES (BCS), ALLSTATE SUGAR BOWL IS COMMITTED TO PAYING $6,000,000 PER GAME, WITH THE EXCEPTION OF THE BCS CHAMPIONSHIP GAME FOR WHICH IT PAYS $8,000,000, TO THE BCS THE BCS DISTRIBUTES THE PAYOUT TO THE PARTICIPATING CONFERENCES AND SCHOOLS BASED ON PREDETERMINED FORMULAS THE BCS CONTRACT EXPIRES APRIL 1, 2014

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 72-0272830
Name: SUGAR BOWL

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BOWL CHAMPIONSHIP SERIES - NATIONAL COLLEGIATE ATHLETIC ASSOCIATION201 PRESIDENTS CIRCLE SALT LAKE CITY, UT 84112	44-0567264	501(C)(3)	14,000,000				TO ENHANCE THE QUALITY OF INTERCOLLEGIATE ATHLETICS AT CONFERENCES AND UNIVERSITIES PARTICIPATING IN THE BOWL CHAMPIONSHIP SERIES
FRIENDS OF CITY PARK1 PALM DRIVE NEW ORLEANS, LA 70124	72-0875507	501(C)(3)	100,000				TO HELP RESTORE AND MAINTAIN CITY PARK'S TAD GORMLEY STADIUM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUTHERN YACHT CLUB105 N ROADWAY DRIVE NEW ORLEANS, LA 70124	72-0323180	501(C)(7)	30,000				TO SPONSOR THE OPTIMIST MID-WINTER REGATTA, THE GREAT OAKS REGATTA, AND THE J-22 WORLD CHAMPIONSHIP REGATTA
TULANE UNIVERSITY6823 ST CHARLES AVENUE NEW ORLEANS, LA 70118	72-0423889	501(C)(3)	57,500				TO SUPPORT TULANE UNIVERSITY WOMEN'S GOLF PROGRAM AND TOURNAMENTS AND TO SPONSOR A TULANE UNIVERSITY WOMEN'S VOLLEYBALL TOURNAMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FRIENDS OF NEW ORLEANS LACROSSE3525 N CAUSEWAY BLVD 901 METAIRIE,LA 70002	20-5396518	501(C)(3)	23,235				TO SPONSOR THE ALLSTATE SUGAR BOWL LACROSSE CLASSIC
LOUISIANA SOCCER ASSOCIATION475 GARDERE LANE BATON ROUGE,LA 70820	72-1067495	501(C)(3)	17,500				TO SPONSOR THE ALLSTATE SUGAR BOWL LOUISIANA DIVISION 1 STATE CUP CHAMPIONSHIP

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUTHEASTERN CONFERENCE2201 RICHARD ARRINGTON BLVD NORTH BIRMINGHAM,AL 35203	63-0377461	501(C)(3)	40,000				TO FUND POST-GRADUATE SCHOLARSHIPS FOR DESERVING STUDENT-ATHLETES FROM THE SOUTHEASTERN CONFERENCE
FRIENDS OF PREP SPORTS332 RAILROAD AVENUE RESERVE,LA 70084	72-3687075		40,000				TO SUPPORT HIGH SCHOOL SPORTS BY SPONSORING THE PREP CLASSIC BASKETBALL TOURNAMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DELGADO COMMUNITY COLLEGE615 CITY PARK AVENUE/ROOM 145A NEW ORLEANS, LA 70119	72-1123204	GOVERNMENTAL	25,000				TO SUPPORT THE SCHOOL'S BASEBALL PROGRAM AND STADIUM
CATHOLIC YOUTH & YOUNG ADULT MINISTRY - ARCHDIOCESE OF NEW ORLEANS1000 HOWARD AVENUE STE 700 NEW ORLEANS, LA 70113	72-0408911	501(C)(3)	5,000				TO SPONSOR THE ALLSTATE SUGAR BOWL CYO BASKETBALL TOURNAMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DILLARD UNIVERSITY2601 GENTILLY BLVD NEW ORLEANS,LA 70122	72-0408929	501(C)(3)	5,000				TO SUPPORT DILLARD UNIVERSITY'S BASKETBALL PROGRAM
COSIDA202 TUDOR ROAD ITHACA,NY 14850	23-7001888	501(C)(6)	5,000				TO SUPPORT PROGRAMMING AT THE ANNUAL CONVENTION OF THE COLLEGIATE SPORTS INFORMATION DIRECTORS OF AMERICA (COSIDA)

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BREES DREAM FOUNDATIONPO BOX 5065 CLEVELAND,OH 441019853	56-2380198	501(C)(3)	1,000,000				TO HELP RESTORE AND BUILD NEW YOUTH ATHLETIC FACILITIES AT JOE BROWN PARK
NEW ORLEANS 2012 FINAL FOUR HOST COMMITTEE 1500 SUGAR BOWL DRIVE NEW ORLEANS,LA 70112	27-2647861	501(C)(3)	282,858				TO SUPPORT THE NEW ORLEANS LOCAL ORGANIZING COMMITTEE IN HOSTING THE 2012 NCAA MEN'S FINAL FOUR

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LOUISIANA STADIUM AND EXPOSITION DISTRICT1500 SUGAR BOWL DRIVE NEW ORLEANS, LA 70112	72-1393506	GOVERNMENTAL	40,000				TO SUPPORT HIGH SCHOOL SPORTS BY SPONSORING THE PREP CLASSIC FOOTBALL GAMES
NEW ORLEANS AAU JUNIOR OLYMPICS HOST COMMITTEE INC 2020 ST CHARLES AVENUE NEW ORLEANS, LA 70130	27-2481845	501(C)(3)	25,000				TO PROVIDE EQUIPMENT USED TO SUPPORT HOSTING OF THE AAU JUNIOR OLYMPICS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KELLY GIBSON FOUNDATIONPO BOX 57478 NEW ORLEANS, LA 70157	20-3413020	501(C)(3)	15,000				TO SPONSOR THE TOMMY MOORE JUNIOR GOLF TOURNAMENT AND TO PROVIDE SCHOLARSHIPS TO DESERVING YOUTH GOLFERS
COLLEGE FOOTBALL ASSISTANCE FUND 133 N BUFFALO DRIVE SUITE 250 LAS VEGAS, NV 89128	27-3893707	501(C)(3)	10,000				TO SUPPORT A PROGRAM DESIGNED TO HELP VICTIMS OF SPINAL CORD INJURIES

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SUGAR BOWL

Employer identification number
72-0272830

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
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**		
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 ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
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?	**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**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured 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 Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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) PAUL J HOOLAHAN	(i)	484,500	90,292	16,077	49,000	51,711	691,580	0
	(ii)	0	0	0	0	0	0	0
(2) JEFF HUNDLEY	(i)	306,000	61,500	10,947	45,000	33,442	456,889	0
	(ii)	0	0	0	0	0	0	0

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
	PART I, LINE 7	THE CHIEF EXECUTIVE OFFICER AND CHIEF OPERATING OFFICER ARE ELIGIBLE FOR BONUSES BY CONTRACT, HOWEVER THE AMOUNT OF CASH OR OTHER PROPERTY IS NOT SPECIFIED IN THE CONTRACT, OR DETERMINED BY A FIXED FORMULA SPECIFIED IN THE CONTRACT THE AMOUNT OF THE BONUSES PAID TO THE EMPLOYEES ARE DETERMINED AFTER THE BOWL'S COMPENSATION COMMITTEE REVIEWS THE EMPLOYEES' OVERALL JOB PERFORMANCE AND THE EMPLOYER'S FINANCIAL RESULTS FOR THE YEAR THE COMMITTEE ALSO RELIES ON AN INDEPENDENT COMPENSATION SURVEY PREPARED BY STONE PARTNERS, AN INDEPENDENT COMPENSATION CONSULTING FIRM THE COMPENSATION COMMITTEE PROVIDES RECOMMENDATIONS OF THE BONUSES TO THE EXECUTIVE COMMITTEE FOR THE ULTIMATE DETERMINATION OF THE BONUSES

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SUGAR BOWL

Employer identification number
72-0272830

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	(c) Corrected? 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? To	(b) From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) No	(f) Approved by board or committee? Yes	(f) No	(g) Written agreement? Yes	(g) 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) BILL KEARNEY IV	DIRECTOR	11,538	BILL KEARNEY IV IS AN OWNER OF GALATOIRE'S RESTAURANT A RECEPTION AND DINNER HONORING DIGNITARIES FROM THE UNIVERSITY OF ALABAMA, LOUISIANA STATE UNIVERSITY, COMMISSIONERS OF THE BOWL CHAMPIONSHIP SERIES, TELEVISION PARTNERS AND THE TITLE SPONSOR WAS HELD AT THE RESTAURANT FAIR MARKET VALUE WAS PAID FOR THE DINNER & RECEPTION		No
(2) WAYNE PIERCE	FORMER DIRECTOR	32,554	WAYNE PIERCE IS THE OWNER OF THE BON TON RESTAURANT THE RESTAURANT PROVIDED TEAM WELCOME DINNERS, WHICH WERE PURCHASED AT FAIR MARKET VALUE		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 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

2011

Open to Public Inspection

Name of the organization
SUGAR BOWL

Employer identification number
72-0272830

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	JOHN BUSENLENER AND RILEY BUSENLENER ARE FATHER AND SON, RESPECTIVELY WILLIAM J KEARNEY, III AND WILLIAM J KEARNEY, IV ARE FATHER AND SON, RESPECTIVELY
	FORM 990, PART VI, SECTION A, LINE 6	THE SUGAR BOWL COMMITTEE IS CURRENTLY COMPRISED OF 124 MEMBERS, 84 OF WHOM CAN BE IN THE "ACTIVE" CATEGORY AT ANY ONE TIME PER THE ORGANIZATION'S BYLAWS TOGETHER, THESE 124 MEMBERS FORM OVER 35 DIFFERENT WORKING COMMITTEES THAT CARRY OUT MUCH OF THE SUGAR BOWL'S BUSINESS LEADERSHIP FOR THE GROUP COMES FROM AN ELECTED GROUP OF OFFICERS AND EXECUTIVE COMMITTEE MEMBERS
	FORM 990, PART VI, SECTION A, LINE 7A	THE FOLLOWING OFFICER POSITIONS ARE ELECTED ANNUALLY BY THE MEMBERSHIP AT LARGE PRESIDENT, PRESIDENT-ELECT, VICE PRESIDENT, TREASURER AND SECRETARY ADDITIONALLY, THE MEMBERSHIP ELECTS 3 INDIVIDUALS EACH YEAR FOR SERVICE ON THE EXECUTIVE COMMITTEE FINALLY, A CHAIRMAN OF THE EXECUTIVE COMMITTEE IS ELECTED BY THE MEMBERS OF THE EXECUTIVE COMMITTEE
	FORM 990, PART VI, SECTION A, LINE 7B	THERE ARE MINIMAL INSTANCES WHERE THE GOVERNING BODY'S DECISIONS ARE SUBJECT TO THE APPROVAL BY THE GENERAL MEMBERSHIP, SUCH AS MODIFICATIONS TO THE ORGANIZATION'S BYLAWS OR CHARTER
	FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE ORGANIZATION'S FORM 990 WILL BE PRESENTED AT AN EXECUTIVE COMMITTEE MEETING DURING THIS MEETING THE TAX RETURN WILL BE REVIEWED AND ALL QUESTIONS ARE RESOLVED A VOTE IS TAKEN TO AUTHORIZE THE FILING OF THE RETURN THE CEO AND COO ATTEND THIS MEETING TO PARTICIPATE IN THE REVIEW OF THE FORM 990
	FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY AND QUESTIONNAIRE IS CIRCULATED TO EVERY OFFICER, DIRECTOR, MEMBER AND EVERY EMPLOYEE ANNUALLY THE COMPLETED QUESTIONNAIRES ARE REVIEWED BY THE 990 COMMITTEE DESIGNED BY THE BOARD FOR CONFLICTS OF INTEREST ALL CONFLICTS ARE RESOLVED AND DISCLOSED TO THE EXECUTIVE COMMITTEE RECORDS OF ALL DISPOSITIONS ARE RETAINED IN THE SUGAR BOWL OFFICES
	FORM 990, PART VI, SECTION B, LINE 15	SUGAR BOWL CONTRACTS STONE PARTNERS, A COMPENSATION CONSULTING FIRM, WHICH REVIEWS THE COMPENSATION OF THE CEO AND COO STONE PARTNERS CONDUCTS A COMPARABLE COMPENSATION SURVEY AND PREPARES A REPORT AND PROVIDES THE REPORT TO THE EXECUTIVE COMPENSATION COMMITTEE THE COMMITTEE REVIEWS THE REPORT, RESOLVES ANY ISSUES AND MAKES A RECOMMENDATION TO THE EXECUTIVE BOARD THE EXECUTIVE BOARD REVIEWS THE RECOMMENDATION IN THE CONSULTANT'S REPORT AT A REGULARLY SCHEDULED MEETING AND SETS COMPENSATION FOR THE CEO AND COO THE PROCESS OF DETERMINING APPROPRIATE LEVELS OF COMPENSATION IS DESIGNED TO COMPLY WITH THE REBUTTABLE PRESUMPTION RULES OF REGULATION SECTION 53 4958-6
	FORM 990, PART VI, SECTION C, LINE 19	ALL GOVERNING DOCUMENTS, THE CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -657,299
ANCILLARY AMATEUR SPORTING EVENTS DETAIL	FORM 990, PART IX, LINE 24D	REGATTA 29,017 TRACK AND FIELD 24,163 NCAA YOUTH FOOTBALL 14,707 AWARDS AMD TROPHIES 12,302 NATIONAL FOOTBALL FOUNDATION 11,094 VOLLEYBALL 10,000 SWIMMING 9,180 MANNING AWARD 5,571 LACROSSE 1,256 BASKETBALL 405 ---------- TOTAL COSTS 117,695

Additional Data

Software ID:
Software Version:
EIN: 72-0272830
Name: SUGAR BOWL

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

4d. Other program services

(Code) (Expenses $ 1,000,000 including grants of $ 1,000,000) (Revenue $)

THE SUGAR BOWL DONATED $1,000,000 TO A LOCAL FOUNDATION FOR THE RESTRICTED PURPOSE OF RESTORING THE FACILITIES OF JOE BROWN PARK IN NEW ORLEANS ACCOMPANYING THIS DONATION IS A COMMITMENT TO THE FOUNDATION OF $100,000 PER YEAR FOR 10 YEARS OF DEDICATED MAINTENANCE AND PROGRAMMING

(Code) (Expenses $ 100,000 including grants of $ 100,000) (Revenue $)

THE SUGAR BOWL FINANCIALLY SUPPORTS LOCAL ORGANIZATIONS, SCHOOLS AND UNIVERSITIES TO PROMOTE ATHLETICS WITHIN THE COMMUNITY SINCE THE FISCAL YEAR ENDED JUNE 30, 2006, THE ORGANIZATION HAS DONATED $800,000 TO THE FRIENDS OF CITY PARK, TO HELP RESTORE AND MAINTAIN NEW ORLEANS CITY PARK'S ATHLETICS FACILITIES LOCATED IN NEW ORLEANS, LOUISIANA