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Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2013

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Department of the Treasury Internal Revenue Service

 Do not enter Social Security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.lrs.gov/form990. For the 2013 calendar year, or tax year beginning January 1 2013, and ending December 31 , 2013 D Employer Identification Number Check if applicable Name of organization University of New Orleans Foundation 72-1051326 Address change Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Name change Initial return 420 (504) 280-2800 2021 Lakeshore Drive City or town, state or province, country, and ZIP or foreign postal code Terminated G Gross receipts \$ 19, 185, 324 Amended return New Orleans LA 70122 H(a) Is this a group return for subordinates? F Name and address of principal officer Yes Application pending H(b) Are all subordinates included?
If 'No,' attach a list (see instructions) Yes Anthony Gregorio 2021 Lakeshore Drive STE 420 New Orleans LA 70122 Tax-exempt status 501(c) ((insert no) 4947(a)(1) or Website: ► www.unofoundation.org H(c) Group exemption number L Year of formation M State of legal domicile Form of organization X Corporation Trust 1984 Association Summary Briefly describe the organization's mission or most significant activities The University of New Orleans Foundation's mission is to promote the well-being and advancement Governance of the University of New Orleans and all the colleges, schools, departments, and divisions comprising it, and to develop, expand and improve (see sch 0) Check this box ► I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 3 ∞ಶ Number of independent voting members of the governing body (Part VI, line 1b) 4 31 Activities 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 20 Total number of volunteers (estimate if necessary). RFC.

7a Total unrelated business revenue from Part VIII (C). 6 0 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b -51,407. **Prior Year Current Year** g Contributions and grants (Part VIII, line 1h) 8,266,020 10,769,282. Revenue 2,834,057 Program service revenue (Part VIII, line 2g) 2,263,170. Investment income (Part VIII, column (A), lines 2,370.053 5,700,404. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 15,382. 25,762. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 13,485,512 758,618. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,537,832 10,090,096. Benefits paid to or for members (Part 1X, column (A), line 4) . . Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) 315,754 557,420. 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 7,313. 12,049. b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 4,667,268 4,543,554. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . . 8,532,903 15,198,383. 19 Revenue less expenses Subtract line 18 from line 12 3,560,235. 4,952,609. End of Year Beginning of Current Year Total assets (Part X, line 16) . 87,557,513. 98<u>,2</u>11<u>,094</u>. 21 Total liabilities (Part X, line 26) . . 22,697,557. 27,444,431. 22 Net assets or fund balances Subtract line 21 from line 20 70,766,663 64,859,956 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here President/CEO Anthony Gregoria Type or print name and title Date Print/Type preparer's name Preparer's signature self-employed Paid Preparer

X No

Form 990 (2013)

Firm's EIN ▶

Use Only

May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	1990 (2013) University of New Orleans Foundation	72-1051326	Page 2		
اقرآ	Statement of Program Service Accomplishments				
	Check if Schedule O contains a response or note to any line in this Part III	 	x		
1	Briefly describe the organization's mission				
	The University of New Orleans Foundation's mission is to promote				
	and advancement of the University of New Orleans and all the col	lleges, schools,			
	See Form 990, Page 2, Part III, Line 1 (continued)				
	Did the organization undertake any significant program services during the year which were not listed on the	nrior			
_	Form 990 or 990-EZ?	· · · · · · · · · · · · Yes	X No		
	If 'Yes,' describe these new services on Schedule O		<u> </u>		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s? Yes	X No		
	If 'Yes,' describe these changes on Schedule O				
4	Describe the organization's program service accomplishments for each of its three largest program services,	, as measured by expense:	s		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amoun others, the total expenses, and revenue, if any, for each program service reported	it of grants and allocations	to		
4 a	(Code) (Expenses \$ 10,338,719. including grants of \$ 8,326,095.)		3,037.)		
	PROVIDING FINANCIAL ASSISTANCE FOR ACADEMIC DEPARTMENTS & ADMINI		<u>s</u>		
	AND SUPPLEMENT OPERATING COSTS FOR FACULTY, GUESTS, SPEAKERS, TE				
	& COMMUNITY DEVELOPMENT RELATED TO THE UNIVERSITY OF NEW ORLEANS	3			
		. 			
4 t	(Code) (Expenses \$ 2,055,358. including grants of \$ 1,555,529.)	Revenue \$ 4,172	2,917.		
	TO PROVIDE SCHOLARSHIPS AND AWARDS TO UNIVERSITY OF NEW ORLEANS				
	STUDENTS TO HELP OFFSET THE COSTS OF TUITION, BOOKS, AND FEES TO ENCOURAGE AND SUPPORT THE PURSUIT OF HIGHER EDUCATION.				
	ENCOURAGE AND BUFFORT THE FORBUTT OF MIGHER EDUCATION.				
	TO PROVIDE FINANCIAL SUPPORT FOR THE UNIVERSITY OF NEW ORLEANS'	FACULTY			
	SALARIES, TRAVEL, AND RESEARCH EXPENSES TO HELP FURTHER THE EDUC				
	AND RESEARCH GOALS OF THE UNIVERSITY OF NEW ORLEANS.				
			-		
	/O la	(Davezus C 201			
40			1,002.)		
	TO PROVIDE FINANCIAL AND PERSONNEL SUPPORT FOR THE UNIVERSITY OF ORLEANS ROBERT E. NIMS CENTER OPERATED WITH THE UNIVERSITY'S COL				
	ARTS IN SUPPORT OF THE UNIVERSITY'S ENTERTAINMENT ARTS CENTER.	innen for Interest	<u> </u>		
	WID IN DOLLOW OF THE ONLY MODILE OF BUILDING THE OFFICE OF				
		- 			
40	d Other program services (Describe in Schedule O)				
	(Expenses \$ 456,418. including grants of \$ 208,472.) (Revenue \$	546,612.)		
4.	a Total program service expenses > 13,699,646				

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Form **990** (2013)

Form 990 (2013) University of New Orleans Foundation 72-1051326 Part W Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 3 X 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III . . . Х 5 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, 6 Х 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes, complete Schedule D. Part III. Х 8 Х g х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х X 11 b 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 11 c X 11 d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Х 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X. Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and X if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12 b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 Х Х 14a Х 14b X 15 X 16 17 X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18

18

19

20

20 b

Х

X

Х

20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

38

FUII	mass (2013) University of New Orleans Foundation 72-1051	326	۲	′age ₄
Pa	it IV. Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	. 21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	. 22		х
23	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Ves,' complete	. 23	x	
24	a 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	. 24a		х
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
•	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		
,	·	. 24d		
	a 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		х
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	. 26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	. 27		х
28	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Parl IX, column (A), line 17 if Yes," complete Schedule I, Parts I and II. Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Parl IX, column (A), line 27 if Yes, "complete Schedule I, Parts I and III. Did the organization answer Yes' to Parl 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 A and III. 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 25a. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization mixed any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization mantain 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? Section 501(c)(3) and 501(c)(4) organizations. Did the organization any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did 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 with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization provide any of the organization provide and prior the propriets of the pr			
á	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV.	28b		х
(
29		· 28c	х	Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	. 29	^	
		. 30		X
31		. 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	. 32		Х
33		. 33	х	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	. 34	х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		Х	
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled		х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		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 federal income tax purposes? If 'Yes,' complete Schedule R. Part VI	. 37		x

BAA Form **990** (2013) Form 990 (2013) University of New Orleans Foundation

Pan V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	•	• •	·
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
t	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a	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 2.0			
t	o If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	olf 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		х
Ŀ	o if 'Yes,' enter the name of the foreign country'			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
e -	Does the erganization have enough gross receipts that are normally greater than \$100,000, and did the erganization			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	I Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
t	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 с		х
c	I If 'Yes,' indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		_X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
٤	g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ŀ	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9 a		
t	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter		·	
a	Initiation fees and capital contributions included on Part VIII, line 12			
k	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
t	O Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
t	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance Issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O	تحي		
ŧ	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			
	Enter the amount of reserves on hand	4		
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a	\longrightarrow	Х
t	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Form 990 (2013) University of New Orleans Foundation 72-1051326

Sec	ction A. Governing Body and Management			
			Yes	No
1 :	a Enter the number of voting members of the governing body at the end of the tax year		;	.,
	b Enter the number of voting members included in line 1a, above, who are independent			
2	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?	١		1,,
_	'	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
ь -	Did the organization have members or stockholders?	6		X
7 3	members of the governing body?	7 a		x
		/ a		<u> </u>
ı	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	the following			
	a The governing body?	8 a	X	
	b Each committee with authority to act on behalf of the governing body?	8 b	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		х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode))
			Yes	No
10	a Did the organization have local chapters, branches, or affiliates?	10 a		X
ı	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
11:	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		х
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	
•	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13		Х
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?	,		
		45-	Х	
	a The organization's CEO, Executive Director, or top management official	15 a		
	b Other officers of key employees of the organization	130		
	· · · · · · · · · · · · · · · · · · ·			
16	a 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
1	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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sed	ction C. Disclosure			
17				
18				
	X Own website			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year	ole to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	on		
	Andrew O. Pitman 2021 Lakeshore Drive STE 420 New Orleans LA 70122 (5	04)	280-	2800
BAA				2013)

Form 990 (2013) University of New Orleans Foundation	72-1051326	Page
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highes Independent Contractors	st Compensated Employe	es, and
Check if Schedule O contains a response or note to any line in this Part VII	<u> </u>	<u> L</u>
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compens	ated Employees	

- 1 a 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

Check this box if neither the organiza	,		3	(C				,			
(A) Name and Title	(B) Average hours per	one bo	x. unl	not ci	heck erson	more that is both a r/trustee	an I	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Tracie Boutte	0.00								-		
Board Member		Х						0.	0.	0	
(2) Raymond Brandt	0.00										
Board Member		Х						0.	0.	0	
(3) Allan Colley	0.00										
Board Member		Х						0.	0.	0	
(4) Ralph Cox	0.00									•	
Board Treasurer		х		х				0.	0.	0	
(5) Darryl D'Aquin	0.00										
Board Member	7	х						0.	0.	0	
(6) Joseph Exnicios	0.00										
Board Chair		х		х				0.	0.	0	
(7) Michael Flick	0.00										
Board Member		х						0.	0.	0	
(8) Peter Fos	0.00										
Board Member		х						0.	364,957.	97,126	
(9) Susan Geogheghan	0.00										
Board Member		х						0.	0.	0	
(10) Brian Glorioso	0.00										
Board Member		х						o.	0.	0	
(11) Susan Hess	0.00										
Board Member		x						0.	0.	0	
(12) William Hines	0.00				_						
Board Member		x						0.	0.	0	
(13) James Hudson	0.00										
Board Member	7	x						0.	0.	0	
(14) Arnold Kirschman	0.00										
Board Member		x						0.	0.	0	

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
	(B)			(0	C)					
(A) Name and title	Average hours per	box	, unle:	heck ss pe	rson i	than o	an	(D) Reportable	(E) Reportable	(F) Estimated
	week (list any hours for related organiza - tions below dotted line)	gr director		Officer		employee employee	<u> </u>	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15) Thomas Kitchen	0.00	x						_		
Board Member		-	\vdash			<u> </u>	╁	0.	0	. 0.
(16) Michael Laufer	0.00	1								
Board Member		X	$\vdash\vdash$			<u> </u>	⊢	0.	0	. 0.
(17) Barry LeBlanc	0.00	1		٠,,						
First Vice Chair	ļ. <u></u>	X	Н	Х		<u> </u>	-	0.	0	. 0.
(18) Ellen Lee	0.00	1								
Secretary		Х		X	<u> </u>	<u> </u>	<u> </u>	0.	0	. 0.
(19) Diana Lewis	0.00					1				
Board Member		Х	Ш		<u> </u>	.	╙	0.	0	. 0.
(20) Carla Major	0.00	1			ĺ					
Board Member		X			<u> </u>	<u> </u>	<u> </u>	0.	0	. 0.
(21) Alvin Merlin	0.00	1								
Board Member	ļ	Х	Ш		_	↓	<u> </u>	0.	0	. 0.
(22) Peter Quirk	0.00	ı			ł					
Board Member	1	X			ļ	 		0.	0	. 0.
(23) Gregory Rigamer	0.00	1								
Board Member	<u> </u>	X			ļ		┡	0.	0	. 0.
(24) Ashton Ryan	0.00	1								
Board Member		Х	Щ		ļ	<u> </u>	ļ	0.	0	. 0.
(25) Norma Jane Sabiston	0.00									
Board Member		X			L_	<u> </u>	Ļ	0.	0	
1 b Sub-total			٠.	٠.	٠.	• •		0.	364,957	
c Total from continuation sheets to Part VII, Section								191,933.	241,711	T T
d Total (add lines 1b and 1c)							_	191,933.	606,668	
2 Total number of individuals (including but not limited from the organization ► 0	to those	listed	abo	ove)	who	rece	eive	d more than \$100,0	000 of reportable o	
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such ind								st compensated en		Yes No
4 For any individual listed on line 1a, is the sum of reporting organization and related organizations greater the such individual	ortable co an \$150,	mpe	nsat <i>If "</i> Y	ion 'es'	and com	plete	r col	mpensation from hedule J for		4 X
5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' cor										5 X
Section B. Independent Contractors										
Complete this table for your five highest compensated compensation from the organization. Report compensation.	d indepe	nden	t cor	ntrad	ctors	that	rec	eived more than \$'	100,000 of organization's tax	vear
(A)	Salionio	ille	Calc	ilua	ı ye.	ai Gii	unig	(B)		(C)
Name and business addres								Description of	f services	Compensation
Mi Research & Technology Foundation 2021 Lakeshore Drive N								Administrati		373,999.
Courseault Commercial Inc 6305 Elysian Fields Ave N								Construction	on	1,082,003.
Taylor, Porter, Brooks & Philips, & PP. O Box 2471 B	aton	коu	ge	LР	<u> </u>	/08	21	Legal		106,888.
								 		
2 Total number of independent contractors (including b	ut not lin	nted	to th	1066	liete	ad ab	00/6) who received mo	re than	
\$100,000 of companyation from the organization		แเรน	.0 11	.036	. note	Ju al		, who received into	. o aran	

				New	Orleans Four	ndation		72-1051326	Page
₽ක	íî M∣	Statement of Re	venue						
		Check if Schedule O	contains a	respo	nse or note to any li	ne in this Part VIII			[
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
\$ 10	1 a	Federated campaigns .		1 a	-				
ΑŘ	h	Membership dues		1 b					
유를		Fundraising events		1 c					
TS.	4	Related organizations		1 d					
₽₹	u	_			200,000.				
S S	е	Government grants (contribut	ions) .	1 e	1,242,013.				
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, g similar amounts not included		1 f	9,327,269.				
¥ 5	g	Noncash contributions include							
SA	h	Total. Add lines 1a-1f .				10,769,282.		a.	1
画					Business Code			. .	;
VEN	2 a	Nims_Center_Re	ntal		611710	791,002.	791,002.	0.	0
몶	ь	Service Fees	TEL _		611710	1,315,947.	1,315,947.	0.	0
Ę,	С	Seminars/Progr				137,412.	137,412.	0.	0
-8	Ь	Membership Due			611710	1,695.	1,695.	0.	0
ĭS					611710				
ЖA	•	Book & T-Shirt All other program service			611/10	17,114.	17,114.	0.	0
စ္ထ	'	Total. Add lines 2a-2f	e i evenue			0.	0.	0.	0
_				• •		2,263,170.	L	il .	ι .
	3	other similar amounts) Income from investment of tax-exe			ond proceeds · . ▶	1,300,233.	1,267,945.	0.	92,294
	5	Royalties				25,762.	25,762.	0.	0
	_		(ı) Re		(II) Personal				
		Gross rents							
		Less rental expenses							
	С	Rental income or (loss)	L						
	d Net rental income or (loss)								
	7 a	7 a Gross amount from sales of (i) Securities		(II) Other		r		,	
		assets other than inventory Less cost or other basis	2,541,	871	. 2,225,000.				
		and sales expenses			426,706.				
					. 1,798,294.				
	a	Net gain or (loss)		• • •		4,340,165.	2,316,691.	0.	2,023,474
ENUE	8 a	Gross income from funda (not including. \$							
OTHER REVEI		of contributions reported		•					
띪		See Part IV, line 18							
둙		Less direct expenses .			b				
	С	Net income or (loss) from	n fundraisi	ing ev	en <u>ts ▶</u>		L.		_
		Gross income from game See Part IV, line 19			а				
		Less direct expenses			b				
	С	Net income or (loss) from	n gamıng a	actıvıtı	es ≻				
	10 a	Gross sales of inventory and allowances			а		-		
	ь	Less cost of goods sold			b				
		Net income or (loss) from							
	<u>_</u>	Miscellaneous Revenu			Business Code				
	11 a								
	b				· · · · · · · · · · · · · · · · · · ·	-		 	
	_				· · · ·			 	
	ن د	All other revenue						 	
		Total. Add lines 11a-11d			<u> </u>				
	e	TOTAL AUGUMES 118-110							

5,873,568

Pa元以 Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a res	ponse or note to any lin	e in this Part IX	• • • • • • • • • • • • •	
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	10,090,096.	10,090,096.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	,		الد الد	
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		-	السال السال	
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	162,639.	126,148.	36,491.	0.
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	310,995.	245,043.	65,952.	0.
	Pension plan accruals and contributions	310,333,	245,045.	03,332.	<u> </u>
	(include section 401(k) and 403(b) employer contributions)	16,471.	10,638.	5,833.	0.
9	Other employee benefits	30,809.	23,401.	7,408.	0.
10	Payroll taxes	36,506.	22,705.	13,801.	0.
11	Fees for services (non-employees)				
á	Management	1,080,703.	706,703.	374,000.	0.
ı	Legal	210,801.	71,031.	139,770.	0.
	Accounting	37,500.	0.	37,500.	0.
,	Lobbying	41,664.	41,664.	0.	0.
	Professional fundraising services See Part IV, line 17	7,313.	11,001.	<u> </u>	7,313.
f	Investment management fees	301,198.	301,198.	0.	0.
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,153,758.	662,865.	4,812.	486,081.
12	Advertising and promotion	19,183.	18,823.	0.	360.
13	Office expenses	370,658.	287,679.	34,335.	48,644.
14	Information technology	34,284.	0.	0.	34,284.
15	Royalties				
16	Occupancy	143,420.	143,420.	0.	0.
17	Travel	237,759.	234,647.	255.	2,857.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		·		
19	Conferences, conventions, and meetings	353,428.	312,295.	2,403.	38,730.
20	Interest	37,112.	0,	37,112.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	364,411.	243,615.	120,796.	0.
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	Allowance for Doubtful Pledges	-67.825.	-67,825.	0.	0.
	Annuity Payments	116,228	116,228.		0.
	Miscellaneous Operating	109,272.	109,272.	0.	0.
c					
6	All other expenses	0.	0.	0.	0.
25	Total functional expenses. Add lines 1 through 24e .	15,198,383.	13,699,646.	880,468.	618,269.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
BAA		TEFA0110 11/0		<u></u>	Form 990 (2013)

		Check if Schedule O contains a response or note to any line in this Part X			
		,	(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		1	
	2	Savings and temporary cash investments	5,560,699.	2	4,964,917.
	3	Pledges and grants receivable, net	957,998.	3	632,923.
	4	Accounts receivable, net	4,801,710.	4	828,041.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete			
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
A	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use	12,650.	8	0.
T S	9	Prepaid expenses and deferred charges	24,787.	9	41,160.
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	h	Less accumulated depreciation 10b 3,020,608.	11,877,863.	10 c	12,159,946.
	11	Investments — publicly traded securities	64,196,605.	11	79,475,584.
	12	Investments — other securities See Part IV, line 11	04,130,003.	12	79,475,564.
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	125,201.	15	108,523.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	87,557,513.	16	98,211,094.
	17	Accounts payable and accrued expenses	2,684,329.	17	2,968,422.
	18	Grants payable		18	2/200/122
	19	Deferred revenue	2,547.	19	0.
L	20	Tax-exempt bond liabilities	698,000.	20	537,000.
I A	21	Escrow or custodial account liability Complete Part IV of Schedule D	···	21	
AB I L I	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
Ţ	23	Secured mortgages and notes payable to unrelated third parties		23	
S	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	19,312,681.	25	23,939,009.
	26	Total liabilities. Add lines 17 through 25	22,697,557.	26	27,444,431.
E E		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete			
		lines 27 through 29, and lines 33 and 34.			
S S	27	Unrestricted net assets	13,383,402.	27	16,996,381.
Ĕ	28	Temporarily restricted net assets	22,318,796.	28	24,425,272.
	29	Permanently restricted net assets	29,157,758.	29	29,345,010.
R F		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
FUZD	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ę	32	Retained earnings, endowment, accumulated income, or other funds		32	
B4L420Eの	33	Total net assets or fund balances	64,859,956.	33	70,766,663.
Ĕ	34	Total liabilities and net assets/fund balances	87,557,513.	34	98,211,094.
ВА	A				Form 990 (2013)

Forn	n 990 (2013) University of New Orleans Foundation	1051326	i	Pag	je 12
Pa	Reconciliation of Net Assets				_
	one of the content of				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,75	8,6	18.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,19	8,38	<u>33.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	3,56	0,2	<u> 35.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	64,85	9,9	<u> 56.</u>
5	Net unrealized gains (losses) on investments	5	2,34	6,4	72.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	70,76	6,6	<u>53.</u>
Po	Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u>.</u>		· · ·	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		i ii		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both	l			
	Separate basis Consolidated basis Both consolidated and separate basis				
1	b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auc review, or compilation of its financial statements and selection of an independent accountant?	lit, 	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a	х	
1	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	X	
BAA	•		Form 9	990 (2	013)

· Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the Organization

Employler Identification number

University of New Orleans Foundation

72-1051326

Rank Continuation: Officers, Directors, Trustees, Key Employees, and **Highest Compensated Employees** (A) (C) (D) (E) (F) (B) Position (check all that apply) Reportable compensation from related organizations (W-2/1099-MISC) Name and Title Reportable compensation from Estimated amount of other Average hours per week Individual trustee or director Officer employee Highest compensated nstitutional (ey employee the organization (W-2/1099-MISC) compensation from the (list any hours for related organization and related organizations trustee organiza-tions below dotted line) 26 Michael Sapera 0.00 Board Member X 0. 0. 0. 27 Robert Savoie 0.00 Х 0. Ο. 0. Second Vice Chair Х 28 Gary Solomon 0.00 Board Member Х 0. 0. 0. 29 James Tucker _ 0.00 Х 0. Ο. 0. Board Member 0.00 30 Anthony Gregorio CEO/President Х Х 0. 127,432. 32,576. 0.00 31 Gregg Lassen Х 0. 36,173. Board Member 114,279 _32 Michael Achary _ 0.00 Board Member X 0. 0. 0. 33 Kevin Conrad 0.00 Ο. Х 0 0. Board Member 34 George Chin 0.00 0. Board Member 0. 0. _35_Eileen_Byrne__ 40.00 CFO <u>96,6</u>95. 0. X 25,102. 36 Pat Gibbs 40.00 Х 0. CEO/President Х 95,238. 2,432.

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

ज्यान्यस्थात् ज्यानस्थात् Employer identification number

	iversity of New O								<u>)51326</u>			
Pa	Reason for Publ	ic Charity Status	s (All organizations	must c	omplet	e this p	art.) S	ee inst	ruction	S.		
The	organization is not a private	foundation because i	t is (For lines 1 through	11, chec	k only o	ne box)						
1	A church, convention	of churches or associa	ation of churches describ	oed in se	ction 17	0(b)(1)(A	۹)(i).					
2	A school described in	section 170(b)(1)(A)((ii). (Attach Schedule E))								
3	A hospital or a cooper	ative hospital service	organization described i	n sectio i	n 170(b)	(1)(A)(iii).					
4	A medical research or	ganization operated in	n conjunction with a hosp	oital desc	ribed in	section	170(b)(1)(A)(iii)	Enter th	ne hospital's		
	name, city, and state	•					`			•		
5			college or university ow	ned or o	perated	by a gov	ernmen	tal unit d	escribed	ın section	. – – – -	
6	A federal, state, or loc	al government or gove	emmental unit described	ın secti	on 170(l	o)(1)(A)(v).					
7	An organization that no in section 170(b)(1)(A		bstantial part of its suppo t II)	ort from a	governi	mental u	nit or fro	om the ge	neral pu	iblic describ	ed	
8	A community trust des	cribed in section 170	(b)(1)(A)(vi). (Complete	Part II)								
9	from activities related investment income an	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
10	An organization organ	ized and operated exc	clusively to test for public	safety :	See sec	tion 509	(a)(4).					
11	more publicly supporte	ed organizations desci	clusively for the benefit on the din section 509(a)(1 n and complete lines 11) or secti	on 509(a							
	a Type I b	Type II c	X Type III - Function	nally integ	grated	(j] -	Type III -	- Non-fu	nctionally in	tegrated	
•	By checking this box, lother than foundation section 509(a)(2)	I certify that the organ managers and other t	ization is not controlled on the controlled of the controlled of the controlled on t	directly o	r indirect ed orgar	tly by one	e or mor describ	e disqua ed in sec	lified per tion 509	rsons (a)(1) or		
f	If the organization rece		ination from the IRS tha			e II or Ty	pe III su	pporting	organiza	ation,		
ç			accepted any gift or co			ny of the	followir	ng persor	ıs?			_
	(I) A paraon who di	rooth, or undersoth, com	trols, either alone or tog	othor wet	h noroon	a decem	had in (ii	and (m)	1		Yes 1	<u> 04</u>
			orted organization?							. 11 g (l)		X
	(ii) A family membe	r of a person describe	ed in (i) above?							. 11g (ii)		X
	(iii) A 35% controlled	d entity of a person de	escribed in (i) or (ii) abov	e?						· 11 g (iii)		<u></u>
ŀ	Provide the following is	nformation about the	supported organization(s	s)						1.8(/		
	(i) Name of supported organization	(u) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	your go	ation in) listed in	(v) Did yo the organi column (i) supp	zation in of your	(vi) Is organiza colum organizad U S	ition in n (i) I in the	(vii) Amount sup		<u>у</u>
				Yes	No	Yes	No	Yes	No			
(A)	University of New Orleans	72-0702000	2	х		х		x		12 6	99,640	
(// /	OUTACIBITA OF MEM OFFERING	12-0102000		+ ^	1		 	-		13,6	J J , 041	<u>.</u>
(B)										-		
(C)												
												_
(D)												_
(E)						10						
Tota	ı				il il			ı:		13.6	99,64	6.

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

Schedule A (Form 990 or 990-EZ) 2013

Partill 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	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		_				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4	•	, 		:		
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10			· !	, ,		
12	Gross receipts from related activiti	es, etc (see instruc	ctions)			12	
13	First five years. If the Form 990 is organization, check this box and s						▶ []
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 201	3 (line 6, column (f) divided by line 11	l, column (f))		14	
15	Public support percentage from 20	012 Schedule A, Pa	art II, line 14			15	%_
16 a	33-1/3% support test $-$ 2013. If and stop here. The organization of						
t	33-1/3% support test — 2012. If t and stop here. The organization of						
17 a	10%-facts-and-circumstances to or more, and if the organization methe organization meets the 'facts-a	eets the 'facts-and-	circumstances' tes	st, check this box a	ind stop here. Exp	lain in Part IV hov	v —
t	10%-facts-and-circumstances to or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-and-	-circumstances' tes	st, check this box a	and stop here. Exp	lain in Part IV hov	v the
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	and see instruction	ons ▶ []
				_			

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

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

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	1	(f) Total
	Gifts, grants, contributions	(4) 2005	(B) 2010	(0) 20	(u) 2012	(e) 2013	'	(i) Total
	and membership fees							
	received (Do not include any 'unusual grants')					ŀ	ŀ	
2	Gross receipts from admis-	-					•	
	sions, merchandise sold or							
	services performed, or facilities furnished in any activity that is						i	
	related to the organization's							
_	tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade							
	or business under section 513 .							
4	Tax revenues levied for the					<u> </u>		·
	organization's benefit and							
	either paid to or expended on its behalf					1		
5	The value of services or					ł	_	
	facilities furnished by a governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5							
	Amounts included on lines 1,					 	-	
	2, and 3 received from							
	disqualified persons	<u> </u>						
	Amounts included on lines 2 and 3 received from other than							
	disqualified persons that							
	exceed the greater of \$5,000 or							
	1% of the amount on line 13 for the year							
c	Add lines 7a and 7b							
8	Public support (Subtract line							
Ŭ	7c from line 6)				L .	L.		
Sec	tion B. Total Support							
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	3	(f) Total
α								
3	Amounts from line 6	[
	Gross income from interest,							·
	Gross income from interest, dividends, payments received							
	Gross income from interest,							·
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	s for the organization here	on's first, second, t	hird, fourth, or fifth	tax year as a sec	tion 501(c)(3)		
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			hird, fourth, or fifth	tax year as a sec	tion 501(c)(3)		
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P	ercentage			tion 501(c)(3)	15	▶ □
10 a b c 11 12 13 14 Sec 15	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f)	ercentage) divided by line 13	, column (f))				▶ □
10 a b c 11 12 13 14 Sec 15 16 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 012 Schedule A, Pa restment Incon	ercentage) divided by line 13 art III, line 15 ne Percentage	s, column (f))			15	
10 a b c 11 12 13 14 Sec 15 16 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 012 Schedule A, Pa restment Incon	ercentage) divided by line 13 art III, line 15 ne Percentage	s, column (f))			15	
10 a b c 11 12 13 14 Sec 15 16 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 012 Schedule A, Pa restment Incon 2013 (line 10c, col	ercentage) divided by line 13 art III, line 15 ne Percentage lumn (f) divided by	i, column (f)))		15 16	8
10 a b c 11 12 13 14 Sec 15 16 Sec 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 12 Schedule A, Pa restment Incor 2013 (line 10c, column 2012 Schedule A the organization di	ercentage) divided by line 13 art III, line 15 ne Percentage lumn (f) divided by A, Part III, line 17 id not check the bo	i, column (f)) interest in the column (f)	i)		15 16 17 18	90 90
10 a b 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 212 Schedule A, Pa restment Incor 2013 (line 10c, colum 2012 Schedule A the organization di his box and stop his	ercentage) divided by line 13 art III, line 15 ne Percentage lumn (f) divided by A, Part III, line 17 id not check the boere. The organizat	s, column (f)) in the first column (f) in the first column (f) ox on line 14, and ling on qualifies as a p	n)		15 16 17 18 ad line	% % %
10 a b 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 012 Schedule A, Pa restment Incom 2013 (line 10c, column 2012 Schedule A the organization dinis box and stop he the organization di	ercentage) divided by line 13 art III, line 15 ne Percentage lumn (f) divided by A, Part III, line 17 id not check the boere. The organization of check a box	i, column (f)) line 13, column (f) ox on line 14, and li	ine 15 is more tha	n 33-1/3%, an	15 16 17 18 18 1/3%	% % %
10 a b c 11 12 13 14 15 16 Sec 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	blic Support P 3 (line 8, column (f) 12 Schedule A, Pa restment Incor 2013 (line 10c, column 2012 Schedule A the organization di the organization di the organization di check this box and	ercentage) divided by line 13 art III, line 15 ne Percentage lumn (f) divided by A, Part III, line 17 id not check the boere. The organizate id not check a box stop here. The or	i, column (f)) iline 13, column (f) ine 14, and line 14 or line 14 or line 1	ine 15 is more tha bublicly supported 19a, and line 16 is s as a publicly sup	n 33-1/3%, an organization more than 33-ported organi.	15 16 17 18 ad line -1/3% zation	% % %

Şchedule A	(Form 990 or 990-EZ) 2013	University of	New Orleans	Foundation	72-1051326	Page 4
Pent IV	Supplemental Informat or 17b; and Part III, line (See instructions).	ion. Provide the ex 12. Also complete the	oplanations required this part for any a	ured by Part II, line 10 additional information), Part II, line 17a	
						-, -, -, -,
						-
			-			
	. – – – – – – – – – – – – – – – – – – –	·				
- -						
-						

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2013

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Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

 Part II-A

 On the Part II-B Do not complete Part II-B

 On the Par

	e organization answered 'Yes, Section 501(c)(4), (5), or (6) orga	' to Form 990, Part IV, line 5 (Proxy Tax) of anyations. Complete Part III	r Form 990-EZ, Part V	/, Ilne 35c (Proxy Tax),	then
	of organization	anizationo Compieto Carem		Employer identifica	ation number
IIn i	versity of New Orl	eans Foundation		72-105132	6
Pai	Complete if the or	rganization is exempt under section	on 501(c) or is a	section 527 organi	zation.
		ganization's direct and indirect political campa			
					▶
		rganization is exempt under section			
1	Enter the amount of any excis-	e tax incurred by the organization under secti	on 4955	▶ \$	
		e tax incurred by organization managers unde			
3	If the organization incurred a s	ection 4955 tax, did it file Form 4720 for this	year?		· · · Yes No
4 a	a Was a correction made?				Yes No
	o If 'Yes,' describe in Part IV				
Par		rganization is exempt under section			
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function acti	vities ▶ \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other orga	nizations for section 52	27 exempt 	
3	Total exempt function expendine 17b	tures Add lines 1 and 2 Enter here and on F	form 1120-POL,	▶\$	
4		Form 1120-POL for this year?			
5	organization made payments	nd employer identification number (EIN) of al For each organization listed, enter the amous is received that were promptly and directly de action committee (PAC) If additional space is	nt paid from the filing o	irganization's funds. Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 20	13 _{IIniversity}	of New Orleans	loundation	72-105	1326 Page 2
Complete if section 501	the organization	on is exempt under se	ection 501(c)(3) and	d filed Form 5768 (
	· · · · · · · · · · · · · · · · · · ·	ngs to an affiliated group (an	d list in Part IV each affili	ated group member's na	me,
	• -	I share of excess lobbying e		3 г	,
		ked box A and 'limited contro	• •		
<u> </u>	Limits on Lobby	ring Expenditures ans amounts paid or incur		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence publ	lic opinion (grass roots lobby	/ing)		
b Total lobbying expenditu	res to influence a leg	gislative body (direct lobbyin	g)		
c Total lobbying expenditu	res (add lines 1a an	d 1b)			
d Other exempt purpose e	xpenditures				·-·
e Total exempt purpose ex	penditures (add line	s 1c and 1d)			
		unt from the following table			
If the amount on line 1e, col		The lobbying nontaxable			
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the exces	s over \$500,000		
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the exces	s over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% o	f line 1f)			
h Subtract line 1g from line	1a If zero or less,	enter -0			
I Subtract line 1f from line	1c If zero or less, e	nter -0			
		er line 1h or line 1i, did the o			Yes No
(Som	e organizations tha	4-Year Averaging Period l at made a section 501(h) e ns below. See the instruct	lection do not have to c		
	Lobi	bying Expenditures During	g 4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))	; ;	11 11 11	.i	A	
c Total lobbying expenditures		-			
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	ı.	л.	ــــــــــــــــــــــــــــــــــــــ	at .	

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013University of New Orleans Foundation 72-1051326

[PanylliB] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	, ,		
a Volunteers?		Х	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u>x</u>	
c Media advertisements?		х	
d Mailings to members, legislators, or the public?		x	
e Publications, or published or broadcast statements?		x	
f Grants to other organizations for lobbying purposes?		х	-
g Direct contact with legislators, their staffs, government officials, or a legislative body?		x	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		x	
i Other activities?	х		119,414.
j Total Add lines 1c through 1i			119,414.
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	127/1211
b If 'Yes,' enter the amount of any tax incurred under section 4912	-		
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.	ή 		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			
Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Fanswered 'Yes.'	(c)(5) Part II	, or s I-A, l	ection 501(c) ine 3, is
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			· · · · · ·
a Current year		2 a	
b Carryover from last year		2 b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	5	
Partiv Supplemental Information			
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); Part II-B, line 1. Also, complete this part for any additional information	art II-A	, line 2	, and
Pt_II-B_Line_1 _ Paid_Lobbyists_to_influence_legislation_and_executive	ve b	<u>odie</u>	<u>s</u>
on_behalf_of_the_University_of_New_Orleans			

Schedule C (Form 990 or 990-EZ) 2013 University of New Orleans Foundation	72-1051326	Page 4
Partive Supplemental Information (continued)		

		 -

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,

Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

University of New Orleans Foundation 72-1051326 Partil Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 2 Aggregate contributions to (during year) . . . Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Partill Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2 a a Total number of conservation easements. 2 b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? . . In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (II) Assets included in Form 990, Part X . . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items **b** Assets included in Form 990, Part X

Schedule D (Form 990) 2013 $Unive$	ersity of Nev	Orleans Fo	undation	72-105	1326	Page 2
Part III Organizations Mainta	ining Collection	s of Art, Histo	rical Treasures, or	Other Similar Ass	ets (contin	ued)
3 Using the organization's acquisition	n. accession, and oth	er records, check a	any of the following that a	are a significant use of its	collection	
items (check all that apply)	ii, accession, and on		any or the following that t	are a significant ase of ite	00110011011	
a X Public exhibition		d X Loan o	r exchange programs			
b X Scholarly research		e Other				
c X Preservation for future genera	tions					
4 Provide a description of the organi	zation's collections a	nd explain how they	y further the organization	i's exempt purpose in		
5 During the year, did the organization	on solicit or receive d	onations of art, hist	orical treasures, or other	r sımılar assets	_	_
to be sold to raise funds rather tha	n to be maintained a:	s part of the organiz	zation's collection?		Yes	X No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangements mount on Form 9	. Complete if th 90, Part X, line	e organization ansv 21.	vered 'Yes' to Form	990, Part I'	V ,
1 a Is the organization an agent, truste				ets not included	7v	
·	Dort VIII and sample				Yes	∐ No
b If 'Yes,' explain the arrangement in	Part XIII and comple	ete the following tab	ne		A 4	
a Dagungung balanga					Amount	
c Beginning balance				1 c		
d Additions during the year				· 1d		
e Distributions during the year				. 1e		
f Ending balance				. <u> 1f </u>	T.,	
2 a Did the organization include an am					Yes	⊢No
b If 'Yes,' explain the arrangement in	Part XIII Check her	e if the explantion h	ias been provided in Pari	t XIII	• •	
Do-t VA Fraderina Const. Const. C	·		ward Waalda Farra	000 D-+ IV C 40		
Part Vall Endowment Funds. C					T	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four yea	
1 a Beginning of year balance	62,536,795	 			43,300	
b Contributions	4,271,233	276,58	37. 113,233	2,270,681.	2,919	<u>,719.</u>
c Net investment earnings, gains,	7 004 201	6 342 5	1 010 100	0 405 540	F 001	470
and losses	7,804,321			- 	+	,473.
d Grants or scholarships	161,920	166,30	05. 147,781	77,223.	24	<u>,351.</u>
e Other expenditures for facilities and programs	1,783,238	1,251,28	678,049	708,936.	468	,078.
f Administrative expenses	808,477	769,99	8. 376,443	723,400.		,659.
g End of year balance	71,858,714	· ·			50,917	
2 Provide the estimated percentage				.,,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , ,	,,,,,,,
a Board designated or quasi-endowr		5.41 %	(-),			
b Permanent endowment ►	59.09 %	3.11 -				
c Temporarily restricted endowment		5 n %				
The percentages in lines 2a, 2b, ar						
•	•					
3 a Are there endowment funds not in organization by	the possession of the	organization that a	are held and administere	d for the	Yes	No
(i) unrelated organizations					3a(ı)	+
(") 1 ()						X
b If 'Yes' to 3a(II), are the related org					3a(ii)	<u> </u>
4 Describe in Part XIII the intended u		•			30	
		on's endowment ful	ius			
Part.VI Land, Buildings, and Complete if the organiz		Yes' to Form 99	0. Part IV. line 11a	See Form 990 Pa	rt X line 10)
Description of property		-				
Description of property		st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	aiue
1 a Land		249,136.	1,018,300.	en e	1,267	,436.
b Buildings		4,503,191.	9,023,375.	2,672,779.	10,853	
c Leasehold improvements						
d Equipment			386,552.	347,829.	38	3,723.
e Other						
Total. Add lines 1a through 1e (Column	(d) must equal Form	990, Part X, colum	n (B), line 10(c))		12,159	. 946
BAA	· -				le D (Form 99	

BAA

PartVIII Investments — Other Securities.	'Voc' to Form 000 Pr	art IV line 11h See Form 000 Pe	rt V lina 12
Complete if the organization answered (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-ye	
(1) Financial derivatives	· · · · · · · · · · · · · · · · · · ·	(-,	
(2) Closely-held equity interests	<u> </u>		
(2) Other	- · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
(A)			
(B)			
(C)			
(D)			
(E)			
			
(F) (G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12) Part VIII Investments — Program Related.]		
Complete if the organization answered	Yes' to Form 990. Pa	art IV. line 11c. See Form 990. Pai	t X. line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-	
(1)	, ,		<u> </u>
(2)			
(3)			
(4)			
(5)		* * · · · · · · · · · · · · · · · · · ·	
(6)			
(7)		· · · · · · · · · · · · · · · · · · ·	, <u>.</u>
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) . ▶			
Part X Other Assets.		ند. چېرېرېر پېم اخېر ن پېرېختومانانانس بېناخېرىن يې ښار پېرې . د	
Complete if the organization answered '	Yes' to Form 990, Pa	art IV, line 11d See Form 990, Pai	
	scription		(b) Book value
(1)	····		
(2)			
(3)			
(4) (5)			
<u>(6)</u> (7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B),	line 15)		
Part X Other Liabilities.			
Complete if the organization answered 'Yes' to F	orm 990. Part IV. line 11e	e or 11f. See Form 990. Part X. line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) Funds Invested for Others	23,297,881	<u>1</u>	
(3) Funds due to Affiliates	641,128	3.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	► 23,939,009		· · · · · · · ·
	note to the organization's financ		

Complete if the organization answered 'Yes' to Form 990, Part			turn.	
1 Total revenue, gains, and other support per audited financial statements			1	20,957,635
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a Net unrealized gains on investments	2 a	2,346,445.		
b Donated services and use of facilities	2 b			
c Recoveries of prior year grants	2 c			
d Other (Describe in Part XIII)	2 d	60,000.		
e Add lines 2a through 2d	, .		2 e	2,406,445
3 Subtract line 2e from line 1	: :		3	18,551,190
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	301,198.		
b Other (Describe in Part XIII)	4 b	-93,770.		
c Add lines 4a and 4b			4 c	207,428.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	18,758,618
Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' to Form 990, Part		•	Retur	n.
1 Total expenses and losses per audited financial statements			1	15,050,952
2 Amounts included on line 1 but not on Form 990, Part IX, line 25				
a Donated services and use of facilities	2 a			
b Prior year adjustments	-			
c Other losses	2 c	-		
d Other (Describe in Part XIII)	2 d	59,997.		
e Add lines 2a through 2d			2 e	59,997.
3 Subtract line 2e from line 1			3	14,990,955.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b				
b Other (Describe in Part XIII)	4 a 4 b	301,198. -93,770.		
c Add lines 4a and 4b			4 c	207,428.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	15,198,383.
Pari XIIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete t	/, lines 1 his part	b and 2b; Part V, to provide any additiona	al infor	mation
Pt III Line la Due to the Foundation's policy on ca	<u>apita</u>	lizing art col	<u>lect</u>	<u>ions,</u>
no amount has been recorded in the	<u>finan</u> o	<u>cial statement</u>	<u>s</u>	
related to these gifts.				
Pt_III_Line_4 The_art_collection_is_composed_of_in	ndiyi	dual pieces of		
Southern American Art including scu	lptur	es_and_paintin	gs	_These
pieces_are_used_to_educate,_both_th	<u>rough</u>	the exhibition	<u>n</u>	-
of its collection and through its eq	ducat:	ional programs	_ <u>i_n</u>	cluding
programs for the muhlic set1- to	00	+ba		
programs for the public schools, to	CONV			le D (Form 990) 2013

Schedule D (Form 990) 2013	University of New Orleans Foundation tal Information (continued)	72-1051326 Page	<u>e 5</u>
	of the evolution and continuing development of	the vicual arts	_
			-
	of the American South. The programs are direct	ed toward the	-
	appreciation and development of the visual, gra	phic, and plastic arts,	-
	_arts_administration, and archiving in connection	on with the	-
	_University_of_New_Orleans_College_of_Liberal_Ar	ts	_
Pt_V_Line_4	The endowment funds administered by the Foundat	ion_serve	_
	a myriad of purposes. The primary purpose is t	o support	_
	professors' salary and research expenses. Endo	wments also	_
	provide funds to University departments to prov	ride_additional	
	departmental support. Many endowments also pro	vide scholarships to	
	students to help offset higher education expens	es at the University	
	of New Orleans.		- -
Pt XI Line 4b	Allowance for Doubtful pledges netted against F	ledged Contributions	
Pt_XII_Line_4b	Allowance for Doubtful pledges netted against F	ledged Contributions	_
Pt_XI_Line_2d	Real estate commission fee related to sale of E	uilding	_
Pt_XII_Line_2d	Real estate commission fee related to sale of E	Building	_
Pt_V_Line_1	Investment values includes endowment funds inve	sted_on_behalf_of	_
	the University of New Orleans. See schedule D E	ert_X	
			_
			_
			_
			_
			_
			_

SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

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

2013

OMB No 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Employer identification number

72-1051326

Partil General Information on Grants and Assistance University of New Orleans Foundation

×es 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

° □

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

Partill Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(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
(1) University_of_New_Orleans	72-0702000	501(c)3	404,593.				Scholarships
=ans	72-0702000	501(c)3	6,147,499.				College suppor
ini –	23-7080203	501(c)3	208,472				Program Develo
<u>nter</u> 	80-0398094	501(c)3	2,450,191.				Program Develo
<u>n</u>	72-1479496	501(c)3		879,341.	Воок	Passaqeway	Program Develo
(6)							
<u>π</u>							
1	and government orga	inizations listed in the	line 1 table				4
S Enter total number of other organizations listed in the line 1 table. BAA For Paperwork Reduction Act Notice, see the Instructions for	e, see the Instruction	able		TEEA3901	07/12/13	Schedu	Schedule I (Form 990) (2013)

72-1051326

Schedule I (Form 990) (2013)

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(f) Description of non-cash assistance 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. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information The University of New Orleans Foundation also transfers funds to the University University of New Orleans selects students to receive scholarships. The The University of New Orleans International Alumni Association recieves Method of valuation (book, FMV, appraisal, other) University of New Orleans Foundation provides funds to the University All college support is issued as receipts are submitted and approved Each University Department and/or the financial aid office of the of New Orleans so that the University can award the scholarships. • of New Orleans to support its departments and colleges. funding to support their program and development costs. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Peril 9

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Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered Yes' on Form 990, Part IV, line 23.
Attach to Form 990. See separate instructions.
Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

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Schedule J (Form 990) 2013

Employer identification number

<u>Jn i</u>	iversity of New Orleans Foundation	72-1051326			
الناز	回 Questions Regarding Compensation				
		 _	1	res	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	d in Form 990, Part			
	First-class or charter travel Housing allowance or residence	for personal use			
	Travel for companions Payments for business use of pe	ersonal residence			
	Tax indemnification and gross-up payments Health or social club dues or init	ation fees			
	Discretionary spending account Personal services (e.g., maid, ch	nauffeur, chef)			
ŧ	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding paymereimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain		1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all of trustees, and officers, including 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 CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related establish compensation of the CEO/Executive Director, but explain in Part III	organization's organization to			
	Compensation committee Written employment contract				
	Independent compensation consultant Compensation survey or study				
	Form 990 of other organizations Approval by the board or compe	nsation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing or a related organization a Receive a severance payment or change-of-control payment?	-	4.0		Ů
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4 a	-	<u>X</u>
			4 c	\dashv	<u>X</u>
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part II		40		Â
	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 contingent on the revenues of	mpensation			
	a The organization?		5 a		Х
b	b Any related organization?		5 b		Х
6	·	mpensation			
а	a The organization?		6 a		Х
b	b Any related organization?		6 b		Х
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		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subto the initial contract exception described in Regulations section 53 4958-4(a)(3)? If Yes, describe in Part III	•	8		x
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Resection 53 4958-6(c)?	egulations	9		<u>~</u>

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

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 Schedule J (Form 990) 2013 University of New Orleans Foundation

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

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 columns (D) and (E) amounts for that individual

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	Compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive	(iii) Other reportable	and other deferred	benefits	<u>.</u>	reported as deferred in prior Form 990
+ + + + + + + + + + + + + + + + + + +	9	c	C	C				
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		10	0	ŋ	0	ť	400,044.	
Anthony Gregorio	Ξ	10	10	0	 	0		-0
2 CEO/President	Ξ	125,712.	0.	1,720.	,57	2,444.	165,452.	0.
Gregg Lassen	Ξ	0	0	0		0	 	0 :
3 Board Member	€	4,0	0) 	28,488	0	15	
	Θ							
4	€		 	 		 		
	Θ							
S	Ξ	 	! : : : : : :	 	 	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(i)							
9	(ii)					 		
	(t)							
7	(ii)							
	(<u>i</u>)							
8	<u>(ii)</u>		 	i 	i 			
	(i)			 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1	: :
6	€							
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15	Ξ	-						
9	€ €	1 1 1 1 1 1 1	 		-	1 1 1 1 1 1 1 1 1		
10			- 1					
ВАА			IEEA4102 07/08/13	2			Schedule J	Schedule J (Form 990) 2013

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

describe in Part II

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

Name of the organization

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV. lines 29 or 30.

► Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

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Schedule M (Form 990) 2013

Employer identification number

University of New Orleans Foundation 72-1051326 Types of Property (b) Number of (a) Check if (c)
Noncash contribution (d) Method of determining contributions or amounts reported applicable noncash contribution amounts items contributed on Form 990, Part VIII, line 1g Art — Works of art Art - Fractional interests 5 Clothing and household goods Cars and other vehicles Х 6 Estimated Cost 8 q Х 300 20,885. FMV Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests. . 11 Securities - Miscellaneous 12 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other . . . 14 Real estate - Residential. 15 Real estate - Commercial 16 17 18 19 Drugs and medical supplies . . 20 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 Х 25 204 Estimated cost (Hotel Room stays X 26 Other ► (Octane XR6 Seated Elliptical Machine) . 1,800 Estimated cost 27 Other ► 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30 a h If 'Yes,' describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32 a h If 'Yes.' describe in Part I 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

TEEA4602 06/27/13

72-1051326

Schedule M (Form 990) 2013

Page 2

Schedule M (Form 990) 2013 University of New Orleans Foundation

BAA

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

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Employer Identification number

University of New	Orleans Foundation	72-1051326
Pt_VI, Line 2	_Carla Major, Board Member, and Tracie Boutee, Bo	pard Member
	are sisters and both are voting members of the g	overning body.
Pt_VI, Line 11b_	The form 990 is prepared in-house and reviewed b	y the University
	of New Orleans Foundation President/CEO and a co	py is provided to the
	Board Treasurer.	
Pt_VI,_Line_12c_	All Board members sign a policy statement annual	lyAdditionally,
	the Foundation verifies ownership of entities pri	or to signing contracts.
Pt_VI,_Line_15a_	Compensation is arranged based upon salary stati	stics
	of comparable organizations within the geographi	c region.
Pt_VI,_Line_15b_	_Compensation is arranged based upon salary stati	stics
	of comparable organizations within the geographi	c region.
Pt_VI, Line 19	All governing documents and policies are availab	le upon request.
Pt_VI,_Line_19	The Foundation's audited financial statements ma	y be
	accessed through the Foundation's website.	
Pt I, Line 1	the University's curricula, programs, and facilities	s so as to provide greater
	_educational_advantages_and_opportunities,_and_increase	the University's benefits
	to the citizens of the State of Louisiana and the	United States of America.
Pt_III, Line_4d_	The UNO Foundation provides support to the University	rsity's
	President's office for donor cultivation, facult	y & staff
	development, travel expenses, and official funct	ions.
	The Foundation also supports other Not-For-Profi	t organizations
	created to support the University of New Orleans	, including,
	but not limited to, the University of New Orlean	s Alumni
	Association and the Privateer Athletic Foundation	n.
Sch D Pt X	Funds Invested for OthersThe UNO Foundation, a	s part of
	its support of the University of New Orleans in	wests

Schedule O (Form 990 or 990	0-EZ) 2013	Page 2
Name of the organization		Employer identification number
University of New	Orleans Foundation	72-1051326
	_University_fundsThe investment_earnings_are	
	used to support the hiring, retention, research,	and
	professional development of University professor	s
Page 7, Part VII	Upon retirement, Pat Gibbs was succeeded by Anth	nony Gregorio.
- - 		
		

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

University of New Orleans Foundation

Related Organizations and Unrelated Partnerships

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

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2013

OMB No 1545-0047

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Employer identification number 72-1051326

Partil Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.	f the organization answer	red 'Yes' on Form 99	30, Part IV, line 33.		
(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
(1) UNO Foundation Working interest Co. LLC. 2021 Lakeshore Dr. suite 420					
<u>New_OrleansLA_70122</u>	Receive donations	LA	47.637.	48.137.	48.137. UNO Foundation
(2) UNO Foundation Royalty Co. LLC					
New_Orleans,_LA 7012246-3358640	Receive donations	LA	27.390.	27.890	27.890 IINO Foundation
(3) UNO Foundation Real Estate CO. LLC					
2021_Lakeshore Dr. suite_420					
New_OrleansLA_70122	Receive donations				
46-3353911		LA	4,031,789.	4,032,289.	4,032,289. UNO Foundation
Radial Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had	ons Complete if the orgai	nization answered 'Y	res' on Form 990, F	art IV, line 34 beca	use it had
one or more related tax-exempt organizations durir	uring the tax year.				

(g) Sec 512(b)(13) controlled entity? Ŷ × Yes 170(B)(1)(A)(II) 501(c)3 Higher Education (1) University of New Orleans. __New_Orleans,_LA 70148 72-0702000 __ 2000_ Lakeshore Drive_ ල් 3 3

(f)
Direct controlling
entity

(e)
Public charity status
(if section 501(c)(3))

(d) Exempt Code section

(c)
Legal domicile (state or foreign country)

(b) Primary activity

(a) Name, address, and EIN of related organization

Schedule R (Form 990) 2013

TEEA5001 06/26/13

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

Schedule R (Form 990) 2013 University of New Orleans Foundation

72-1051326

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

(a) Name, address, and EIN of related organization	(b) mary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(d) (e) Predominant income Share of total income entity excluded from tax index sections from the control income excluded from tax index sections from the control income entity excluded from tax index sections from tax ind	come Sha sted, 1 tax	Share of total income	(g) Share of end-of-year assets		(h) Disproportonate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(K) Percentage gownership	ntage rship
(1)									↓		1		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											_		
(2)						_							
											-		
(3)													
1 1 1 1 1 1 1 1													
PartiV Identification of Identification of Identification	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	izations re related	Taxable as I organizatio	a Corporatio	on or Trus a corpora	t Complete tion or trust	of the orga during the	ınızatıon aı tax year.	nswered	l 'Yes' on For	m 990, Pa	ırt IV,	
(a) Name, address, and EIN of related organization	of related organization		(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling		entity S corp,	(f) Share of total income		(g) Share of end-of- year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?)(13) entity?
				couring)	erininy		ner)					Yes	£
(t)	 	1											
		- 1 - 											
		1									-		
(2)													
		ı											
(3)													
		- 1											
 		 											
ВАА				TEEA	TEEA5002 06/27/13					й	Schedule R (Form 990) 2013	om 990)	2013

Schedule R (Form 990) 2013 University of New Orleans Foundation

72
[Park W] Transactions With Related Organizations Complete of the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Page 3

72-1051326

	×	×	×	X	×	<u>.</u>	×	>	×	; -	∢ ;	×	×	×	×	×	╀	4	>	ا.	×		×	$\stackrel{ imes}{+}$			mining								990) 2013
L .	1 a	1b >	1c >	1 d	1e	L	1+	10	. .	;	= ;	-	1¥	1	£	-	5	ب	10	╀	С Б	-	<u>-</u>	18		Ð	Method of determining amount involved						ŀ		/E.r.m 00
		· · ·	 : :	:	•		: :			<u> </u>			:	•			<u>I</u>				· ·				s	T							+		O ohibodio
											: : :			•							:		:		ion threshold	(0)	Amount involved								
,	:	:	:	:	:		:				· · ·				:	:				•	:				and transact								-		
following transactions with one or more related organizations listed in Parts II-IV?		:	:	:	:							:	:					: :	•				:		for information on who must complete this line, including covered relationships and transaction thresholds	(q)	Transaction type (a-s)								
ıızatıons lısteo		:	:																	· · ·					ding covered								-		
related organ	:	:	:		:							:		•									:		ns line, incluc										
one or more		:										:		(s)uc	(s)uc			· · ·		· · · ·			:		st complete th										110000
sactions with	l entity	:	:		:		•			•				l Performance of services or membership or fundraising solicitations for related organization(s)	m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)	,								n on who mu										
ollowing tran	m a controlled entity	•	:	:			:			•		zation(s) .	ganization(s)	ions for relat	ions by relat	th related or							:		or informatio		organization								
		ation(s)	nization(s)	ition(s)						•		lated organi	related orga	sıng solicitat	sıng solicitat	er assets w	(0)	(a)	Sostouxo	· cacillada	expenses		zation(s)				_			ļ					
on engage in	royalties or	ated organız	related orga	ted organiza	rganization(s		:	-	zation(s)	(0)	. zauon(s)	assets to re	assets from	tp or fundrai	ip or fundrai	a lists, or oth		า บายสาแรลแด	zation(e) for	radion(s) io	zation(s) for		elated organi	related org	es, see the		Name								
e organizatio	nnulties (iii)	ibution to rel	ibution from	to or for rela	by related o		janization(s)	Juontezinena	elated organ	interest organization	elated organ	ent, or other	ent, or other	r membersh	ır membersh	ment. mailin	4	s with related	lated organi	ומוכח סוקמווי	elated organi		property to re	property from	above is 'Ye										
year, did the	nterest (ii) a	capital contr	capital contr	guarantees	guarantees	ı	n related org	to related o	ssets from r	1	assets with r	ties, equipm	ties, equipm	of services o	of services o	alities, equip		d employees	of paid to re	יייי שמות וכו ופ	int paid by re		of cash or p	of cash or p	to any of the										
Dunng the tax year, did the organization engage in any of the	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent fro	Gift, grant, or capital contribution to related organization(s).	c 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)	Cale of accept to related organization(c)	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)	k Lease of facilities, equipment, or other assets from related or	erformance	'erformance	n Shanno of facilities, equipment, mailing lists, or other assets with related organization(s)	, , , , , ,	Sharing of paid employees with related organization(s)	Bembursement and to related amanagements) for expenses	Veninoui senne	 Reimbursement paid by related organization(s) for expenses 		Other transfer of cash or property to related organization(s)	Other transfer of cash or property from related organization(s)	If the answer to any of the above is 'Yes,' see the instructions										
1 Dunng the tax year, did the organization engage in any of the	us ⊏	Q Q	<u>ن</u>	9	9		-		, c		<u> </u>	_	→	_	E	5		n D	2	_ '	<u>.</u>		<u>.</u>	s	2 11			£	(2)	(3)	3	Ē	(2)	(9)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on 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

(9) (1) (1) (9)	3	(5)	P	(0)	9	(0)	3		8	
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign		Are all partners section 501(c)(3)	Share of total income	Share of end-of-year assets	Disproportionate	Code V-UBI amount in box	General or managing	Percentage ownership
				organizations				K-1 Form (1065)		
			section 512-514)	Yes No			Yes No		Yes No	
(1)										
							_			
(2)										
(3)										
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(4)										
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Schedule F	R (Form 990) 2013	University	of New Orleans	Foundation	72-1051326	Page 5
	Supplemental	Information		estions on Schedule F		
PT_V_Li	ine_1A	ll_related_	party transact	ions_are_between_	the University of	_
	<u>N</u> e	ew_Orleans_	Foundation and	University of Ne	ew Orleans	
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Schedule R (Form 990) 2013

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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

departments, and divisions comprising it, and to develop, expand, and improve the University's curricula, programs, and facilities so as to provide greater educational advantages and opportunities, and increase the University's benefits to the citizens of the State of Louisiana and the United States of America.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code:	Description:	TO SUPPORT OTHER NOT-FOR-PROFIT ORGANIZATIONS CREATED
Expenses	377,683.	TO SUPPORT THE UNIVERSITY OF NEW ORLEANS, INCLUDING, BUT
Grants Of	208,472.	NOT LIMITED TO THE UNIVERSITY OF NEW ORLEANS ALUMNI
Revenue.	546,612.	ASSOCATION AND THE PRIVATEER ATHLETIC FOUNDATION.
•		
Code [.]	Description	TO SUPPORT THE UNIVERSITY OF NEW ORLEANS' PRESIDENT'S
Code ⁻	Description 78,735.	TO SUPPORT THE UNIVERSITY OF NEW ORLEANS' PRESIDENT'S OFFICE FOR DONOR CULTIVATION, FACULTY DEVELOPMENT,
	 '	
Expenses	78,735.	OFFICE FOR DONOR CULTIVATION, FACULTY DEVELOPMENT,
Expenses Grants Of	78,735.	OFFICE FOR DONOR CULTIVATION, FACULTY DEVELOPMENT,
Expenses Grants Of	78,735.	OFFICE FOR DONOR CULTIVATION, FACULTY DEVELOPMENT,