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DLN: 93493226036803

Department of the Treasury

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)

OMB No 1545-0047

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspec<u>tio</u>n A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012 Name of organization THE NATIONAL FOOTBALL FOUNDATION D Employer identification number **B** Check if applicable Address change & COLLEGE HALL OF FAME INC 22-1508812 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 433 Las Colinas Blvd East Terminated (972) 556-1000 Amended return City or town, state or country, and ZIP + 4 Irving, TX 75039 Application pending **G** Gross receipts \$ 4,363,449 Name and address of principal officer **H(a)** Is this a group return for Steven Hatchell ┌ Yes 🗸 No affiliates? 433 Las Colinas Blvd East Irving, TX 75039 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status H(c) Group exemption number ► Website: ► www footballfoundation org L Year of formation 1947 M State of legal domicile NY Part I Summary Briefly describe the organization's mission or most significant activities THE FOUNDATION WAS ORGANIZED TO PROMOTE AND DEVELOP THE POWER OF AMATEUR FOOTBALL IN DEVELOPING QUALITIES OF LEADERSHIP, SPORTSMANSHIP, COMPETITIVE ZEAL AND ACADEMIC EXCELLENCE Activities & Governance 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) . . 45 44 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 54 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 20 **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 **Prior Year Current Year** 2.330.795 2.850.629 Contributions and grants (Part VIII, line 1h) . . Program service revenue (Part VIII, line 2g) . 1,313,314 1,318,177 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 377,530 280,842 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -580,325 -581,463 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 3,348,351 3,961,148 13 692,018 382,950 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 2,539,133 2,481,935 Expenses 5-10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 98,000 72,000 Total fundraising expenses (Part IX, column (D), line 25) ▶ 348,702 b 17 1,562,984 1,313,087 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 4,892,135 4,249,972 19 Revenue less expenses Subtract line 18 from line 12 -930,987 -901,621 Assets or d Balances **Beginning of Current End of Year** 20 Total assets (Part X, line 16) . 15,745,264 14,065,019 21 Total liabilities (Part X, line 26) 8,945,052 7,588,476 22 Net assets or fund balances Subtract line 21 from line 20 6,800,212 6,476,543 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

2013-08-15 Signature of officer Date Sian Here Steven Hatchell PRESIDEN<mark>T & CEO</mark> Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Check Γ Jonathan B Taylor self-employed

Paid Preparer Use Only

Firm's name F Spielman Koenigsberg & Parker LLP Firm's EIN 🕨 Firm's address 🟲 1745 Broadway - 18th Floor Phone no (212) 489-5200 New York, NY 10019 ✓ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

			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	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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^{\square}	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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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 and XII 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, Parts I and IV	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 United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1^2 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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 lines 24b through 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? <i>If</i> "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, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		Νo
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 direct or indirect 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		Νo
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		Νo
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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 11b and 19?	20	Yes	

18 Enter the number reported in 80x 3 of form 309 6 Enter - 0 - if not applicable 1a 47 1b 0 0 0 0 0 0 0 0 0		Check if Schedule O contains a response to any question in this Part V	-	Yes	 N
be Enter the number of Farms W-2G micluded in line 1.8 Enter C- of not applicable and process of the programment of the process of the proces	1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 47		165	14
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gameng (gameling) wannings to prize wanners? 2	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
Tax Statements, filed for the calendar year ending with or within the year covered by this return. 5 If all least one is reported on line 2a, did the organization file all required fielderal employment tax returns? 5 If all least one is reported on line 2a, did the organization file all required fielderal employment tax returns? 5 If all least one is reported on line 2a, did the organization file all required fielderal employment tax returns? 5 If If Yes, "has it filed a Form 900-T for this year? If "No," provide an explanation in Schedule 0. 5 If Yes," has it filed a Form 900-T for this year? If "No," provide an explanation in Schedule 0. 5 If Yes," has it filed a Form 900-T for this year? If "No," provide an explanation in Schedule 0. 5 If Yes, a more the name of the foreign country (such as a bank account, or other financial accounts? 5 If Yes, a more the name of the foreign country (such as a bank account, or other financial accounts? 5 If Yes, a more the name of the foreign country (such as a bank account, securities account, or other financial accounts? 5 If Yes, a more the name of the foreign country (such as a bank account, securities account, or other financial accounts? 5 If Yes, a form the name of the foreign country (such as a bank account, securities accounts? 5 If Yes, a foreign country (such as a bank account, securities accounts? 5 If Yes, a foreign country (such as a bank account, securities accounts? 5 If Yes, a foreign country (such as a bank account, securities accounts? 5 If Yes, a foreign country (such as a bank account, securities account, securities accounts? 5 If Yes, a foreign country (such as a bank account, securities accounts? 5 If Yes, a foreign country (such as a bank account accountry (such as a security security securities accounts? 5 If Yes, a foreign country (such as a security security securities accountry foreign country foreign security security securities accountry foreign accountry foreign securities accountry foreign accountry foreign accountry foreign			1 c		
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b if "Yes," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule 0 4 A Kanny time during the calendar year, did the organization have an interest in, or a signature or other authority over a minimizal account. In a foreign country (such as a bank account, securities account, or other financial accounts) b If "Yes," enter the name of the foreign country > See instructions for filling requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See was the organization in party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b ID did any taxable party notify the organization file Form 88.6—T? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization above annual gross receipts that are normally greater than \$100,000, and did the organization above annual gross receipts that are normally greater than \$100,000, and did the organization above annual gross receipts that are normally greater than \$100,000, and did the organization and solicit any contributions that were not tax deductible contributions or grits were not tax deductible contributions and party for goods and services provided? 6c Yes 7c If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible accordance to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c In yes a services provided to the payor? 7d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c If Yes, and the organization notify the donor of the value of the goods or services provided? 7d If Yes, and the organization notify the donor of the value of the good o			2b	Yes	
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4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts) 5b If "Yes," enter the name of the foreign country. 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization as party to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line 5a or 5b, did the organization file Form 886-T? 5c If "Yes," to line 5a or 5b, did the organization file Form 886-T? 6c Dess the organization have annual gross receipts that are normally greater than \$1,00,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6c Yes 7c Organizations that may receive deductible contribution an express statement that such contributions or girls were not tax deductibles? 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization notify the donor of the value of the goods or services provided to the payor? 9d Did the organization notify the donor of the value of the goods or services provided to the payor? 1b If "Yes," indicate the number of forms \$8.82 filed during the year. 2 Did the organization notify the donor of the value of the goods or services provided? 7d If "Yes," indicate the number of forms \$8.82 filed during the year. 2 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If the organization received a contribution of cars, boats, eignienes, or other vehicles, did the organization file Form 8.99 as required? 9 Did the organization received a contribution of					'
over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts) b. If "Yes," ander the name of the foreign country. P. See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts 5a. Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5b. Unit any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization object any contributions that were not tax deductible as charitable contributions? 6b. Yes 7c. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c. Organization that may receive deductible contributions under section 170(c). 8d. Yes 7c. If "Yes," did the organization notify the donor of the value of the goods or services provide? 9d. If "Yes," did the organization notify the donor of the value of the goods or services provide? 9d. If "Yes," indicate the number of Forms 8282 filed during the year 1 If "Yes," indicate the number of Forms 8282 filed during the year 9d. If "Yes," indicate the number of Forms 8282 filed during the year 1 If the organization neceived a contribution of qualified intellectual property, did the organization file form 8899 as required? 9d. If the organization meaninal mind donor advised funds and section 509(a)(3) support ing organization. Did the supporting organization make any taxable distributions under section 4966? 9d. Did the organization make any taxable distributions under section 4966? 9d. Did the organization make any taxable distributions under section 509(a)(3) support ing organization. 9d. If It is a propagation in the propagation in the propagation in the propagation in the pr			<u> </u>		
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b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 1		See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 1		Was the same and the same that			_
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not text deductible as chantable contributions? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Organization stat 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. d Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distribution to a donor, donor advisor, or related person? 9b Did the organization make any taxable distributions under section 4966? b Corss income from members or shareholders a Titla Did Section 501(c)(7) organizations. Enter a Titla Did Section 501(c)(29) qualified nonprofit					N
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c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$282? d If "Yes," indicate the number of Forms \$282 filed during the year . 7d		services provided to the payor?			
file Form 2582?				Yes	
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against amounts due or received from them)	а	Gross income from members or shareholders			
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In which the organization is licensed to issue qualified health plans					<u></u>
c Enter the amount of reserves on hand	b	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
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	4a		14a		ĺΝ

56	ection A. Governing Body and Management			
	Established Color		Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	
	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			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	No
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	No
b 11a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes Yes Yes	No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes Yes Yes	No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes Yes	No
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	
b 111a b 112a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participation in a joint venture or similar arrangement with a taxable entity during the year? 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?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No

Own website Another's website V Upon request Other (explain in Schedule O)

interest policy, and financial statements available to the public during the tax year

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of

▶THE ORGANIZATION 433 LAS COLINAS BLVD EAST STE 1130 IRVING, TX (972) 556-1000

 $State\ the\ name,\ physical\ address,\ and\ telephone\ number\ of\ the\ person\ who\ possesses\ the\ books\ and\ records\ of\ the\ organization$

Form 990	(2012	•
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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 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 organization compensated any current officer, director, or trustee

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title Average hours per week (list any hours			ore than one box, unless compensation con erson is both an officer from the organization (W-organ							(E) Reportable compensation from related organizations (W	/-	(F) Estima amount o compens from t	ited f other sation :he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)) o	rganizati relate organiza	ed
												+		
												+		
												-		
												+		
												_		
												_		
1b	Sub-Total			•				 -						
C	Total from continuation sheet	s to Part VII, S	ection A	٠.	•	•		•						
d								`		1,040,201		0		329,861
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	ed more th	an			
													Yes	No
3	Did the organization list any fo	ormer officer, dir	ector or	r trus	tee,	key	emplo	yee,	, or highes	t compen	sated employee		163	140
	on line 1a? If "Yes," complete S	chedule J for suc	ch indivi	dual	٠	•		•				3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1	a receive or acc	rue cor	npen	satı	on fr	om an	/ unr	related ord	janization	or individual for	_	1 62	
	services rendered to the organ	ization? <i>If</i> "Yes,	," compl	ete S	chea	lule J	for su	ch pe	erson .			5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax vear	
		(A)	-		1			, -	s.ramg		(B)	1	(C)
PATHF	N INDERS ADV MARKETING GROUP , 3	ame and business a 8830 EDISON LAKES		Y MIS	HAW.	AKA I	N 46545	<u> </u>		ADVERT /M	cription of services ARKETING		Comper	102,255
BRAND	DBRIDGE LTD , 115 SCENIC ROAD SP	RINGFIELD PA 1906	54							PRODUCTION	ON SERVICES	\Box		104,568

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 -2

Form 99			_					Page 9
Part V	7111	Statement o Check if Schedu	f Revenue ule O contains a respor	nse to any question i	n this Part VIII			্ব
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 £	1a	Federated camp	paigns 1a					
ant	ь	Membership du	es 1b	296,204				
يَقِ ق	c	Fundraising eve	ents 1c	1,149,611				
ifts,	d	Related organiz	ations 1d					
<u>.</u> 	e	Government grants	s (contributions) 1e					
Sir	f			884,980				
uti Të	'	similar amounts no	ons, gifts, grants, and 1f ot included above					
중	g	Noncash contribution 1a-1f \$	ons included in lines					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f		2,330,795			
				Business Code				
emuk	2a	HALL OF FAME ADM	1IS	900099	179,025	179,025		
24 34	ь	HALL FAME FUNDIN	NG	900099	489,152	489,152		
a.	c	SPONSORSHIP		900099	650,000	650,000		
Program Service Revenue	d					·		
S)	е							
Gra.	f	All other progra	ım service revenue					
څ	g	Total Add lines	s 2a – 2f	L .	1,318,177			
	3		ome (including dividen					
		and other simila	aramounts)	▶ [181,141			181,141
	4		tment of tax-exempt bond	` ` <u>` </u>	0			
	5	Royalties	() D == 1		0			
	6a	Gross rents	(ı) Real	(II) Personal				
	Ь	Less rental						
	_c	expenses Rental income	0	0				
		or (loss)			0			
	d	Net rental incor	me or (loss) (i) Securities	 	9			
	7a	Gross amount	(1) Securities					
		from sales of assets other		99,701				
	ь	than inventory Less cost or						
		other basis and sales expenses						
	С	Gain or (loss)		99,701				
	d	Net gain or (los	s)		99,701			
άs	8a	Gross income for events (not incline)	=					
Ě		\$1,149						
eve •		of contributions See Part IV, lin	reported on line 1c)					
Ϋ́.		See Fare IV, IIII	a	328,000				
Other Revenue	ь	Less direct ex	penses b	1,015,098				
δ	c	Net income or ((loss) from fundraising	events 🛌	-687,098			
	9a	Gross income fi See Part IV, lin	rom gaming activities					
		See Part IV, IIII	a a					
	ь	Less direct ex	penses b					
	c		(loss) from gaming acti	vities	0			
	10a	Gross sales of						
		returns and allo	owances . a					
	ь	Less cost of a	oods sold b					
	l		(loss) from sales of inve	entory	0			
		Miscellaneous	s Revenue	Business Code				Ţ <u></u>
	11a	MISCELLANEC	ous	900099	105,635	105,635		
	b							
	С							
	d	All other revenu						
	e	Total. Add lines	s 11a-11d		105,635			
	12	Total revenue.	See Instructions .	<u>· · </u> · ▶	3,348,351	1,423,812		181,141

Form !	990 (2012)				Page 10
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			olete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX I			
	ot include amounts reported on lines 6b, o, 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	145,000	145,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	237,950	237,950		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	413,152	413,152		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,460,009	989,804	305,633	164,572
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	169,213	129,119	26,062	14,032
9	Other employee benefits	314,764	240,182	48,479	26,103
10	Payroll taxes	124,797	95,227	19,221	10,349
11	Fees for services (non-employees)	· · ·	, , , , , , , , , , , , , , , , , , ,	<u> </u>	<u> </u>
а	Management	0			
b	Legal	64,011	36,672	27,339	
c	Accounting	42,906	24,581	18,325	
d	Lobbying	0	24,301	10,323	
	Professional fundraising services See Part IV, line 17	72,000			72,000
e •	-	72,000			72,000
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	78,796	45,143	33,653	
12	Advertising and promotion	2,255	1,804	293	158
13	Office expenses	28,940	23,155	3,760	2,025
14	Information technology	0	,		<u> </u>
15	Royalties	0			
16	Occupancy	97,297	65,189	20,870	11,238
17	Travel	212,180	143,880	<u> </u>	23,905
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	1.0,000	1.,050	20,500
19	Conferences, conventions, and meetings	33,387	33,387		
20	Interest	0	-,		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	13,145		13,145	
23	Insurance	71,460	61,078	6,748	3,634
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	71,100	31,070	3,710	3,031
а	PUBLIC RELATIONS	206,518	181,082	16,533	8,903
b	UTILITIES	106,787	103,542	3,245	
c	EQUIPMENT AND BUILDING REPAIR	78,204	69,721	5,514	2,969
d	HALL OF FAME EXPENSES	74,337	74,337		
e	All other expenses	202,864	152,958	41,092	8,814
25	Total functional expenses. Add lines 1 through 24e	4,249,972	3,266,963	634,307	348,702
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			· · · ·
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	5,946	1	4,946
	2	Savings and temporary cash investments	952,489	2	322,356
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	352,161	4	179,870
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
×	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	3	0
9			0		0
Assets	7	Notes and loans receivable, net	0	7	0
-	8	Inventories for sale or use	75,676		23,595
	9	Prepaid expenses and deferred charges	20,195	9	6,597
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 727,883	_		
	Ь	Less accumulated depreciation 10b 110,335	· · · · · · · · · · · · · · · · · · ·		617,548
	11	Investments—publicly traded securities	6,813,328	11	7,711,925
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	6,896,251	15	5,198,182
	16	Total assets. Add lines 1 through 15 (must equal line 34)	15,745,264	16	14,065,019
	17	Accounts payable and accrued expenses	886,376	17	806,533
	18	Grants payable	1,313,761	18	1,341,759
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
ø	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Эę		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	400,000
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	6,744,915	25	5,040,184
	26	Total liabilities. Add lines 17 through 25	8,945,052	26	7,588,476
s O		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
ğ	27	Unrestricted net assets	4,470,465	27	3,283,093
<u> </u>	28	Temporarily restricted net assets	-1,343,681	28	-1,447,300
<u> </u>	29	Permanently restricted net assets	3,673,428	29	4,640,750
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	6,800,212	33	6,476,543
Net	34	Total liabilities and net assets/fund balances	15,745,264	34	14,065,019
		rotal habilities and net assets/fulla balances	13,743,204	34	14,000,019

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		•		<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)				
_	Total revenue (must equal Part VIII, column (A), me 12)	1		3,3	848,351
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,2	249,972
3	Revenue less expenses Subtract line 2 from line 1	3		_ 0	01,621
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	4		6,8	300,212
3	Net unrealized gains (losses) on investments	5		6	18,755
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-40,803
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			76,543
Par	t XII Financial Statements and Reporting				,
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
3 a	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?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

JAMES E DELANY DIRECTOR Software ID: Software Version:

EIN: 22-1508812

Name: THE NATIONAL FOOTBALL FOUNDATION

& COLLEGE HALL OF FAME INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (E) (B) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours more than one box, compensation compensation of other per unless person is both from the from related compensation week an officer and a organızatıon (Worganizations (Wfrom the (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and any related Former Office Highest compensated employee Individual trustee or director hours organizations Institutional for employee related organızatıons below Trustee dotted line) EDWARD F MCGINLEY III DIRECTOR WILLIAM V CAMPBELL Х DIRECTOR EUGENE F CORRIGAN Х DIRECTOR JACK LENGYEL Х DIRECTOR ARCHIE MANNING Х Χ CHAIRMAN BOB BOWLSBY Χ DIRECTOR ARCHIE GRIFFIN Χ DIRECTOR GEORGE M WEISS VICE CHAIRMAN Х Х CLAYTON I BENNETT Х Χ VICE CHAIRMAN TROY AIKMAN Х DIRECTOR **GRANT TEAFF** Х DIRECTOR WILLIAM R BATTLE III Χ JEFFREY R IMMELT Х **DIRECTOR** Х DIRECTOR Χ DIRECTOR JOSEPH R CASTIGLIONE Х DIRECTOR RAY E ANDERSON Х DIRECTOR GENE DEFILIPPO Х CHRISTINE A PLONSKY Х DIRECTOR J MURRY BOWDEN VICE CHAIRMAN Χ Х DAVID M DAVIS Χ DIRECTOR BILL MARTIN Х DIRECTOR CHARLES M NEINAS Χ DIRECTOR 40 0 STEVEN HATCHELL Х Х 413,152 0 95,080 PRESIDENT & CEO

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours more than one box, compensation compensation of other unless person is both from the from related per compensation organization (Worganizations (Wan officer and a week from the (list director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual trustee or director Institutional hours organizations for employee related organizations below Trustee dotted line) JERRY JONES Χ DIRECTOR ROBERT K KRAFT Х **DIRECTOR** RICHARD W JACKSON Х DIRECTOR KEVIN PLANK Χ DIRECTOR MICHAEL L SLIVE Χ DIRECTOR ROGER WILLIAMS Х DIRECTOR DEBORAH A YOW Х DIRECTOR SCOTT A BLACKMUN Χ DIRECTOR TIMOTHY D COOK Χ DIRECTOR RONNIE LOTT Х DIRECTOR JOHN J MACK Χ DIRECTOR GEORGE F PYNE Х DIRECTOR ROBERT EPLING Х DIRECTOR WILLIAM T O'BRIAN JR Χ DIRECTOR JIM NANTZ Χ DIRECTOR T BOONE PICKENS Х DIRECTOR JAMES A HASLAM Χ DIRECTOR DONNA SHALALA Χ **DIRECTOR** ROGER T STAUBACH Χ DIRECTOR LYNN SWANN Х DIRECTOR 40 0 SUE TUGGLE Х 146,523 50,867 DIRECTOR OF FINANCE/TREASURER 40 0 MATTHEW SIGN Х 173,331 55,157 COO/SECRETARY 40 0 PHILIP MARWILL Х 124,920 41,196 DIRECTOR OF COMMUNICATIONS 40 0 96,742 61,761 Х DIRECTOR OF EXTERNAL RELATIONS 40 0 CHARLES GOMES 85,533 25,800 COO FOR PLAY IT SMART PROGRAM

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As Filed Data -

DLN: 93493226036803

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Complete if the organization is a section 501(c)(3) organization or a section Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

Open to Public Inspection

Name of the organization THE NATIONAL FOOTBALL FOUNDATION & COLLEGE HALL OF FAME INC

Employer identification number

22-1508812

Total										
									+	
			,	Yes	No	Yes	No	Yes	No	
			or IRC section (see instructions))	docume	1		I		T	_
•	ported nization		organization (described on lines 1- 9 above	organızatı col (i) lıs your gove	ted ın	the organi in col (i) o suppor	fyour	organiza col (i) or in the l	ganızed	monetary support
	lame of	(ii) EIN	(iii) Type of	(iv) Is		(v) Did you		(vi) Is		(vii) A mount of
h	Prov	ıde the followı	ng information about	the support	ed organızat	ıon(s)				<u> </u>
	(iii)	A 35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g(``
			er of a person descr	• •	-				11g	
			governing body of th					. (, 11g	
		wing persons? person who d	rectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	scribed in (ii	1)	Yes No
g	Sinc		2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the		I
f	sect If th	ion 509(a)(2) e organization	received a written de							
еГ			ox, I certify that the ion managers and ot							
11	one	or more public oo <u>x t</u> hat descr	ganized and operated ly supported organiz ibes the type of supp b Type II c	ations descr or <u>ti</u> ng organ	ibed in secti ization and d	ion 509(a)(1 complete line) or section s 11e th <u>ro</u> l	509(a)(2) \$ ugh 11h	See section 5	09(a)(3). Check
10	_	_	ganized and operated							.h
		,	ganızatıon after June	•			•	•		
			oss investment inco				•		. tax) from bu	isinesses
	rece	ipts from activ	rities related to its ex	xempt functi	ons—subjec	t to certaın e	xceptions,	and (2) no m	ore than 331,	/3% of
9 🗸	An o	rganization th	at normally receives	(1) more th	an 331/3% o	of its support	from contro	butions, mer	nbershıp fees	, and gross
8 T	_		: described in section			nplete Part II	.)			
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)								
6 [_	• •	local government or	=						
_	_		(A)(iv). (Complete P	*						
5 F			erated for the benefi		or universi	ty owned or o	perated by	a governmer	ntal unit desc	ribed in
. ,	hosp	ıtal's name, c	ity, and state			·				
4 F	_	•	h organization operat	-					(1)(A)(iii). F	nter the
3 F	_		perative hospital se			•	n 170(b)(1)(Δ)(iii).		
2 F	_	•	d in section 170(b)(1				ection 170(D)(1)(A)(I).		
1 Γ	_	•	ion of churches, or a	•			•	•		
The orga			te foundation becaus						instructions	•

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20	12	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,261,354	2,324,480	4,983,783	2,850,629	2,	330,795	15,751,041
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	1,536,838	1,142,919	1,551,770	1,313,314	1,	318,177	6,863,018
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0
6	Total. Add lines 1 through 5	4,798,192	3,467,399	6,535,553	4,163,943	3,	648,972	22,614,059
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	110,000	297,606	327,333	311,000		370,000	1,415,939
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		484,000					484,000
c	Add lines 7a and 7b	110,000	781,606	327,333	311,000		370,000	1,899,939
8	Public support (Subtract line 7c from line 6)							20,714,120
	ction B. Total Support ndar year (or fiscal year beginning							
Care	in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20	12	(f) Total
	In) =		(=) = = =		` ,			
9	A mounts from line 6	4,798,192	3,467,399	6,535,553	4,163,943		648,972	22,614,059
9 10a	· · · · · · · · · · · · · · · · · · ·	4,798,192 557,142		6,535,553 196,771		3,		22,614,059 1,414,079
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after		3,467,399		4,163,943	3,	648,972	· · ·
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)		3,467,399		4,163,943	3,	648,972	1,414,079
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	557,142	3,467,399 246,904	196,771	4,163,943 232,121	3,	181,141	1,414,079
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	557,142	3,467,399 246,904	196,771	4,163,943 232,121	3,	181,141	1,414,079
t b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)	557,142 557,142 1,351,165 6,706,499	3,467,399 246,904 246,904 336,974 4,051,277	196,771 196,771 148,808 6,881,132	4,163,943 232,121 232,121 153,716 4,549,780	3,	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436
to a b c c 111 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	557,142 557,142 1,351,165 6,706,499 for the organization	3,467,399 246,904 246,904 336,974 4,051,277 on's first, second,	196,771 196,771 148,808 6,881,132	4,163,943 232,121 232,121 153,716 4,549,780	3,	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436
b c 111 12 13 14 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	557,142 557,142 1,351,165 6,706,499 for the organization	3,467,399 246,904 246,904 336,974 4,051,277 on's first, second,	196,771 196,771 148,808 6,881,132 , third, fourth, or f	4,163,943 232,121 232,121 153,716 4,549,780	3, 501(c)(3	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436 Ization,
toa b c c 111 12 13 14 See 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Puble	557,142 557,142 1,351,165 6,706,499 for the organization ic Support Performance (line 8, column (3,467,399 246,904 246,904 336,974 4,051,277 on's first, second,	196,771 196,771 148,808 6,881,132 , third, fourth, or f	4,163,943 232,121 232,121 153,716 4,549,780	3, 501(c)(3	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436 Ization, 79 290 %
toa b c c 111 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage from 201	1,351,165 6,706,499 for the organization ic Support Per (line 8, column (1) 1 Schedule A, Pa	3,467,399 246,904 246,904 336,974 4,051,277 on's first, second, ercentage f) divided by line art III, line 15	196,771 196,771 148,808 6,881,132 third, fourth, or f	4,163,943 232,121 232,121 153,716 4,549,780	3, 501(c)(3	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436 Ization,
toa b c c 111 12 13 14 See 15 16 See See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage from 201	1,351,165 6,706,499 for the organization ic Support Performance (line 8, column (1) Schedule A, Parestment Inco	3,467,399 246,904 246,904 336,974 4,051,277 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	196,771 196,771 148,808 6,881,132 third, fourth, or f	4,163,943 232,121 232,121 153,716 4,549,780 ifth tax year as a	3, 501(c)(3	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436 Ization, 79 290 % 75 888 %
10a b c 111 12 13 14 See 15 16 See 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage for 2012 Public support percentage from 201 Investment income percentage for 2012	1,351,165 6,706,499 for the organization ic Support Per (line 8, column (1) 1 Schedule A, Par estment Incomposition (1) 2012 (line 10 c, column (2)	3,467,399 246,904 246,904 336,974 4,051,277 on's first, second, ercentage f) divided by line art III, line 15 me Percentage plumn (f) divided by	196,771 196,771 196,771 148,808 6,881,132 third, fourth, or f 13, column (f)) ge by line 13, column	4,163,943 232,121 232,121 153,716 4,549,780 ifth tax year as a	3, 501(c)(3 15 16	181,141 181,141 105,635 935,748	1,414,079 0 1,414,079 0 2,096,298 26,124,436 Ization, 79 290 % 75 888 % 5 413 %
10a b c 111 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage from 201	1,351,165 6,706,499 for the organization ic Support Per (line 8, column (1) 1 Schedule A, Parestment Incomposition (2012) 2011 Schedule A	3,467,399 246,904 246,904 336,974 4,051,277 on's first, second, ercentage f) divided by line art III, line 15 me Percentage olumn (f) divided by A, Part III, line 1	196,771 196,771 148,808 6,881,132 third, fourth, or f 13, column (f)) 19e by line 13, column 7	4,163,943 232,121 232,121 153,716 4,549,780 ifth tax year as a	3, 501(c)(3 15 16 17 18	181,141 181,141 105,635 935,748 3) organ	1,414,079 0 1,414,079 0 2,096,298 26,124,436 ization, 79 290 % 75 888 % 5 413 % 7 186 %

33 1/3% support tests—2011. 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 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493226036803

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Internal Revenue Service	
Name of the organiz THE NATIONAL FOOTBALL	

Employer identification number

HE NATIONAL FOOTBALL FOUNDATION & COLLEGE HALL OF FAME INC		22-	1508812		
Part I Organizations Maintaining Donor Ad		Funds	or Accounts	. Complet	e if the
organization answered "Yes" to Form 99	(a) Donor advised funds		(b) Funds and o	thoraccou	ntc
Total number at end of year	(a) Donor advised funds		(b) Fullus allu (other accou	111.5
Aggregate contributions to (during year)					
,					
Aggregate grants from (during year)		_			
Aggregate value at end of year					
Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	-	onor adv	ısed	☐ Yes	┌ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beneated				┌ Yes	┌ No
conferring impermissible private benefit? art II Conservation Easements. Complete	f the organization answered "Ves"	to Forr	n 000 Dart IV		1 110
•		to Fori	ii 990, Pait IV	, iiile 7.	
Purpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreation Protection of natural habitat					
Preservation of open space	, , , , , , , , , , , , , , , , , , , ,				
Complete lines 2a through 2d if the organization held easement on the last day of the tax year	a qualified conservation contribution ii	n the forr	n of a conserva	ion	
customent on the last auty of the tax your			Held at the	End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easements		2b			
Number of conservation easements on a certified his	coric structure included in (a)	2c			
Number of conservation easements included in (c) achistoric structure listed in the National Register	quired after 8/17/06, and not on a	2d			
Number of conservation easements modified, transfe	rred, released, extinguished, or termina	ted by th	ne organization	durina	
the tax year 🛌	, , ,	•	J	J	
· — ———					
Number of states where property subject to conserva					
Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ndling of	f violations, and	☐ Yes	┌ No
Staff and volunteer hours devoted to monitoring, insp	ecting, and enforcing conservation eas	ements (during the year		
A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easemer	nts durın	g the year		
▶ \$	3,		,		
Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of s	ection 1	70(h)(4)(B)(ı)	┌ Yes	┌ No
In Part XIII, describe how the organization reports cobalance sheet, and include, if applicable, the text of t	ne footnote to the organization's financi			and	
the organization's accounting for conservation easem					
Complete if the organization answered "	Yes" to Form 990, Part IV, line 8.				
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education	n, or rese	earch in furthera		
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide the following amounts relating to the	ets held for public exhibition, education				ıc
(i) Revenues included in Form 990, Part VIII, line 1			► \$		0
(ii) Assets included in Form 990, Part X			► \$	60	000,00
If the organization received or held works of art, histofollowing amounts required to be reported under SFAS			icial gain, provid	de the	
Revenues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art,	Hist	<u>tori</u>	<u>cal Tı</u>	easu	res, or C	<u> the</u>	<u>r Similar A</u>	ssets	(cont	tinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, ch	eck	any of	the follo	wing that	are a	sıgnıfıcant us	e of its		
а	Public exhibition		d	Γ	Loan	or exch	ange prog	rams				
b	Scholarly research		e	Γ	Othe	•						
c	▼ Preservation for future generations											
4	Provide a description of the organization's c Part XIII	ollections and explai	n how	the	y furthe	er the o	rganızatıoı	ı's ex	cempt purpose	ın		
5	During the year, did the organization solicit								nılar	_	_	_
Do	assets to be sold to raise funds rather than t IV								'ac" ta Farm	Γ Yes	s \	No_
Pal	Part IV, line 9, or reported an ar						answere	u r	es to rottil	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other as:	ets	not	┌ Yes	sГ	- No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follow	ıng t	able		-					
							-		Α	mount		
C	Beginning balance							1c				
d	Additions during the year						-	1d				
e	Distributions during the year						}	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?							☐ Yes	s [No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natio	n has	been pr	ovided in I	art)	XIII			<u> </u>
Pa	rt V Endowment Funds. Complete											
1a	Beginning of year balance	(a)Current year 3,673,428	(b)P	rior y	ear 906,896	b (c)IW	3,367,60		Three years back 2,708,668			rs back 831,171
ь	Contributions	566,580			1,250		278,58		29,030			10,000
c	Net investment earnings, gains, and losses											
		516,515		- ;	234,718		269,70	+	635,907		-2,	120,299
d	Grants or scholarships	115,773			0		9,000	<u>'</u>	6,000			
е	Other expenditures for facilities and programs										2,	012,204
f	Administrative expenses											
g	End of year balance	4,640,750		3,0	573,428		3,906,890	5	3,367,605		2,	708,668
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	e 1g,	, colum	n (a)) h	ield as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ► 100 000 %											
c	Temporarily restricted endowment ►											
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	tion t	hat a	are hel	d and a	dmınıstere	d for	the	□	es	No No
	(i) unrelated organizations								3a	(i) '	-	No
	(ii) related organizations									(ii)		No
b	If "Yes" to 3a(II), are the related organization								3	b		
4	Describe in Part XIII the intended uses of t											
Pai	t VI Land, Buildings, and Equipme	ent. See Form 990	0, Pa	_	, line :		(b)Cost or	othor	(c) Accumulate	.d [(d	1 Pool	k value
	Description of property				sis (inve		basis (oth		depreciation) BOOI	k value
12	Land			 								
	Land											
	Leasehold improvements		•							\dashv		
	Equipment						12	7,883	110,	335		17,548
	Other		•					0,000			(600,000
	I. Add lines 1a through 1e (Column (d) must e		, colui	mn (i	B), line	10(c).)		•				617,548
		·		<u> </u>	· · · · · · · · · · · · · · · · · · ·				Schedule	D (For		

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	<u>)</u>	
(a) Description of security or category	(b)Book value	(c) Method	of valuation
(including name of security)			ear market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total (Column (h) must aqual Form 000, Part V, col. (P) line 12.)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	<u>e Form 990, Part X, line 1</u>	13.	
(a) Description of investment type	(b) Book value	(c) Method	of valuation
			ear market value
	1		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, II			
(a) Descri	ption		(b) Book value
(1) DUE FROM OTHER FUNDS			5,040,184
(2) LIFE INSURANCE - CSV			157,998
Total. (Column (b) must equal Form 990, Part X. col.(B) line 15	5.)		5,198.182
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15			5,198,182
Part X Other Liabilities. See Form 990, Part X	X, line 25.		5,198,182
			5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X	X, line 25.		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
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Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes DUE TO OTHER FUNDS	X, line 25. (b) Book value 0 5,040,184		5,198,182
Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	X, line 25. (b) Book value 0 5,040,184		

1	rotal revenue, gains, and other support per audited financial statements	т_	4,/10,9/4
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)............ 2d		
e	Add lines 2a through 2d	2e	618,755
3	Subtract line 2e from line 1	3	4,092,219
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	-743,868
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	3,348,351
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	5,034,643
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)............. <mark>2d</mark> 784,671		
e	Add lines 2a through 2d	2e	784,671
3	Subtract line 2e from line 1	3	4,249,972
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)................4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	4,249,972
Part	XIII Supplemental Information		

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

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional ınformatıon

Identifier	Return Reference	Explanation
COLLECTION OF MEMORABILIA	SCHEDULE D- PART III- QUESTION 1A, 4	THE FOUNDATION HAS A SUBSTANTIAL COLLECTION OF COLLEGE FOOTBALL MEMORABILIA THE MEMORABILIA HAS BEEN ACCCUMULATED OVER MANY YEARS MAINLY BY DONATION AND IS UNIQUE TO THE SPORT OF COLLEGE FOOTBALL IN CONFORMITY WITH THE PRACTICE FOLLOWED BY MANY HALLS OF FAME/MUSEUMS, THE COST OF MEMORABILIA IS NOT INCLUDED ON THE BALANCE SHEET
ENDOWMENT FUND	SHEDULE D- PART V- QUESTION 4	THE ENDOWMENT FUND IS COMPRISED OF TWO TYPES OF CONTRIBUTIONS (1) WHEREBY THE INCOME FROM SUCH CONTRIBUTIONS IS TO BE USED SPECIFICALLY FOR SCHOLARSHIPS, AND, (2) WHEREBY THE INCOME IS NOT RESTRICTED THE BOARD OF DIRECTORS HAS DESIGNATED THAT THE INCOME FROM DONORS' CONTRIBUTIONS, WHICH IS NOT RESTRICTED, BE ACCUMULATED IN THE UNRESTRICTED FUND AS A BOARD DESIGNATED ENDOWMENT FUND
RECONCILIATION OF REVENUE	SCHEDULE D- PART XI, LINE 2D	RECONCILIATION - \$743,868 - FUND RAISING DINNER EXPENSE GROSS PROCEEDS FROM THE FINANCIAL STATEMENTS WAS \$1,123,679 WE TOOK THE EXPENSE FROM THE DINNER OF \$743,868 TO COME TO NET PROCEEDS OF \$379,811 THAT WE USED PER THE TAX RETURN
RECONCILIATION OF EXPENSES	SCHEDULE D- PART XII, LINE 2D	RECONCILIATION - \$743,868 - FUND RAISING DINNER EXPENSE 42,278 - SPECIAL EVENTS EXPENSE (1,475)-BOOK TO TAX DEPRECIATION DIFFERENCE

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DLN: 93493226036803

OMB No 1545-0047

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

Attach to Form 990 or Form 990-EZ.

Name of the organization THE NATIONAL FOOTBALL FOUNDATION

Employer identification number

COLLEG	E HALL OF FAME IN	С				22-1508812	
Part I	Fundraising Act	t ivities. Complete	ıf the or	ganızatı	on answered "Yes" to	o Form 990, Part IV,	line 17.
a F N b F I c F F d F I 2a Didt orke b If "Ye"	Mail solicitations Internet and email soli Internet solicitations In-person solicitations The organization have a The employees listed in	icitations s a written or oral agree Form 990, Part VII) st paid individuals or e	ment with or entity entities (f	e f g n any indi in connec	Following activities Chellowing activities Chellowing Solicitation of non-Solicitation of gove Special fundraising vidual (including officerstion with professional furs) pursuant to agreeme	egovernment grants ernment grants g events s, directors, trustees undraising services?	▽ Yes ► N draiser is
	ne and address of Individual tity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
FISH	BAIT MARKETING	ADVICE	Yes	No			
LLC	DATI HARRETING	CONSULTING ADVICE		No	300,000	30,000	270,000
NO R/	A STERRIN GOOCH	CONSULTING		No	133,600	42,000	91,600
otal 3 List a		organization is regist	ered or li	▶ censed to	433,600 solicit funds or has bee	72,000 en notified it is exempt t	361,600 From registration or

	dule	G (Form 990 or 990-EZ) 2012 Fundraising Events. Commore than \$15,000 of fundr				
		events with gross receipts of	(a) Event #1 DINNER (event type)	(b) Event #2 HOF ENSHRINMENT (event type)	(c) Other events 2 (total number)	(d) Total events (add col (a) through col (c))
<u>Ф</u>	,		1,123,679		·	1,477,611
Revenue	1 2	Gross receipts				
Ð.	3	Less Contributions Gross income (line 1	795,679	107,843	246,089	1,149,611
		minus line 2)	328,000)		328,000
	4	Cash prizes				
မွာ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .	743,868	228,952	42,278	1,015,098
	10	Direct expense summary Add lir	nes 4 through 9 in column	n (d)		(1,015,098)
	11	Net income summary Combine I				-687,098
Par	t II			"Yes" to Form 990, Pa	art IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rey	1	Gross revenue				(-7/
<u></u>	,	Cash prizes				
penses		·				
Ä	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	┌ Yes	
	7	Direct expense summary Add line	s 2 through 5 in column ((d)		
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)	🛌	
9 a b	Ist	er the state(s) in which the organiz the organization licensed to operate No," explain	e gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?	

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Schedule I

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

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

OMB No 1545-0047

DLN: 93493226036803

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization	Employer identif	Employer identification number					
THE NATIONAL FOOTBALL FO & COLLEGE HALL OF FAME IN						22-1508812	
Part I General Inform		ts and Assistance					
	to award the gran ganization's proce ler Assistance	ts or assistance?		United States the United State	s. Complete if the org	ganization answered	∀Yes □
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ATLANTA PUBLIC SCHOOLS			135,000				FOOTBALL PROGRAM AID
2 Enter total number of sect 3 Enter total number of other							1

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. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) GRADUATE SCHOLARSHIPS	46	205,000			
(2) CHAPTER SCHOLARSHIPS		9,250			

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation				
		GRANTS ARE USED TO PAY FOR COACHES SALARIES THE NATIONAL FOOTBALL FOUNDAYION, INC REQUIRES SCHOOLS TO PROVIDE A CONFIRMATION THAT COACHES HAVE BEEN PAID BEFORE THEY RELEASE ANY OF THESE FUNDS				
SCHOLARSHIP FUND		SCHOLARSHIP FUNDS ARE PROVIDED TO THE BEST AND BRIGHTEST STUDENT ATHLETES FROM THE COLLEGE GRIDIRON				

Discretionary spending account

Form 990 of other organizations

DLN: 93493226036803

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

1b

2

4a

4b

4c

5a

5b

6b

7

8

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Yes

THE NATIONAL FOOTBALL FOUNDATION & COLLEGE HALL OF FAME INC

Internal Revenue Service Name of the organization **Employer identification number** 22-1508812 Part I Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax idemnification and gross-up payments 굣 Health or social club dues or initiation fees

Personal services (e.g., maid, chauffeur, chef)

Approval by the board or compensation committee

If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, 2 directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study

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 Receive a severance payment or change-of-control payment?

Participate in, or receive payment from, an equity-based compensation arrangement? 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.

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

Participate in, or receive payment from, a supplemental nonqualified retirement plan?

The organization? Any related organization? If "Yes," to line 5a or 5b, describe in Part III

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

The organization?

Any related organization? If "Yes," to line 6a or 6b, describe in Part III

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III

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 Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)? For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50053T

Schedule J (Form 990) 2012

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
(1)STEVEN HATCHELL PRESIDENT & CEO	(i) (ii)	384,500 0	25,000 0	3,652 0	55,500 0	39,580 0	508,232 0	54,500 0
(2)SUE TUGGLE DIRECTOR OF FINANCE/TREASURER	(i) (ii)	143,532	2,000	991	39,103	11,764	197,390	38,117
(3)MATTHEW SIGN COO/SECRETARY	(i) (ii)	170,880	2,000	451	19,728	35,429	228,488	18,888
(4)PHILIP MARWILL DIRECTOR OF COMMUNICATIONS	(i) (ii)	122,688	2,000	232	12,269	28,927	166,116	11,914
(5)WILL RUDD DIRECTOR OF EXTERNAL RELATIONS	(i) (ii)	94,408	2,000	334	34,028	27,733	158,503	24,347

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

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990 - PART XI - LINE 9

As Filed Data -

DLN: 93493226036803

Employer identification number

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization
THE NATIONAL FOOTBALL FOUNDATION

RECONCILIATION OF

NET ASSETS

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.

2012

Open to Public Inspection

& COLLEGE HALL OF FAME INC 22-1508812 Identifier Return Reference **Explanation DISCLOSURE** 990 - PART VI- SECTION THE NATIONAL FOOTBALL FOUNDATION & COLLEGE HALL OF FAME, INC. MAKES ITS C - DISCLOSURE-GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. QUESTION 19 UPON REQUEST BUSINESS 990 - PART VI - SECTION BOARD OF DIRECTORS MAY HAVE VARIOUS BUSINESS RELATIONSHIPS WITH OTHER RFI ATIONSHIP BOARD MEMBERS THAT NFF IS NOT PARTY TO NOR DO THEY HAVE ANY FURTHER A - GOVERNING BODY & BETWEEN MEMBERS KNOWLEDGE. THE BUSINESS RELATIONSHIPS ARE NOT RELATED TO NFF AND ARE MANAGEMENT -QUESTION 2 CONFIDENTIAL BETWEEN THE PARTIES INVOLVED IN THE BUSINESSES REVIEW OF FORM 990 - PART VI - SECTION THE ORGANIZATION IS PROVIDED WITH A FINAL DRAFT COPY OF THE FORM 990 PRIOR 990 B - POLICIES - QUESTION TO FILING THE AUDIT COMMITTEE REVIEWS THE RETURN FOR ACCURACY. THE FORM 11b 990 IS THEN PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL COMPENSATION 990 - PART VI - SECTION THE ORGANIZATION HAS A COMPENSATION COMMITTEE IN PLACE TO DETERMINE **B - POLICIES - QUESTION** COMPENSATION FOR THE ORGANIZATION'S CEO ALL OTHER COMPENSATION, FOR 15 OPERATIONAL PERSONNEL, IS DETERMINED BY THE CEO 990 - PART VI -**ORGANIZATION** THE ORGANIZATION WAS ESTABLISHED AS A NOT-FOR-PROFIT CORPORATION WITH **MEMBERS** GOVERNING BODY AND "MEMBERS" BEING THE LEGAL MEMBERS OF THE CORPORATION THE BOARD OF MANAGEMENT -DIRECTORS ARE ELECTED AT THE ANNUAL MEETING OF THE MEMBERS MEMBERS ARE QUESTION 7 ALSO ENTITLED TO VOTE AT THE MEMBER'S MEETINGS AND CAN CONDUCT BUSINESS AS IT MAY PROPERLY COME BEFORE THEIR MEETING FROM THE BOARD OF DIRECTORS

OTHER CHANGES IN NET ASSETS OR FUND BALANCES SPECIAL EVENTS EXPENSES

\$(42,278) BOOK TO TAX DEPRECIATION 1,475 ------ \$(40,803)

DLN: 93493226036803

OMB No 1545-0172

Department of the Treasury

Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions. ► Attach to your tax return.

Attachment Sequence No 179 **Identifying number**

Name(s) shown on return THE NATIONAL FOOTBALL FOUNDATION & COLLEGE HALL OF FAME INC	Business or activity to which this form relates GENERAL DEPRECIATION

	NATIONAL FOOTBA LLEGE HALL OF FAN		O N					22-1508812
Par	t I Election	To Expense (Certain Property Ur	der Section	179			22-1508812
			sted property, comple			nplete Part I.		
1	Maximum amount (s	ee instructions)					1	
2	Total cost of section	179 property p	laced in service (see inst	ructions) · ·			2	
3	Threshold cost of se	ction 179 prope	rty before reduction in lir	nitation (see ins	structions)		3	\$ 2,000,000
4	Reduction in limitation	on Subtract line	3 from line 2 If zero or l	ess, enter -0-			4	
5	Dollar limitation for t	tax year Subtrac	ct line 4 from line 1 If ze	ro or less, enter	-0- Ifmarrie	ed		
	filing separately, see	e instructions					5	
				1 42 2		1		1
6	(a)	Description of pi	roperty	(b) Cost (b)	usiness use ly)	(c) Elected	cost	
6								
	sted property Enter				. 7		T	
		-	operty Add amounts in c				8	
9	Tentative deduction	Enter the small	er of line 5 or line 8 · ·				9	
10	Carryover of disallov	wed deduction fro	om line 13 of your 2011 l	Form 4562 •			10	
11	Business income lim	nitation Enter th	e smaller of business inc	ome (not less th	nan zero) or lı	ne 5 (see		
	instructions) •						11	
	•		d lines 9 and 10, but do n		nan line 11		12	
	-		013 Add lines 9 and 10,		. 13			
			pelow for listed proper					
		-	Allowance and Othe	•	-		proper I	ty) (See instructions) I
		•	ualified property (other th	an iisted proper	ty) placed in	service during		
	the tax year (see ins	•					14	
	Property subject to s						15	
			<u> </u>				16	
<u> Part</u>	MACRS De	preciation (I	Do not include listed	oroperty.) (Se ection A	ee instructio	ns.)		
17	MACRS deductions f	for assets placed	d in service in tax years l		2012		17	13,145
			ts placed in service durii					13/11
	,	. ,	· · · · · · · · · · · · · · · · · · ·	,		_		
	Section B—Ass	ets Placed in	Service During 20	12 Tax Year	Using the		reci	ation System
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use	(d) Recovery period	(e) Convent			(g)Depreciation deduction
IO- ^	-year property		only—see instructions)					
	-year property -year property							
	-year property							
	0-year property							
	5-year property							
f 2	0-year property							
g 2	5-year property			25 yrs		S/L		
h R	esidential rental			27 5 yrs	MM	S/L		
р	roperty			27 5 yrs	ММ	S/L		
	onresidential real			39 yrs	MM	S/L		
р	roperty		1: 6 : 5 : 201	<u> </u>	MM	S/L		
202.0	lass life	on C—Assets Plac	ced in Service During 201	2 lax Year Using	g the Alterna		on Sys	tem
	2-year	1		12 yrs		S/L S/L		
	0-year			40 yrs	MM	5/L		
		r y (see instruc	tions)	1 - 7	1	1		
	sted property Enter						21	
22 To	otal. Add amounts fro	om line 12, lines	14 through 17, lines 19	and 20 in colum	nn (g), and lın	e 21 Enter		
			our return Partnerships				22	13,145
			service during the currer	· ·	e 🔲		•	
po	ortion of the basis att	tributable to sec	tion 263A costs .		. 23			
_					~ ~			- 4563 (2242)

Form 4562 (2012) Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? (c) (i) (e) (b) Business/ (d) (f) (g) (h) Elected Basis for depreciation Type of property (list Date placed in investment Cost or other Recover Method/ Depreciation/ (business/investment section 179 vehicles first) period deduction service basis Convention use use only) cost percentage 25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % 27 Property used 50% or less in a qualified business use S/L -S/L -S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (b) (c) (f) (a) (d) (e) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 1 Vehicle 4 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? . . 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Ouestions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners **39** Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization Code A mortizable A mortization for Description of costs amortization period or this year amount section begins percentage

42 A mortization of costs that begins during your 2012 tax year (see instructions)

44 Total. Add amounts in column (f) See the instructions for where to report

43 Amortization of costs that began before your 2012 tax year

43

44