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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2012
Open to Public

A F	+b	2012 calendar year, or tax year beginning JUL 1, 2012 and ending	JUN 30, 20	112	<u> </u>			
	or the							
	heck if pplicable	C Name of organization	D Employer ide	∍ntificati	ion number			
	Addres change Name	L S U PROPERTY FOUNDATION						
<u></u>	_lchange	Doing Business As	72	2-129	15979			
	∏initial retum ∏Termin ated	Number and street (or P 0 box if mail is not delivered to street address) Room/s 3838 WEST LAKESHORE DRIVE		E Telephone number 225-578-3811				
	Ameno	City, town, or post office, state, and ZIP code	G Gross receipts \$		1,645,	588.		
	Application	BATON ROUGE, EA 70000	H(a) Is this a gro	oup retur				
	pendin	F Name and address of principal officer:G • LEE GRIFFIN	for affiliates		Yes	_		
		3838 WEST LAKESHORE DRIVE, BATON ROUGE, LA	- ' '			No		
		mpt status: X 501(c)(3)			. (see instruction	ns)		
		e: ► WWW.LSUFOUNDATION.ORG	H(c) Group exer			. T A		
			Year of formation 199	O M St	tate of legal domi	Cile LA		
	ert I	Summary Briefly describe the organization's mission or most significant activities: FOSTER I	DITTATE EINI	NCTA	I. SUDDO	T T T		
ç		VIA GIFTS OF REAL ESTATE AND EQUIPMENT FOR <u>I</u>				<u> </u>		
& Governance		Check this box if the organization discontinued its operations or disposed of				-		
Ver		Number of voting members of the governing body (Part VI, line 1a)		(D)3		11		
යි		Number of independent voting members of the governing body (Part VI, line 1b)		₽ĭ		11		
ಶ		Fotal number of individuals employed in calendar year 2012 (Part V, line 2a)	EB 24 2014 \	5		0		
ij			0.050	6		11		
Activities		Fotal unrelated business revenue from Part VIII, column (C), line 12	OGDEN, UT	- 7a		0.		
ĕ		Net unrelated business taxable income from Form 990-T, line 34	A CONTRACTOR OF THE PARTY OF TH	7b		0.		
		tot difference beamess taxable meant from Form 500 F, and 54	Prior Year	''	Current Yea			
•	8	Contributions and grants (Part VIII, line 1h)	1,522,19	5.	1,645,			
Revenue	1	Program service revenue (Part VIII, line 2g)		0.		0.		
₹.	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	-	0.		
` E		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.		0.		
		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,522,19	5.	1,645,	588.		
	î .	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	387,39		1,163,			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.		0.		
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.		0.		
ſ ¥	1	Professional fundraising fees (Part IX, column (A), line 11e)		0.		0.		
Expenses	ь	Fotal fundraising expenses (Part IX, column (D), line 25) > 95,010.						
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	358,30)1.	268,	716.		
<u></u>	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	745,69	8.	1,431,	908.		
עני	19	Revenue less expenses. Subtract line 18 from line 12	776,49	7.	213,	680.		
Net Assets or Fund Balances			Beginning of Current	/ear	End of Yea	r		
aag aag	20	Total assets (Part X, line 16)	7,386,61		3,431,			
2 2 2 3	21	Total liabilities (Part X, line 26)	6,504,73		2,335,			
~~~~	~~~~	Net assets or fund balances. Subtract line 21 from line 20	881,88	<u> </u>	1,095,	<u>564.</u>		
	art II	Signature Block						
	•	ties of perjury, I declare that I have examined this return, including accompanying schedules and s		•	lowledge and bel	ief, it is		
true	, correc	t, and complete Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge	<del>/ )</del>				
		Signature of officer	Date	141	14			
Sig:			Date					
Her	e	GINA M. DUGAS, TREASURER  Type or print name and title	<del></del>					
			Dater / Ch		PTIN			
Paid	.	Print/Type preparer's name  RALPH STEPHENS  Preparer's Signature			P006381	1 Ω		
	parer	Firm's name POSTLETHWAITE & NETTERVILLE	· ; · • · · · · · · · · · · · · · · · ·		2-12024			
-	Only	Firm's address 8550 UNITED PLAZA BLVD, SUITE 1001	/ Firm's El	/	- 12V24			
<b></b> 0	Jy	BATON ROUGE, LA 70809	Phone no	. 122	25)922-4	600		
Mar	the IC	IS discuss this return with the preparer shown above? (see instructions)	; FIIOHE IIC	, , 22	X Yes	□ No		
	01 12-1				Form 990			
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Form 990 (2012) L S U PROPER
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		<u>X</u>
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		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
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		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
_	Schedule D, Part III	8		
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	9		Х
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		Х
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
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	Х	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		X	
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-		X
_	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
~	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
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		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			w
••	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(2012)

Page 4

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  23 X  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  Did the organization mest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 II is the organization provide a grant or other assistance to an 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 IV is a formation or a propriete Schedule L, Part III is a formation or provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule L, Part IV is a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV is a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV is a A family member of a current or				Yes	No.
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 21 if "Yes," complete Schedule I, Parts I and III 22 If "Yes," complete Schedule I, Parts I and III 22 If "Yes," complete Schedule I, Part II 33 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 II. If "Yes," complete Schedule II	21			v	
column (A), Ine 27 If "Yes," complete Schedule I, Parts I and III  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, frustess, key employees, and highest compensated employees? If "Yes," complete Schedule I, White Yes, "Line 18 and 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 I, "No", go to here 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24c  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d  Did the organization maintain an escrive account of the than a refunding escrive at any time during the year?  24d  Did the organization account of the organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I    25a  X  X  X  24d  Dis the organization avaire that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's strip year, expelled schedule I, Part II    25b  X  X  X  X  X  X  X  X  X  X  X  X  X	^^		21	^	
23 Did the organization answer "Yes" to Part VII, Section A, Inns 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 II by ear, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. If Yes," or to line 25  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  24d	22		22		X
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 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 J. 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 I. 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 I. Principal amount of more than \$100,000 as of the last day of the year and the principal amount of the organization mineral and a schedule of the organization mineral and a schedule of the organization mineral and a schedule of the organization amount of the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part I!  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule I. Part II II  Did the organization private 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 I. Part II II  Was the organization party to a business transaction with one of the following parties (see Schedule I., Part IV instructions for applicable filing threeholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I. Part IV instructions for applicable filing threeholds, conditions, and exceptions?  A current or former officer, director,	23				
Schedule // Del 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  Did the organization meintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization meintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year?  Did the organization and so the year? If "Yes," complete Schedule L, Part II as 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 as the organization provide a grant or other assistance to an officer, director, trustee, be employee, substantial contributor or employee thereof, agrant selection committee member, or to a 35% controlled entity or family member of a urine former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV as the organization provide a grant or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV as the organization receive more than \$25,000 in non-cash contributions? If "Yes," c					
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 iness 2th through 24d and complete Schedule K. If "No", go to lime 25  5 bid the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds?  24b Did the organization maintain an escrive account other than a refunding escrive at any time during the year?  24c Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year?  25c Section 501(6)(3) and 501(6)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25a Did the organization aware that the regaged 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-E27 If "Yes," complete Schedule L, Part II  25b Was a loan too r 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  25c Did the organization parvet are assestance 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 IV  27c Was the organization parvet to a business transaction with one of the following parties (see Schedule L, Part IV  28c Was the organization former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28c A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28c A family member of a current or former officer,			23	х	
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 b Did the organization meantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding as of the organization with a disqualified person during the year? If "Yes," complete Schedule L. Part II the transaction with a disqualified person outside person during the year? If "Yes," complete Schedule L. Part II the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L. Part II 25b XX as a loan to or by a current of former officer, director, trustee, key employee, highest compensated employee, or disqualified person outsitanding as of the end of the organization's tax year? If "Yes," complete Schedule L. Part II 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV and the organization as a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X X 28b X X X X 28	24a				
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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 Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25a 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 II  25b X  25c		Schedule K. If "No", go to line 25	24a		X
any tax-exempt bonds?  246  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  258  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  15 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction ware 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-EZ7 If "Yes," complete Schedule L, Part II  268  279  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  270  Did 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):  281  A current or former officer, director, trustee, or key employee (if "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I II  Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Im 1  Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, IIII, or IV, and Part V, Im 2  Did the organization have a controlle	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(s)3 and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  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-E27 if "Yes," complete Schedule L, Part II  8 Was a loan to or by a current of 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 Part III Part I	C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I bis the organization ware 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-E27 If "Yes," complete Schedule L, Part I 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 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 III was the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization revolve a grant or other assistance to an officer, director, trustee, key employee, highest compeleys, experience of a complete Schedule L, Part III was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28b		any tax-exempt bonds?	24c		
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of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  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 fevy employee (or a family member thereof) was an officer, director, trustee, or fevy employee (or a family member thereof) was an officer, director, trustee, or fevy employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b X  29c X  29c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29d Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  30d the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  30d the organization on N 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  30d 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  30d the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  30d Section 501(c)(3) organizations. Did the organization make any trans	27				
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Instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  32 Ax  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  34 Ax  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, Iine 2  36 X  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	20		27		
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Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  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  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 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  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  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  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O  38 X	31				
Schedule N, Part II  32		If "Yes," complete Schedule N, Part I	31		X
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Note. All Form 990 filers are required to complete Schedule O	38	·	31		
			32	$\mathbf{x}$	
			_		20121

• •	Check if Schedule O contains a response to any question in this Part V					
		1	1 -	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a		<u>/</u>		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and i	eporta	able gaming			
	(gambling) winnings to prize winners?	ı		1c	ļ	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	(	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	ļ	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)		ŀ		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	nty over, a	1		
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country: ▶			i		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	ınts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action'	?	5b	<u> </u>	X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	or gifts	1		
	were not tax deductible?			_6b		
7	Organizations that may receive deductible contributions under section 170(c).			ļ		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	quired	1		
	to file Form 8282?		_	7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7 <b>f</b>		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. C	d the	supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings al			8	[	
9	Sponsoring organizations maintaining donor advised funds.	-				
а	Did the organization make any taxable distributions under section 4966?			9a		]
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			-	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter:		-	1		
а	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1		1
-	amounts due or received from them.)	116		İ		1
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a	ĺ	1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
-  3	Section 501(c)(29) qualified nonprofit health insurance issuers.		-	1		
a	Is the organization licensed to issue qualified health plans in more than one state?			13a	<u> </u>	<b>1</b>
_	Note. See the instructions for additional information the organization must report on Schedule O.		•		<u> </u>	
ь	Enter the amount of reserves the organization is required to maintain by the states in which the					
-	organization is licensed to issue qualified health plans	13b	1			
С	Enter the amount of reserves on hand	13c	<del> </del>	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	130		14a	<del> </del>	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	In ()		14a	<del>                                     </del>	<del>  ^</del>
	ii 165, 165 it nied a Form 720 to report triese payments i ii 170, provide an explanation in Schedu	, <del>o</del> U	· .			/2012

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

	Check if Schedule O contains a response to any guestion in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 11			
	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 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	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	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			'
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official Ste Schedule 0	15a		X
b	Other officers or key employees of the organization SEE SChEdule O	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filled ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	icial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizat	ion: 🕨	• _	
	LSU FOUNDATION C/O GINA M. DUGAS - (225) 578-3811			
	3838 W. LAKESHORE DR., BATON ROUGE, LA 70808			
3200		Fa	aan	/2012

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			_ (0				(D)	(E)	(F)
Name and Title	Average	(do		Posi		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	amount of
	week	<b>—</b>	Lei ai		-	n/uus	(66)	from	from related	other
	(list any hours for	or director						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	8	trustee			nsate		(W-2/1099-MISC)	(** 23 1000 141100)	organization
	organizations	Individual trustee			86	aduc		, ,		and related
	below	<b>₽</b>	Institutional	las I	Кеу ептріоуве	loyee	وَ			organizations
	line)	2	Tage 1	Officer	Ķ	Highest compensated employee	For			
(1) CHARLES A. LANDRY	0.20							1 _	i	_
DIRECTOR		X						0.	0.	0
(2) J. HERBERT BOYDSTUN	0.20									
DIRECTOR		X		Ш				0.	0.	0
(3) WILLIAM FIRESHEETS, II	0.20		:							
DIRECTOR		X						0.	0.	0
(4) FRANK W. HARRISON, III	0.20	١								
DIRECTOR		X				ļ		0.	0.	0
(5) FELIX R. WEILL	0.20	١								•
DIRECTOR	0.20	X	_			_		0.	0.	0
(6) CASS GAIENNIE	0.20									•
DIRECTOR/PRESIDENT-ELECT	0.20	X		_		<del> </del>		0.	0.	0
(7) DAVID B. MEANS, III	0.20	, ,								•
DIRECTOR	0.20	X		_		_		0.	0.	0
(8) ROBERT STUART	0.20	.,								0
DIRECTOR	0.20	X				_		0.	0.	0
(9) HENSON MOORE	0.20	Į,							_	0
DIRECTOR	0 20	X	_					0.	0.	0
(10) JEFF SPRINGMEYER	0.20	J							^	0
DIRECTOR	0.50	Х		$\vdash$		-	_	0.	0.	0
(11) GARY L. LABORDE	0.50	ł		x				0.	0.	0
PRESIDENT-ELECT/PRESIDENT	0.50			Λ		$\vdash$		0.		
(12) G. LEE GRIFFIN	0.30	$\cdot$		х				0.	332,000.	10,910
EXECUTIVE DIRECTOR	0.30	┢		^		$\vdash$		<u> </u>	332,000.	10,910
(13) WILLIAM L. SILVIA, JR	0.30	ł		х				0.	0.	0
SECRETARY (14) GINA M. DUGAS	2.00	$\vdash$	$\vdash$	A	_			0.	<u> </u>	
TREASURER	2.00	1		x				0.	173,449.	12,220
(15) LAURA DAUZAT	0.50	<del>                                     </del>	-	1					1/3/447.	12,220
PRESIDENT/DIRECTOR	0.30	1		x				0.	0.	0
		$\vdash$			_				-	
		1								
		]								

Form 990 (2012)

Par	t VII Section	n A. Officers, D	irectors, Trus	tees, Key Em	ploy	rees	, an	d Hi	ghe	st (	Compensated Employe	es (continued)				
	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Co (A) (B) (C)										(D)	(E)			(F)	
	(A) (B) (C)  Name and title Average (do not check more than one for the control of the control o											Reportable Reportable			stimate	_
	hours per week (do not check more than one box, unless person is both an officer and a director/trustee) from from related													ar	nount	
	(list any B the organization of the organizati												- 1	com	other pensa	
	related   8   8     8     (W-2/1099-MISC)														om th	
				related	100	ustee			gg		1	•	•	org	anızat	ion
				organizations	al trus	ral T		8	ğ,						d relat	
				below line)	jy Wg	Institutional	G#Ger	Key employee	is and	Former			ĺ	orga	anızati	ons
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1b	Sub-total										0.	505,4	49.	2	3,1	30.
c	Total from c	ontinuation sho	eets to Part VI	I, Section A					$\blacktriangleright$		0.		0.			0.
d	Total (add li	nes 1b and 1c)							▶		0.	505,4	49.	2	3,1	30.
2	Total numbe	r of individuals (î	including but n	ot limited to th	ose	liste	d al	bove	e) wh	no r	eceived more than \$100	,000 of reportab	ole			_
	compensation	on from the orga	nization 🕨													0
													ľ		Yes	No
3	•	•	-	=		e, ke	y er	nplo	yee	or.	highest compensated e	mployee on				
		es," complete S												3		X
4						-					her compensation from	the organization		_	v	
_		-									for such individual			4	Х	
5								-		eiai	ted organization or indivi	dual for services	3	_		Х
Sec		the organization endent Contrac		piete Scheaui	e J i	or su	JCN	pers	son					5		
1	·			mneneated in	dene	ande	nt c	onti	racto	ne f	that received more than	\$100,000 of cor		ation f	rom	
•											n the organization's tax		препа	ation	10111	
	ino organiza	nom report con	(A)	the odiendar y	<del>- Cui</del>	Cilai	<u> </u>	****	<u> </u>		(B)	, cui.		((	<u></u>	
		Name	and business	address							Description of s	ervices	C		rsatio	n
CAI	IGELOS I	WARD GE	NERAL CO	ONTRACTO	OR	S,	9:	512	2							
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2					ot li	mıte	d to		-	stec	d above) who received m	ore than				
	\$100,000 of	compensation fi	rom the organi	zation					1				į.			

п о с

Pa	14.4	***	Check if Schedule O conf		se to d	any guestion	in this Part VIII			
			Check ii Schedule O com	ains a respon	se to a	arry question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a						
g S	i	b	Membership dues	16						
A,		С	Fundraising events	1c		45 500				
ਫ਼ੁੱਢੋ		d	Related organizations		1,64	45,588.				
Zi.S			Government grants (contribut				<u> </u>			
a tio		f		1 1						
듗			similar amounts not included abo	ve 1f						
ag a		_	Noncash contributions included in lines	1a-1f \$			1 645 500			
<u>Ģ ģ</u>		h	Total. Add lines 1a-1f				1,645,588.			
					Βu	usiness Code	<b>[</b>			
<u>i</u> 2	2	а			-					_
E e		b			-  -					
E S		C			_					
Reg		ď	<del>.</del>		-					
Program Service Revenue		e			-					<del> </del>
_		T _	All other program service reve	enue	<u> </u>	<b>•</b>				
	-		Total. Add lines 2a-2f	dividos do int	larant					1
	3		Investment income (including other similar amounts)	aividenas, int	terest,	, and				
	4		Income from investment of ta	v-avamat han	d proc					
	5		Royalties	x-exempt bom	u proc	Leeus -	· · · -		•	1
	ľ		noyanies	(i) Real		(ii) Personal				
	6	a	Gross rents	ly rical		ny i cisonai	<del> </del>			
	ľ	-	Less: rental expenses				•			
			Rental income or (loss)							
			Net rental income or (loss)				İ	[		1
	7		Gross amount from sales of	(i) Securitie	s	(ii) Other				
		_	assets other than inventory	W GGGGIIIIG		(1)				
		b	Less: cost or other basis							
			and sales expenses							
		С	Gain or (loss)							
		d	Net gain or (loss)			<b>•</b>				
•	8	a	Gross income from fundraisin	g events (not						
Other Revenu			including \$	of						
ě			contributions reported on line	1c). See						
P.			Part IV, line 18		a					
듄		b	Less: direct expenses		ь <u>_</u>					
		C	Net income or (loss) from fund	draising event	s	<u> </u>				
	9	а	Gross income from gaming a	ctivities. See	- 1					
			Part IV, line 19		a					
			Less: direct expenses	•	ь					
	١		Net income or (loss) from gan	-						
	10	a	Gross sales of inventory, less	returns						
			and allowances		a		-			
			Less: cost of goods sold		ь <u></u>		1			
		<u>c</u>	Net income or (loss) from sale			Codo				
	11	_	Miscellaneous Revenu		- Br	usiness Code	1			1
	' '	b			-  -					-
		-			-  -			-		
		d	All other revenue		-  -				-	
		e	Total. Add lines 11a-11d		_	<b>•</b>				
	12		Total revenue. See instructions		_		1,645,588.	0.	0.	0.

Pa	rt IX Statement of Functional Expens	es			, ago re
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon	ise to any question in thi			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	1,163,192.	1,163,192.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits Payroll taxes				
10 11	· · ·				<del></del>
	Fees for services (non-employees):				
a b	Management Legal	46,886.	11,622.	35,264.	
C	Accounting	10,000.	11,022.	33/2010	
d	· *				
e	Professional fundraising services See Part IV, line 17		'		
f	Investment management fees				~:·····
a	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion	-			
13	Office expenses				,-
14	Information technology				
15	Royalties				
16	Occupancy .				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,584.	413.	2,171.	
20	Interest	124,018.	124,018.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				·
23	Insurance				····
24	Other expenses I temize 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)	0.5			
а	OFFICIAL FUNCTIONS	95,010.			95,010.
ь	OTHER OPERATING SERVICE	218.		218.	
С					
d	All 11				<del></del>
e 05	All other expenses Add base 1 through 0.4s	1 /21 000	1 200 245	27 652	05 010
25	Total functional expenses. Add lines 1 through 24e	1,431,908.	1,299,245.	37,653.	95,010.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

232010 12-10-12

Form **990** (2012)

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) End of year Beginning of year 1 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 49,040. 248,169. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 2,087,584. basis. Complete Part VI of Schedule D 10a 6,455,691. 2,087,584. b Less: accumulated depreciation 10b 10c 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 881,884. 1,095,564. 15 Other assets. See Part IV, line 11 15 7,386,615. 3,431,317. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 49,040. 248,169. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 63,300. 63,300. 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 6,392,391. 2,024,284. 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 6,504,731. 2,335,753. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here \( \bigvee \bigvee X \) and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 79,621. 27 Unrestricted net assets 27 1,015,943. 881,884. 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 881,884. 1,095,564. 33 33 Total net assets or fund balances 7,386,615. 3,431,317. Total liabilities and net assets/fund balances

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047
2012

Inspection

Name of the organization

Employer identification number

			LSUP	ROPERTY FOUN	DATIO	N				7	2-1295	<u> 5979</u>	
Pε	rt E	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See inst	tructions.				
The	organ			because it is: (For lines 1									
1			-	s, or association of chur	_		-	-	١.				
2	$\Box$			70(b)(1)(A)(ii). (Attach Sc									
3	而			ital service organization			170/b)(1)	(A)(iii).					
4	一			operated in conjunction					(b)(1)(A)(ii	i). Enter	the hospita	al's nam	ıe.
		city, and stat	=			, , , , , , , , , , , , , , , , , , ,			(-)(-)(-	,		•	,
5	X	•		benefit of a college or ur	niversity o	wned or or	perated by	a governi	mental uni	t describ	ed in		
•			(b)(1)(A)(iv). (Comple	· ·			, , , , , , , , , , , , , , , , , , ,	u go					
6				ent or governmental uni	t describe	d in sectio	n 170/h)/	11/41/64					
7	Ħ		•	eives a substantial part					r from the	aonaral	public dos	onbod i	_
•			(b)(1)(A)(vi). (Comple		oi its supp	ort nom a	governme	intai unit C	n ironii use	general	public des	JIID <del>e</del> u I	11
8		•		section 170(b)(1)(A)(vi).	(Complete	Part II \							
9	一			eives: (1) more than 33 1			rom contr	hutions &	nambarahi	n food o	nd aross re	ocolote	from
•				nctions - subject to certa									
			•	axable income (less sect	•	•	•			• •	•		
			509(a)(2). (Complete	•	ilon o i i ta	x, 110111 00	31103363 6	acquired b	y the orga	unzanon	aitei oulle	50, 137	J.
10				perated exclusively to te	st for nubl	ic safety S	See sectio	n 509(a)(4	1)				
11	一			perated exclusively for the						v out the	DUITOOSAS	of one	or
				ations described in section									<b>.</b>
		-		organization and comple		•		.,		-/(-/. 0			
		a Type I	·· · · · · · · · · · · · · · · · · · ·		ype III - Fu	•		d	TVD	e III · No	n-functiona	ıllv ınter	orated
е			•	at the organization is not		-	_					•	•
				han one or more publicly									
f			-	tten determination from t		_						. , , ,	
		supporting of	rganization, check th	nis box		_							
9	1	Since August	t 17, 2006, has the d	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?			
		(i) A person	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (ii) and (	iıı) below	' <b>,</b>	Yes	No
		the gove	eming body of the s	upported organization?							11g(i)		
		(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii	)	
h	ı	Provide the fe	ollowing information	about the supported or	ganızatıon	(s).							
									· · · · · · · · · · · · · · · · · · ·				
(i)	Name	of supported	(ii) EIN	(iii) Type of organization	r ,	rganization		•	(vi) Is organizatio	the	(vii) Amour	nt of mo	netary
	orga	ınızatıon		(described on lines 1-9		sted in your			(i) organiz	ed in the	\$u	pport	
				above or IRC section (see instructions))		document?		support?	US				
				(**************************************	Yes	No	Yes	No	Yes	No			
											-		
		<u> </u>					<u> </u>	_		<del>                                     </del>		<del>-</del>	
									<u></u>	ļ			
			,				,						
Tota	al		<u> </u>		<u> </u>			<b>.</b>	1				

232021 12-04-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012

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

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

Sec	ction A. Public Support			-							
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
1	Gifts, grants, contributions, and			}							
	membership fees received. (Do not										
	include any "unusual grants.")	3,367,790.	3,715,962.	3,536,405.	1,522,19 <u>5.</u>	1,645,588.	13,787,940.				
2	Tax revenues levied for the organ-										
	ızatıon'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	3,367,790.	3,715,962.	3,536,405.	1,522,195.	1,645,588.	13,787,940.				
5	The portion of total contributions										
	by each person (other than a			ļ							
	governmental unit or publicly										
	supported organization) included			i							
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)										
6	Public support. Subtract line 5 from line 4	***************************************					13,787,940.				
	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
	Amounts from line 4	3,367,790.	3,715,962.	3,536,405.	1,522,195.	1,645,588.	13,787,940.				
8	Gross income from interest,										
	dividends, payments received on					1					
	securities loans, rents, royalties										
	and income from similar sources										
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part IV.)										
11	Total support. Add lines 7 through 10	'					13,787,940.				
12		, etc. (see instruction	ons)			12					
13	First five years. If the Form 990 is fo	r the organization's	s first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	_				
	organization, check this box and stop	p here					▶□				
Se	ction C. Computation of Publ	lic Support Pe	rcentage								
14	Public support percentage for 2012 (	line 6, column (f) d	ivided by line 11, c	olumn (f))			100.00 %				
15	Public support percentage from 2011	1 Schedule A, Part	II, line 14			15	<u>100.00 %</u>				
16a	33 1/3% support test - 2012. If the	organization did no	ot check the box or	n line 13, and line 1	4 is 33 1/3% or n	nore, check this bo					
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright X$				
b	33 1/3% support test - 2011. If the	organization did no	ot check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	6 or more, check th	ns box				
	and stop here. The organization qua	lifies as a publicly :	supported organiza	ation			▶				
178	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,				
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	is box and stop he	ere. Explain in Pai	rt IV how the organ	ization				
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	organization		▶□				
t	10% -facts-and-circumstances tes	% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
	more, and if the organization meets t	he 'facts-and-circu	mstances" test, ch	eck this box and s	stop here. Explair	n in Part IV how the					
	organization meets the "facts-and-cire	cumstances" test.	The organization of	jualifies as a public	ly supported orga	anization .	▶□				
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	and see instruction	s <b>&gt;</b>				
	-			-	Sche	edule A (Form 990	or 990-EZ) 2012				

# Schedule A (Form 990 or 990·EZ) 2012 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 fa	uis to
qualify under the tests listed below, please complete Part II.)	

Se	ction A. Public Support	, , , , , , , , , , , , , , , , , , , ,				-	
Cale	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that	<del></del>		<del> </del>		<del>                                     </del>	
3	are not an unrelated trade or bus-						
	***************************************	1					
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	1					
	or expended on its behalf			ļ			
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6							
	a Amounts included on lines 1, 2, and				1		
•	3 received from disqualified persons						
	2 Amounts included on lines 2 and 3 received						
•	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						1
	amount on line 13 for the year			<u> </u>			
	c Add lines 7a and 7b				,,	ļ	
	Public support (Subtract line 7c from line 6)					<u> </u>	<u> </u>
<u>Se</u>	ction B. Total Support		·		_		
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10	a Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
	b Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	c Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on				}		
12	Other income. Do not include gain					1	
	or loss from the sale of capital						
12	assets (Explain in Part IV.)	<u> </u>		†	<del> </del>	1	1
	Total support. (Add lines 9, 10c, 11, and 12)	r the erasi	a finate conservation	 	lav vaar ee e ee t	======================================	
14	First five years. If the Form 990 is for	rule organization's	s iirst, second, thi	ια, τουπη, or timh t	ax year as a section	on out (c)(3) organiz	zacion, ⊾ ┌──
<u>-</u>	check this box and stop here	in Cumara Pr					
	ction C. Computation of Publ					T T	
	Public support percentage for 2012 (		<u>-</u>	column (f))		15	9
	Public support percentage from 2011					16	9
<u>Se</u>	ction D. Computation of Inve	<u>stment Incom</u>	e Percentage	<u> </u>			
17	Investment income percentage for 20	)12 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	9
18	Investment income percentage from	2011 Schedule A,	Part III, line 17			18	9
	a 33 1/3% support tests - 2012. If the			on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	-					▶□
ı	b 33 1/3% support tests - 2011. If the	=	•				and
	line 18 is not more than 33 1/3%, che	-					
20							
	Private foundation. If the organization	ni dia not offect a	55A 011 III 18 14, 15	a, or 190, check t		hadula A (Form 90	N ar 000 E7 004

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

L S U PROPERTY FOUNDATION

Employer identification number 72 – 1295979

Pa	t i Organizations Maintaining Donor Advise		Accounts Complete if the
			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
_	Total acceptance of and of con-	(a) Donor advised failes	(b) I dries and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)	<del></del>	
3	Aggregate grants from (during year)	-	
4	Aggregate value at end of year		f
5	Did the organization inform all donors and donor advisors in		, <del></del>
_	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose con	·
Pa	Impermissible private benefit?		Yes No
			IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	· —	
	Protection of natural habitat	Preservation of a certified	historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
	<b>-</b>		Held at the End of the Tax Year
a	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		_2b
С.	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the org	ganization during the tax
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7 8	Amount of expenses incurred in monitoring, inspecting, and		
0	Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170(n)(4	Yes No
9		on appearants in the revenue and evaces at	
•	In Part XIII, describe how the organization reports conservati include, if applicable, the text of the footnote to the organizar		
	conservation easements.	tion's illiancial statements that describes the	organization's accounting for
Pa	rt III Organizations Maintaining Collections o	f Art. Historical Treasures, or Othe	er Similar Assets
	Complete if the organization answered "Yes" to Form	•	olitilai 7455cts.
1a	If the organization elected, as permitted under SFAS 116 (AS		t and halance sheet works of art
	historical treasures, or other similar assets held for public ext	•	
	the text of the footnote to its financial statements that descri		or public service, provide, in Fait Alli,
ь	If the organization elected, as permitted under SFAS 116 (AS		d halance sheet works of art, historical
•	treasures, or other similar assets held for public exhibition, ea	•	
	relating to these items:	dealion, or research in furtherance of public	service, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> ¢
	(ii) Assets included in Form 990, Part X	•	► \$ ► \$
2	If the organization received or held works of art, historical tre	acuree or other cimilar assets for financial as	In provide
~	the following amounts required to be reported under SFAS 1	_	iii, piovide
9	Revenues included in Form 990, Part VIII, line 1	to thoo soot relating to these items.	<b>&gt;</b> ¢
a b	Assets included in Form 990, Part X	• •	•
D	Assets included in Form 330, Fart A	•	<b>-</b> • • • • • • • • • • • • • • • • • • •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

232053 12-10-12

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 L S U PROPERTY FOUNDATION	72-1295979	Page 5
Part XIII Supplemental Information (continued)		
THE FOUNDATION HAS EVALUATED ITS POSITION REGARDING THE ACCO	OUNTING FOR	
UNCERTAIN INCOME TAX POSITIONS AND DOES NOT BELIEVE THAT IT	HAC ANV	
MATERIAL UNCERTAIN TAX POSITIONS. WITH FEW EXCEPTIONS, THE	FOUNDATION	IS
NO LONGER SUBJECT TO FEDERAL, STATE, OR LOCAL TAX EXAMINATION	ONS BY TAX	
AUTHORITIES FOR YEARS BEFORE JUNE 30, 2010		
		<u> </u>

SCHEDULE 1 (Form 990)

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

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

|--|

**Employer identification number** Inspection

72-1295979

► Attach to Form 990. S U PROPERTY FOUNDATION Part | General Information on Grants and Assistance Name of the organization Department of the Treasury Internal Revenue Service

	200000000000000000000000000000000000000						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibilit)	for the grants or ass	istance, and the select	
criteria used to award the grants or assistance?	stance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for monit	oring the use of grant	funds in the United	d States.			
Part It Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	l Organizations in the	e United States. C.	omplete if the orga	inization answered "Y	'es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II can	be duplicated if additive	ional space is need	led.			
1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA STATE UNIVERSITY						BAND & CHOIR	DONATION OF LABORATORY SCHOOL BAND AND CHOIR
=			•			RENOVATIONS &	RENOVATIONS, WHICH EXPANI
BATON ROUGE, LA 70803	72-6000848		0	1,163,192.FAX VALUE	PAX VALUE	PERTT	AND ENHANCE THE
	,						

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

LHA For Paperwork Reduction Act Notice, see the Instructions form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

232101 12-18-12

Schedule | (Form 990) (2012)

72-1295979

Schedule I (Form 990) (2012) L. S. U. PROPERTY FOUNDATION

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.

of (d) Amount of non- (e) Method of valuation (f) Description of non-cash assistance (book, FMV, appraisal, other)			Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.		OUISIANA STATE UNIVERSITY	DONATION OF LABORATORY SCHOOL BAND	THE EDUCATIONAL MISSION	-ACCREDITED COLLEGE PREPARATORY	AUSPICES OF LSU'S COLLEGE OF HUMAN	PETROLEUM ENGINEERING
(b) Number of cash grant of cash grant			the information required in F		LOUISIANA STA	DONATION OF L	AND ENHANCE T	LY-ACCREDITED	USPICES OF LSU	THE DONATION OF THE P
(a) Type of grant or assistance (b			Part IV Supplemental Information. Complete this part to provide t	PART II, LINE 1, COLUMN (H):	NAME OF ORGANIZATION OR GOVERNMENT:	(H) PURPOSE OF GRANT OR ASSISTANCE:	AND CHOIR RENOVATIONS, WHICH EXPAND	OF THE UNIVERSITY LAB SCHOOL, A FULLY	SCHOOL (K-12) OPERATING UNDER THE AL	SCIENCES AND EDUCATION, AND THE DON?

Schedule I (Form 990) (2012)

RESEARCH AND TECHNOLOGY TRANSFER LAB (PERTT).

### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

► Attach to Form 990. ► See separate instructions.

2012

Open to Public Inspection

Name of the organization

Department of the Treasury

L S U PROPERTY FOUNDATION

Employer identification number 72–1295979

Pŧ	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If any of the boxes on 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	1b		1
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	1		
	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			
	Form 990 of other organizations  Approval by the board or compensation committee			
	,			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	[	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	-	X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	if "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		<u> </u>	
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
a	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4058-6/c/2	۰		

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

Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

Part if 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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(O)-())(B)	reported as deferred in prior Form 990
(1) G. LEE GRIFFIN	€	0	0	0	0	0	0	
CUTIVE DIRECTOR	(ii)	320,000.		12,000.	10,000.	910.	342,91	
M. DUGAS	ε			0.	0	0		0
TREASURER	⊞	166,249.	0.	7,200.	7,041.	5,179.	185,669.	0
	(1)							
	(E)							
	ω							
	▣							
	ε							
	(ii)							
	(i)							
	(II)							
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232112				c			Schedu	Schedule J (Form 990) 2012

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

Page 3

additional information.				

Schedule J (Form 990) 2012

### **SCHEDULE L**

(Form 990 or 990-EZ)

**Transactions With Interested Persons** 

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

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

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

L S U PROPERTY FOUNDATION

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Employer identification number 72–1295979

Complete if the	organization answ	vered "Yes" on	Form 9	90, Pa	art IV, line 25a or 25b	o, or Form 990-EZ, F	Part V,	line 40	b.			
1 (a) Name of disqualified p	(b) R	elationship bet	ween o	disqua	lified	) December of two				(d)	Corre	cted?
	berson	person and o	rganiza	ation	(0	c) Description of tra	nsacuc	•n		<u> </u>	es _	No
				_			<del></del>				+	
2 Enter the amount of tax section 4958	Incurred by the or	rganization mar	nagers	or disc	qualified persons du	ring the year under		<b>▶</b> \$				····-
3 Enter the amount of tax,	rf any, on line 2, a	above, reimburs	sed by	the or	ganization			<b>&gt;</b> \$				
Part II Loans to and	d/or From Inte	erested Per	sons	•								
Complete if the	organization answ	vered "Yes" on	Form 9	990-EZ	, Part V, line 38a or f	Form 990, Part IV, li	ne 26;	or if th	e orga	anizatı	on	
reported an amo	ount on Form 990,		6, or 2	2.								
(a) Name of Interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or n the zation?	(e) Original principal amount	(f) Balance due	(g) defa	, ,,,,	(h) Ap by bo comn	ard or	(1) **	ritten ment?
-			То	From			Yes	No	Yes	No	Yes	No
			╂									
			+	<del>                                     </del>			<del> </del>					
			+				<del> </del>					
			1				1					
·												

Total

Part III | Grants or Assistance Benefiting Interested Persons.

Complete if the organization	answered "Yes" on Form 990, Pa	art IV, line 27.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
		<u></u> .		
=				

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

Schedule L (Form 990 or 990-EZ) 2012

▶ \$

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

L S U PROPERTY FOUNDATION

Employer identification number 72–1295979

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CENTER, THE LSU PAUL M. HEBERT LAW CENTER, AND THE LSU SYSTEM OFFICE.

FORM 990, PART VI, SECTION B, LINE 11: THE TREASURER REVIEWS THE FORM 990 WITH THE BOARD OF DIRECTORS AND SEEKS COMMENT AND FEEDBACK PRIOR TO FILING.

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

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING

DOCUMENTS ARE FILED WITH THE LOUISIANA SECRETARY OF STATE'S OFFICE AND ARE

AVAILABLE TO THE PUBLIC. THE CONFLICT OF INTEREST POLICY AND CONSOLIDATED

AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE

FOUNDATION'S WEBSITE.

BLOU4211

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2012 Open to Public Inspection OMB No 1545-0047

Employer identification number 72-1295979

S U PROPERTY FOUNDATION Name of the organization

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
LSU MUSEUM, LLC - 33-1026418					
3838 WEST LAKESHORE DRIVE	INVESTMENT IN SHAW CENTER				
BATON ROUGE, LA 70808	FOR THE ARTS, LLC	COUISIANA			A/N
STEPHENSON DISASTER MANAGEMENT INSTITUTE	CREATION OF FILMS RELATED				
FILMS LLC - 26-2972416, 3838 WEST LAKESHORE	TO DISASTER PREPAREDNESS				
DRIVE, BATON ROUGE, LA 70808	CONGRUENT W/ LSU MISSION	COUISIANA		. 2	N/A
LSUPP GYM AND PERFORMING ARTS, LLC -					
27-1533502, 3838 WEST LAKESHORE DRIVE, BATON					
ROUGE, LA 70808	BAND AND CHOIR RENOVATIONS	LOUISIANA	342,358.	27,222.N/A	/A
PERTT LAB, LLC - 27-2691553					
3838 WEST LAKESHORE DRIVE	CONSTRUCTION OF ENGINEERING				
BATON ROUGE, LA 70808	САВ	COUISIANA	42,967.		N/A
		L			

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

organizations duming the tax year.)							
(a)	(q)	(c)	(p)	(e)	<b>(£)</b>	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	(D)(J))
of related organization		foreign country)	section	status (if section	entity	entity?	2
				501(c)(3))		Yes	٥
LSU FOUNDATION - 72-6020969	FOSTER PRIVATE FINANCIAL						
3838 WEST LAKESHORE DRIVE	SUPPORT FOR LSU AND ITS						
BATON ROUGE, LA 70808	RELATED CENTERS/COLLEGES	LOUISIANA	501(C)(3)	LINE 5	N/A		×
LSU MARINE PROPERTY POUNDATION - 71-0865718 POSTER SUPPORT	FOSTER SUPPORT VIA GIFTS						
3838 WEST LAKESHORE DRIVE	OF MARINE VESSELS FOR LSU						
BATON ROUGE, LA 70808	AND ITS RELATED CENTERS	LOUISIANA	501(C)(3)	LINE 7	N/A		×

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

Schedule R (Form 990) 2012

72-1295979

L S U PROPERTY FOUNDATION

Part 1 Continuation of Identification of Disregarded Entities

Schedule R (Form 990)

(a)	(g)	(3)	(g)	(e)	(£)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling entity
HILLTOP PACILITY, LLC - 27-3717136	CONSTRUCTION OF EDUC/ADMIN				
3838 WEST LAKESHORE DRIVE	BUILDING AT HILLTOP				
BATON ROUGE, LA 70808	ARBORETUM	COUISIANA	911,754.	1,170,260.N/A	/A
RQUINE LAMENESS UNIT - 45-3773575					
3838 WEST LAKESHORE DRIVE	TO CONSTRUCT A LAMENESS				
	UNIT FOR EQUINES	LOUISIANA	171.	6,645.N/A	/A
FOUNDATION OFFICE BUILDING LLC - 46-1688177					
3838 WEST LAKESHORE DRIVE	CONSTRUCTION OF OFFICE				
BATON ROUGE, LA 70808	BUILDING FOR LSU FOUNDATION	LOUISIANA	120,657.	139,492.N/A	/A
					:

72-1295979

Page 2

Schedule R (Form 990) 2012 L S U PROPERTY FOUNDATION

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

3	General or Percentage managing ownership partner?									
8	General or managing partner?			_					 	
(i)	Disproportion- ate allocations?  Code V-UB! ate allocations?  20 of Schedule A-1 (Form 1065)									
_	ations?									
ε	Dispropate alloc									
(6)	Share of end-of-year assets				•					
€	Share of total income	-					_			
<b>(e)</b>	Predominant income (related, unrelated, excluded from tax under sections 512-514)				•					
(D)	Direct controlling entity							,		
(0)	Legal domicile (state or foreign							:		
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

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

	( ( 6								1
(a)	(Q)	<u> </u>	Ð	•		6)	Ξ	€	,
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Legal domicile Direct controlling (state or foreign	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentag ownership	Section 512(b)(13) controlled entity?	=£36 €
		country)		O tidas)		dasaers		Yes No	٩ ٧
								-	
	•								

Schedule R (Form 990) 2012

232162 12-10-12

Page 3

Yes No

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# S U PROPERTY FOUNDATION Ц Schedule R (Form 990) 2012

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

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

- During the tax year, clid the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- Performance of services or membership or fundraising solicitations by related organization(s) Ε
- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization  (b)  (c)  Name of other organization  (b)  (c)  Amount involved  Amount involved  (d)  Amount involved  (d)	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LSU FOUNDATION	ى ك	1,645,588.CASH	САЅН
(2) L'SU FOUNDATION	Z	0	
(3) LSU FOUNDATION	0	0	
(4) LSU FOUNDATION	ы	5,595,000.LOAN VALUE	COAN VALUE
(5)			
6			

232163 12-10-12

Page 4

# Schedule R (Form 990) 2012 L S U PROPERTY FOUNDATION

Part VE Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

				-					
(a)	(a)		<b>D</b>	 E	6	Ē,	3	3	<b>8</b>
Name, address, and EIN of entity	Primary activity	elig Ign	(related, unrelated, 501(c)(3)	Share of total	Share of end-of-year	Uspropor- tonate allocations?	Uspropor- Code V-UB! General or Percentage tonate amount in box 20 managing ownership allocations? of Schedule K-1 partner?	General o managing partner?	Percentage ownership
		country)	under section 512-514) Yes	Income	assets	Yes No	(Form 1065)	Yes No	
								_	
			-						
						-		$\frac{1}{2}$	
			_						
								$\frac{1}{1}$	
								_	
		·							
								_	
			_	1		]		$\frac{1}{2}$	

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012

### Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Internal Reven		▶ File a sep	arate applic	cation for each return	n.	İ	
		n Automatic 3-Month Extension, o	omplete o	only Part I and ched	ck this box		. ▶ Ø
•	•	n Additional (Not Automatic) 3-Mo	-	•			_
	•	t II unless you have already been o		•		•	8868.
	•	, ,			•	•	
a corporat 8868 to re Return for	tion required equest an e r Transfers	le). You can electronically file Form d to file Form 990-T), or an addition xtension of time to file any of the f Associated With Certain Personal e details on the electronic filing of the	al (not auto orms listed Benefit C	omatic) 3-month ext if in Part I or Part II Contracts, which m	tension of time. You can I with the exception of it oust be sent to the IRS	electronical Form 8870, S in paper i	lly file Form Information format (see
Part	Automa	tic 3-Month Extension of Time	Only sub	omit original (no c	onies needed).		
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3a If th	nis applicati	on is for Form 990-BL, 990-PF, 990	)-T, 4720, d	or 6069, enter the te			<u>ښ</u>
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Cat. No 27916D

Form 8868 (Rev. 1-2013)