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DLN: 93493127011076

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2014 ca	ılendar year, or tax year beginni	ng 07-01-2014 , and ending 06-30-20	15				
		pplicable	C Name of organization			D Empl	oyer ider	ntification number	
☐ Add	ress ch	ange				58-6	043294	1	
┌ Nar	ne char	nge	% MARK W LONG Doing business as			_			
┌ Init	ıal retur	rn				E Tolonh	none numl	hor	
Fina retu		nınated	Number and street (or P O box if 760 SPRING STREET NW SUITE 40	mail is not delivered to street address) Room/	suite) 894-8		
	ended r	return pending	ATLANTA, GA 30308	ountry, and ZIP or foreign postal code		G Gross	receipts \$	699,761,710	
i Whi	nication	Pending			1				
			F Name and address of pr	incipal officer		s this a group ubordinates?		for	
			760 SPRING ST NW SUIT	E 400		aboramaces		, 105, 110	
			ATLANTA,GA 30308			re all subord icluded?	lınates	┌ Yes ┌ No	
	x-exem	pt statu:	s 🔽 501(c)(3) 🔽 501(c)() 🖪	(insert no) 4947(a)(1) or 527			h a lıst	(see instructions)	
1 W	ehsite	• • •	ww gtf gatech edu		┪.	•			
					1	Group exemp			
			n Corporation Trust Associat	tion Other -	L Year	of formation 1	932 M	State of legal domicile GA	
Ра	rt I		nmary						
	Т	TO PRO	DMOTE THE CAUSE OF HIGHE	ion or most significant activities ER EDUCATION IN GEORGIA, TO RE OPMENT AS A LEADING EDUCATIO			E SUPP	ORT OF GA TECH,	
je E	_								
<u> </u>	-								
Governance	2 (Check	this box 🛏 if the organization (discontinued its operations or disposed	d of more tha	an 25% of it:	s net as:	sets	
			,						
Activities &	l			rning body (Part VI, line 1a)			3	52	
Ě	l			s of the governing body (Part VI, line 1			4	47	
Ę.	l			n calendar year 2014 (Part V, line 2a)			5 6	36 100	
4	l		·	Part VIII, column (C), line 12			7a	-668,590	
				from Form 990-T, line 34			7b	000,530	
				•		Prior Year	1 1	Current Year	
	8	Cont	ributions and grants (Part VIII,	line 1h)		106,402	,601	129,768,949	
ΞE	9	Progi	ram service revenue (Part VIII,	line 2g)		859	,657	589,758	
Rayenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)						65,775,031	
ш	11		, , , , , , , , , , , , , , , , , , , ,), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,728	,819	8,216,941	
	12		_	1 (must equal Part VIII, column (A), l	ne	191,644	,689	204,350,679	
	13			rt IX, column (A), lines 1–3)	.	73,441		82,451,850	
	14	Bene	fits paid to or for members (Part	: IX, column (A), line 4)			0	0	
99	15	Salar 5-10		yee benefits (Part IX, column (A), lines	;	4,570	,314	4,845,342	
Ехрепзез	16a	Profe	ssional fundraising fees (Part I)	K, column (A), line 11e)			0	0	
Š	ь	Total f	fundraising expenses (Part IX, column (D), line 25) ► 4,874,649					
ш	17	Othe	r expenses (Part IX, column (A)), lines 11a-11d, 11f-24e)		22,612	,137	19,584,741	
	18			ust equal Part IX, column (A), line 25)		100,624		106,881,933	
	19	Reve	nue less expenses Subtract lin	e 18 from line 12		91,020	,688	97,468,746	
Net Assets or Fund Bafances					Begin	ning of Curre Year	ent	End of Year	
15.55 B 24.	20					1,881,230		1,918,013,222	
₹ <u>₩</u>	21					478,410		451,902,632	
	22			t line 21 from line 20		1,402,819	,748	1,466,110,590	
Unde my kr	rer ha	lties of		xamined this return, including accompa omplete Declaration of preparer (other					
Here		AL-	TRUJILLO PRESIDENT						
			pe or print name and title						
			Print/Type preparer's name ALLISON H FRANKLIN	Preparer's signature ALLISON H FRANKLIN	Date 2016-02-08	Check I if	PTIN P00448	640	
Paid			Firm's name KPMG LLP			self-employed Firm's EIN ►	1 - 5 1 10	-	
	pare Onl		Fırm's address ► 300 N GREENE ST SU	JITE 400		Phone no (33	6) 275-33	394	

Greensboro, NC 27401

✓ Yes No

Total program service expenses ►

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		No
_	complete Schedule D, Part III 📆	8		''`
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
4-	Fatantha number nasatad in Day 2 of Farms 1000 Fatan 0 of national lands		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 26 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	e h		
7	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Section A. Governing Body and Management

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

Check if Schedule O contains a response or note to any line in this Part VI														. \to
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			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			ue Cod Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶GA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vupon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ►MARK W LONG

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more t perso and a	han d n ıs l	ne l both	box, an d	fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	. ~	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	►	2,092,688	930,769	531,140

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►10

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
SNELLINGS WALTERS, 1117 PERIMETER CENTER W ATLANTA, GA 30338	INSURANCE	382,558
SODEXHO CAMPUS SERVICES, 350 FERST DRIVE ATLANTA, GA 30332	EVENT/CATERING	338,036
THOMAS J BARRANCO, 2221 Peachtree Rd Ste D400 ATLANTA, GA 30309		434,734
KPMG, 303 Peachtree Street NE ATLANTA, GA 30308		273,611
FULTON COUNTY TAX COMMISSIONER, 141 PRYOR ST SW ATLANTA, GA 30303		185,829
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part V	
ts	1a
3ran nour	b
ffs, (ir An	d
s, Gi imila	b c d e f g
tion: er Si	f
tribu Othe	g
Contributions, Gifts, Grants and Other Similar Amounts	h
lue	2a
Rever	Ь
Yogram Service Revenue	c
) Ser	d e
xgran	f
<u>~</u>	2a b c d e f g
	3
	4 5
	6a
	b
	С
	d
	7a
	Ь
	c
	d
e .	8a
vent	
er Rev	
Other	b c
_	9a
	ı.
	С
	10a
	Ь
	С
	11a
	b c
	d
	e

VI	•••	Statement o Check if Schedu	f Revenue ule O contains a respoi	nse or note to any lu	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
3	1a	Federated camp	paigns 1a					
	b	Membership du	es 1b					
	c	Fundraising eve	ents 1c					
;	d	Related organiz	ations 1d					
,	e	Government grants	s (contributions) 1e					
	f	All other contribution	ons, gifts, grants, and 1f it included above	129,768,949				
	g	Noncash contribution	ons included in lines	10,245,024				İ
3	h		s 1 a - 1 f		129,768,949			
•				Business Code				
	2a	COST RECOVERIES	;	900099	39,678	39,678		
	b	INVESTMENT FEE I		900099	550,080	550,080		
	_	RELATED ORG			,	,		
	C C							
	d							
	e f	ΔII other progra	ım service revenue					
	ı	All other progra	im service revenue					
_	g		32a-2f		589,758			
	3		ome (including dividen ar amounts)		24,406,505		-1,106,544	23,299,961
	4		tment of tax-exempt bond		0			
	5	Royalties		🕨	605,110			605,110
			(ı) Real	(II) Personal				
	6a	Gross rents	12,711,318	899,772				
	b	Less rental expenses	4,905,691	1,093,567				
	C	Rental income or (loss)	7,805,627	-193,795				
	d	· · ·	me or (loss)		7,611,831		-193,796	7,805,627
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other	530,780,299					
	b	than inventory Less cost or						
		other basis and sales expenses	489,411,773					
	C	Gain or (loss)	41,368,526					
	d		s)		41,368,526		631,750	40,736,776
	8a	Gross income fi events (not incl \$						
		of contributions See Part IV, lin	reported on line 1c) e 18					
	b	Less direct ex	penses b					
	c		loss) from fundraising	events 🛌	О			
	9a	Gross income fi See Part IV, lin						
	Ь	Loca direct -	a noncos h					
	C		penses b Toss) from gamıng actı		О			
	10a	Gross sales of returns and allo	inventory, less					
	_		a					
	b		oods sold b		o			
-	С	Net income or (loss) from sales of inv	entory	0			
\ 	11a	- macenaneous	, nevellue	Dusiness Code				
	b							
	c		_					
	d	All other revenu	ue					
	e	Total. Add lines		🕨	_			
	12	Total revenue	See Instructions .		0			
				· · · · •	204,350,679	589,758	-668,590	72,447,474

Part IX Statement of Functional Expenses

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

Secu	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al				
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	82,451,850	82,451,850		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,071,040		1,071,040	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	74,996		74,996	
7	Other salaries and wages	2,520,153		2,520,153	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	652,308	366,666	285,642	
9	Other employee benefits	322,894		322,894	
10	Payroll taxes	203,951		203,951	
11	Fees for services (non-employees)	,		, -	
а	Management	187,023		187,023	
ь	Legal	72,986	1,250	71,736	
c	Accounting	249,178		249,178	
d	Lobbying	40,008	40,008	2.2,2.0	
e	Professional fundraising services See Part IV, line 17	0	10,000		
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	82,062	3,961	23,390	54,711
12	Advertising and promotion	0		·	·
13	Office expenses	244,969	79,299	153,235	12,435
14	Information technology	343,846	87,060	256,786	·
15	Royalties	0		,	
16	Occupancy	0			
17	Travel	260,710	17,990	101,440	141,280
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	11,7550	101,110	111,200
19	Conferences, conventions, and meetings	5,138,082	3,700,444	323,414	1,114,224
20	Interest	8,462,517	8,390,869	71,648	, - ,
21	Payments to affiliates	0	,,	=,=:0	
 22	Depreciation, depletion, and amortization	314,373	241,283	73,090	
 23	Insurance	182,369	,_30	182,369	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)			,	
а	REIMBURSEMENTS TO GT	3,696,184		144,185	3,551,999
b	FACULTY MOVING EXPENSES				
С	MAINTENANCE AND REPAIRS	233,741		233,741	
d	INCOME TAXES	-97,738		-97,738	
e	All other expenses	174,431	158,620	15,811	
25	Total functional expenses. Add lines 1 through 24e	106,881,933	95,539,300	6,467,984	4,874,649
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)	,,-	,,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,

Part X Balance Sheet

	T X	Check if Schedule O contains a response or note to any line in this Part X \cdot . \cdot		<u> </u>	<u>'</u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	300	1	300
	2	Savings and temporary cash investments	3,568,979	2	4,491,030
	3	Pledges and grants receivable, net	64,873,450	3	113,135,254
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
ts	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			
Assets			0	6	0
ď	7	Notes and loans receivable, net	1,144,394	7	1,098,903
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 77,630,949			
	b	Less accumulated depreciation 10b 17,521,923	60,320,384	10c	60,109,026
	11	Investments—publicly traded securities	1,139,271,806	11	1,168,037,701
	12	Investments—other securities See Part IV, line 11	399,618,057	12	370,260,136
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	212,432,865	15	200,880,872
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,881,230,235	16	1,918,013,222
	17	Accounts payable and accrued expenses	14,107,689	17	16,919,574
	18	Grants payable	0	18	0
	19	Deferred revenue	31,320,792	19	28,510,416
	20	Tax-exempt bond liabilities	146,424,836	20	143,910,366
S	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>ge</u>		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	286,557,170	25	262,562,276
	26	Total liabilities. Add lines 17 through 25	478,410,487	26	451,902,632
S O		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
2	27	Unrestricted net assets	99,402,702	27	110,261,029
<u>छ</u>	28	Temporarily restricted net assets	715,036,700	28	726,359,958
	29	Permanently restricted net assets	588,380,346	29	629,489,603
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and	555,555,615		
9	20	complete lines 30 through 34.		20	
ets	30 31	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		32	
Ų.		Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	1,402,819,748	33	1,466,110,590
Net	33			-	
	34	Total liabilities and net assets/fund balances	1,881,230,235	34	1,918,013,22

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		204,3	350,679
2	Total expenses (must equal Part IX, column (A), line 25)	2		106,8	881,933
3	Revenue less expenses Subtract line 2 from line 1	3		97,4	168,746
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,402,8	319,748
5	Net unrealized gains (losses) on investments	5		-33,8	397,466
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		- 2	280,438
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,466,	10,590
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: **Software Version:**

EIN: 58-6043294

Name: GEORGIA TECH FOUNDATION INC

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more the perso and a	ion (han o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033****13€*/	2/1033-11130/	related organizations	
(1) LAWTON M NEASE III	1 0	x		x				0	0	0	
PAST CHAIR (1) CHARLES D MOSELEY	0 0										
CHAIR	0 0	Х		Х				0	0	0	
(2) JOHN F BROCK III	1 0							_	_	_	
TRUSTEE	0 0	X						0	0	0	
(3) J RANDALL CARROLL	1 0	x						0	0	0	
TRUSTEE	0.0	^						Ů	Ŭ		
(4) STEVE W CHADDICK	1 0	×						0	0	0	
TRUSTEE (5) KATHLEEN S DAY	0 0										
		X						0	0	0	
TRUSTEE (6) JOHN K DEWBERRY	0 0										
TRUSTEE	0 0	X						0	0	0	
(7) L THOMAS GAY	1 0	,								0	
TRUSTEE	0 0	Х						0	0	0	
(8) GARY T JONES	1 0	l x						19,562	0	4,002	
TREASURER	0 0							,		,	
(9) H RONALD NASH JR	1 0	х						0	0	0	
TRUSTEE (10) DAVID A PERDUE	0 0										
TRUSTEE	0 0	Х						0	0	0	
(11) SHERYL S PRUCKA	1 0	,									
TRUSTEE	0 0	Х						0	0	U	
(12) JOE W ROGERS JR	1 0	X						0	0	0	
TRUSTEE (13) C MEADE SUTTERFIELD	0 0										
	1 0	×						0	0	0	
TRUSTEE (14) ALBERT S THORNTON JR	0 0										
TRUSTEE	0 0	Х						0	0	0	
(15) JANICE N WITTSCHIEBE	1 0	<u> </u>									
TRUSTEE	0 0	Х						0	0	0	
(16) ROBERT A MILTON	1 0	l x						0	0	0	
TRUSTEE	0 0										
(17) THOMAS E NOONAN	1 0	X						0	0	0	
TRUSTEE (18) JOHN S MARKWALTER JR	0 0										
TRUSTEE	0 0	Х						0	0	0	
(19) ROBERT A ANCLIEN	1 0	, , , , , , , , , , , , , , , , , , ,									
TRUSTEE	0 0	X						0	0	0	
(20) RODNEY C ADKINS	1 0	l x						0	0	0	
TRUSTEE	0.0										
(21) JOSEPH W EVANS	1 0	x						0	0	0	
TRUSTEE (22) SHERMAN J GLASS JR	0 0										
TRUSTEE	0 0	X						0	0	0	
(23) LAWRENCE P HUANG	1 0										
TRUSTEE	0 0	Х						0	0	0	
(24) JAMES R LIENTZ JR	1 0	х						0	0	0	
VICE CHAIR	0 0	<u> </u>						l	<u> </u>		

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and					
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099 111307	2/1033 11130)	related organizations	
(26) DR G P PETERSON	40 0	х						0	456,580	180,242	
President GA Institute of Tech (1) C DEAN ALFORD	1 0	Х						0	0	0	
EX-OFFICIO TRUSTEE (2) JOHN C BACON	0 0	X						13,500	0	0	
TRUSTEE (3) DAVID D FLANAGAN	0 0	X						0	0	0	
TRUSTEE (4) RONALD L JOHNSON	0 0										
TRUSTEE (5) THOMAS H MULLER JR	0 0	X						208,574	0	36,117	
TRUSTEE	0 0	Х						0	0	0	
(6) GREGORY J OWENS TRUSTEE	1 0	х						0	0	0	
(7) N ALLEN ROBERTSON TRUSTEE	1 0	x						0	0	0	
(8) KAREN C THURMAN TRUSTEE	1 0	х						0	0	0	
(9) G NILES BOLTON	1 0	х						0	0	0	
TRUSTEE (10) JEROME A ATKINSON	1 0	x						0	0	0	
TRUSTEE (11) LAURIE D BAGLEY	0 0	x						0	0	0	
TRUSTEE (12) JAMES R BORDERS	0 0										
TRUSTEE (13) KARL F DASHER	0 0	X						0	0	0	
TRUSTEE	0 0	х						0	0	0	
(14) DAVID W DORMAN TRUSTEE	0 0	х						0	0	0	
(15) WALTER G EHMEREX-OFFICIO TRUSTEE	1 0	x						0	0	0	
(16) THOMAS A FANNING TRUSTEE	1 0	х						0	0	0	
(17) JOHN M FARRELL JR	1 0	х						0	0	0	
TRUSTEE (18) GEORGE W LEVERT	1 0	X						0	0	0	
TRUSTEE (19) CHARLES W MOORMAN IV	0 0	x						0	0	0	
TRUSTEE (20) J PAUL RAINES	0 0							0		<u> </u>	
EX-OFFICIO TRUSTEE (21) FRANCES G ROGERS	0 0	X						0	0	0	
TRUSTEE	0 0	х						0	0	0	
(22) CHRISTOPHER W KLAUS TRUSTEE	1 0	x						0	0	0	
(23) BENTON J MATHIS JR Ex-Officio Trustee	1 0	х						0	0	0	
(24) WILLIAM W GEORGE	1 0	Х						0	0	0	
Ex-Officio Trustee	0 0									<u> </u>	

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Highest compensated Officer Institutional Trustee or director		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
(51) RONALD H NASH JR Trustee	10	х						0	0	О
(1) PATRICK H NETTLES Trustee	1 0	Х						0	0	0
(2) ANDREA LALIBERTE TRUSTEE	10	Х						90,881	0	14,015
(3) TODD WILLIAM TRUSTEE	1 0	Х						177,900	0	8,400
(4) MARK W LONG CFO & Secretary	40 0			х	х			196,191	0	45,239
(5) ALFREDO TRUJILLO President & COO	40 0			х	х			309,438	0	23,877
(6) JAMES TAYLOR CHIEF INVESTMENT OFFICER	40 0				х			324,379	205,260	45,413
(7) PATRICK LIU DIRECTOR OF INVESTMENTS	40 0					х		165,425	138,188	46,760
(8) HERBERT BRUNSWICK JR DIR - SYSTEMS AND REPORTING	40 0					х		143,149	0	38,448
(9) SCOTT JENKS DIR - TRAINING AND USER SRVC	40 0					х		119,882	0	22,940
(10) JONATHAN KARCSH DIRECTOR OF INVESTMENTS	40 0					х		201,766	130,741	48,918
(11) MICHELLE JONES ASSISTANT CONTROLLER	40 0					х		122,041	0	16,769

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

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

Open to Public

Inspection

		ne organization CH FOUNDATION INC	Employer Identifica	ation number									
GLOIK	OB (IE)	en i condition inc					58-6043294						
Pa	rt I	Reason for Publi	ic Charity S	Status (All organiza	itions must co	mplete this p	part.) See instruction	ons.					
The	rganı	zation is not a private f	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)						
1	Г	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	b)(1)(A)(i).						
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	Г	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state											
5	굣												
		section 170(b)(1)(A)	(iv). (Complet	e Part II)									
6	Г	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1	1)(A)(v).						
7	Γ	An organization that n described in section 1	•	<u>.</u>	• •	om a governme	ental unit or from the o	general public					
8	\sqcap	A community trust de				tII)							
9	Γ	An organization that n	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross					
		receipts from activitie	s related to it:	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of					
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) fron	n businesses					
		acquired by the organ	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)						
10	Г	An organization organ	ized and opera	ited exclusively to tes	t for public safe	ty See sectio i	n 509(a)(4).						
11	Γ	An organization organ	ized and opera	ted exclusively for the	e benefit of, to p	erform the fun	ctions of, or to carry o	out the purposes of					
		one or more publicly s											
	_	the box in lines 11a th											
а	ı	Type I. A supporting of supported organization	n(s) the power	to regularly appoint o	r elect a majori								
b	_	organization You mus Type II. A supporting				with its suppo	ertod organization(c)	ay hayıng control or					
	,	management of the su	-	•									
		must complete Part I			,								
C	Γ	Type III functionally						grated with, its					
_	_	supported organizatio											
d	1	Type III non-function not functionally integr											
		(see instructions) Yo					cilient and all accentiv	eness requirement					
e	Γ	Check this box if the					s a Type I, Type II, T	ype III functionally					
_		ıntegrated, or Type II		•									
f		Enter the number of s											
g		Provide the following i	nformation abo	out the supported orga	inization(s)								
	(i)N	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of					
		organization	on organization listed (described on lines 1 - 9 above or IRC section (see		listed in your docume		monetary support (see instructions)	other support (see instructions)					
				ınstructions))			1						
					Yes	No							

Page 2

Part II

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total

1 Gifts, grants, contributions, and

	ection A. Public Support							
Cale	endar year (or fiscal year beginning in) 🏲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	+	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	53,928,276	84,763,904	63,555,932	106,402,601	130,852	2,773	439,503,486
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0
4	Total. Add lines 1 through 3	53,928,276	84,763,904	63,555,932	106,402,601	130,852	2,773	439,503,486
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							0
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from line 4							439,503,486
S	ection B. Total Support	1						
	endar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014		(f) Total
_	beginning in)							
7 8	A mounts from line 4 Gross income from interest,	53,928,276	84,763,904	63,555,932	106,402,601	130,852	2,773	439,503,486
8	dividends, payments received on securities loans, rents, royalties and income from similar	32,416,581	32,721,535	40,126,494	39,114,611	38,829	9,477	183,208,698
9	Net income from unrelated business activities, whether or not the business is regularly	975,605	769,548	-351,530	3,987	-618	8,827	778,783
10	carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							0
11	Total support Add lines 7 through 10							623,490,967
12	Gross receipts from related activit	ies, etc (see ins	tructions)			12		0
13	First five years. If the Form 990 is organization, check this box and st							
S	ection C. Computation of Pu							
14	Public support percentage for 201	4 (line 6, column	(f) divided by line	11, column (f))		14		70 491 %
15	Public support percentage for 201	3 Schedule A , Pa	rt II, line 14			15		63 855 %
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	% or more, cl	heck th	
	and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organization Private foundation. If the organization	nization meets thation meets the "	ne "facts-and-cırc facts-and-cırcum:	umstances" test, stances" test Th	, check this box a e organization qu	nd stop here alıfıes as a p	e. oublicly	▶ □
	instructions							► □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493127011076

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

Political Campaign and Lobbying Activities

www.irs.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-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4) (5) or (6) organizations. Complete Part III.

Na	me of the organization DRGIA TECH FOUNDATION INC				tification number	
Par	t I-A Complete if the or	ganization is exempt under	section 5010	58-6043294 c) or is a section 527	organization	
1 2 3		ganızatıon's dırect and ındırect politi			\$	
				-)/2)		
Par 1	<u> </u>	ganization is exempt under tax incurred by the organization ur	-			
2	,	e tax incurred by organization manage			Φ	
3	·	ection 4955 tax, did it file Form 47.			⊤ Yes	
4a	Was a correction made?	,	,		┌ Yes ┌ No	
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1(c)(3).	
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exem _l	pt function activities 🕨	\$	
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to o	ther organizations	s for section 527 ►	\$	
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	\$	
4	Did the filing organization file F	Form 1120-POL for this year?			Yes	
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.					
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-	

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2014					Page 2
P	cart II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and fi	led Form 5768	
	Check ► If the filing organization belongs to a		list in Part IV ea	ich affiliated gr	oup member's nam	e, address, EIN,
В	expenses, and share of excess lobbed Check F if the filing organization checked bo		ol" provisions apr	olv		
	Limits on Lobbying E (The term "expenditures" means an	Expenditures		,	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	obying)			
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	e excess over \$1,000	0,000		
	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				
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er -0-				
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 rep	oorting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t		ection do not uctions for li	have to co nes 2a thro	ugh 2f.)	he five
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

Part I	Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ЮТ				
For each '	Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	,	(b)	
activity.	, as the period to times 11 ti	Yes	No	4	mou	nt
leg	ring the year, did the filing organization attempt to influence foreign, national, state or local islation, including any attempt to influence public opinion on a legislative matter or referendum, ough the use of					
a Vo	lunteers?		No			
b Pa	d staff or management (include compensation in expenses reported on lines 1c through 1i)?		No			
c Me	dia advertisements?		No			
d Ma	ılıngs to members, legıslators, or the public?		Νo			
e Pul	plications, or published or broadcast statements?		Νo			
	ants to other organizations for lobbying purposes?		No			
g Dir	ect contact with legislators, their staffs, government officials, or a legislative body?	Yes				40,008
h Ra	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
	ner activities?					
j Tot	tal Add lines 1c through 1i					40,008
	the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	Yes," enter the amount of any tax incurred under section 4912					
	Yes," enter the amount of any tax incurred by organization managers under section 4912					
	he filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part II	I-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5),	or se	ectio	'n
					Yes	No
	re substantially all (90% or more) dues received nondeductible by members?		L	1		
	the organization make only in-house lobbying expenditures of \$2,000 or less?			2		<u> </u>
	I the organization agree to carry over lobbying and political expenditures from the prior year?			3		
	I-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes." es, assessments and similar amounts from members					
	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	penses for which the section 527(f) tax was paid).					
a Cu	rrent year	2a				
b Ca	rryover from last year	2b				
c Tot	cal	2c				
3 Ag	gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
doe	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	4				
•	itical expenditure next year? kable amount of lobbying and political expenditures (see instructions)	5				
Part						
	the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grounstructions), and Part II-B, line 1 Also, complete this part for any additional information	p list),	, Part I	I-A, II	nes 1	. and
	Return Reference Explanation					
	LOBBYING EXPENDITURES LOBBYING EXPENSES ARE PAID BY THE FOUNDATION AT THE REQUEST OF THE GEORGIA INSTITUTE OF T TECH) FOR GEORGIA TECH'S ADVOCACY OF HIGHER EDUCATION TECH'S LEGISLATIVE PRIORITIES EXPENSES INCLUDE PAYMENTS SERVICES UTILIZED IN THE HOSTING OF MEETINGS, CAMPUS VISEVENTS, AND PROMOTIONAL ITEMS WITH THE GEORGIA TECH LO	ECHN HIGH FOR ITS, (NOLOG LIGHT GOOD	Y (GE Ing (S an	EOR D	GIA

Part IV Supplemental Inf	ormation (continued)					
Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493127011076

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Inspection Name of the organization **Employer identification number** GEORGIA TECH FOUNDATION INC 58-6043294 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 Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of 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? 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? Part II 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) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d 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 **\(\mathbb{F}_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 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 conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 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 (i) Revenue included in Form 990, Part VIII, line 1 (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 Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Ar	<u>t, His</u>	torical ⁻	<u> Treas</u> i	<u>ures, or Ot</u>	<u>:her Si</u>	<u>milar As</u>	sets (c	ontınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	neck any o	f the fol	llowing that a	re a sıgn	ıfıcant use	e of its	
а	Public exhibition		d	┌ Loa	norexo	change progra	ams			
b	Scholarly research		e	┌ Oth	er					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expl	aın hov	w they furt	her the	organization'	s exemp	t purpose	ın	
5	During the year, did the organization solicit	or receive donation	ıs of ar	t, historica	al treas	ures or other	sımılar			_
	assets to be sold to raise funds rather than								│ Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					on answered	l "Yes"	to Form ⁹	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interm	iediary	for contro	butions	or other asse	ets not		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	e follov	wing table		_				
						<u> </u>		Ar	nount	
С	Beginning balance						1c			
d	Additions during the year					<u> </u> :	1d			
е	Distributions during the year					<u> </u>	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, Iır	ne 21,	for escrow	orcus	todıal accoun	t liability	/?	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here ıf th	e expl	anatıon ha	s been	provided in P	art XIII			Γ
Pa	rt V Endowment Funds. Complete	ıf the organizatio	n ans	wered "Y	'es" to	Form 990,	Part IV	, lıne 10.		
		(a)Current year		Prior year		wo years back				ears back
1a	Beginning of year balance	1,311,598,082	1	1,112,788,22		1,012,283,590		44,450,626		80,639,102
b	Contributions	31,044,444		71,646,31	8	33,640,982		26,657,320		29,845,676
C	Net investment earnings, gains, and losses	27,361,048		178,366,25	3	112,578,062		-7,607,178	1	83,425,325
d	Grants or scholarships	17,221,351		16,444,62	6	15,550,123		13,535,183		14,319,385
e	Other expenditures for facilities and programs	29,472,529		28,037,81	2	23,738,191		31,457,416		28,940,780
f	Administrative expenses	7,475,451		6,720,27	6	6,426,095		6,224,579		6,379,312
g	End of year balance	1,315,834,243	1	l,311,598,08	2	1,112,788,225	1,0	12,283,590	1,0	44,270,626
2	Provide the estimated percentage of the cur	rent year end balar	nce (lır	ne 1g, colu	mn (a))	held as				
а	Board designated or quasi-endowment 🕨	15 000 %								
b	Permanent endowment ► 85 000 %									
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that are he	eld and	admınıstered	for the			
	organization by								Yes	+
	(i) unrelated organizations							3a	` '	No
L	(ii) related organizations							. 3a(No
ь 4	Describe in Part XIII the intended uses of t	•			•			3	Б	
	t VI Land, Buildings, and Equipme				on ans	wered 'Yes'	to Forr	n 990 Pa	art IV I	ine
	11a. See Form 990, Part X, line		tile 0	rgamzad	on ans	Wered 165	10 1 011	11 220, 10	arc 1 v , 1	
	Description of property			(a) Cost of basis (inve		(b)Cost or oth basis (other		Accumulated epreciation	(d) Bo	ook value
1a	Land					2,552,	671		1	2,552,671
ь	Buildings			27,	175,670			16,342,59	97 4	18,899,458
c I	Leasehold improvements									<u> </u>
	Equipment					9,836,	222	1,179,32	25	8,656,897
e (Other							· · ·		
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		X, colu	ımn (B), lın	e 10(c).	.)		. ►	-	50,109,026
	·							Schedule I	D (Form 9	990) 2014

See Form 990, Part X, line 12.	(IAD. I	(a) Makkada (coala
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other (A)INVESTMENTS IN PARTNERSHIPS	365,807,804	F
(B) MANAGED PERPETUAL TRUSTS	1,874,382	F
(C) CHARITABLE GIFT ANNUITY	2,577,951	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. (Somplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organizat		Part IV, line 11d See Form 990, Part X, line 15
(a) Desi	cription	(b) Book value
(1) CHARITABLE REMAINDER TRUSTS (2) CASH VALUE OF LIFE INSURANCE		23,004,579 3,446,134
(3) LEASE RECEIVABLE		163,154,856
(4) OTHER ASSETS		2,737,896
(5) INTEREST RECEIVABLE		13,190
(6) CAPITAL RESERVE FUNDS		8,524,217
Total. (Column (b) must equal Form 990, Part X, col.(B) line	÷ 15.)	
Part X Other Liabilities. Complete if the or		Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	(h) Pook volus	
1 (a) Description of liability	(b) Book value	
Federal income taxes COMMITMENT PAYABLE	8,247,888	
PAYABLE TO AFFILIATES	109,163,112	
LIFE INCOME INTEREST	11,435,175	
BONDS PAYABLE (TAXABLE)	93,218,548	
GUARANTEE OF LINES OF CREDIT	21,580,806	
LINES OF CREDIT	18,916,747	
	+	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 262,562,276	

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Par		Revenue per Audited Financial Statements With Revenue wered 'Yes' to Form 990, Part IV, line 12a.	per Re	turn Complete if
1		er support per audited financial statements	1	
2	· - ·	ut not on Form 990, Part VIII, line 12		
а		on investments 2a		
ь	- '	facilities	1	
c		2c	1	
d)	1	
e	Add lines 2a through 2d			
3	· ·		3	
4		90, Part VIII, line 12, but not on line 1		
а		luded on Form 990, Part VIII, line 7b . 4a		
b) 4b	1	
С			4c	
5		d 4c. (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expense	s per	Return. Complete
		nswered 'Yes' to Form 990, Part IV, line 12a.		T
1	,	r audited financial statements	1	
2		ut not on Form 990, Part IX, line 25		
а	Donated services and use of	acılıtıes	_	
b	, ,	2b		
С	Otherlosses	<u>2</u> c	_	
d	Other (Describe in Part XIII)	_	
e	-		2e	
3			3	
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	_	
С	Add lines 4a and 4b		4c	
5		nd 4c. (This must equal Form 990, Part I, line 18)	5	
	XIII Supplemental In			
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to $\frac{1}{2}$		e any additional
	Return Reference	Explanation		
SCHE	DULE D, PART V, LINE 4	ENDOWMENT FUNDS INCOME EARNED ON ENDOWMENTS IS USED INSTITUTE OF TECHNOLOGY THE INCOME FROM THE ENDOWMENTO CERTAIN PURPOSES BY THE DONORS THE USES INCLUDE ST FORM OF SCHOLARSHIPS, FELLOWSHIPS (LOAN FUNDS TO MEET TEXPENSES), GRADUATE SUPPORT, AS WELL AS SUPPORT OF FACU AND RESEARCH PROGRAMS THE ENDOWMENT SUPPORTS EACH OMANY PROGRAMS, INCLUDING THE LIBRARY, LECTURES, FACULTY PROGRAM CURRICULUM DEVELOPMENT, AND FOR THE RENOVATILABORATORIES	NT IS M UDENT HEIR E LTY IN FTHE RECRU	OSTLY RESTRICTED SUPPORT IN THE EDUCATIONAL THEIR TEACHING SIX COLLEGES AND JITMENT, AND
SCHE	DULE D, PART X, LINE 2	FIN 48 (ASC 740) FOOTNOTE The Foundation does not have any mate	rıal unr	ecognized tax
	· ·	positions that should be recognized in the consolidated financial statem		

Jenedale 2 (1 31111 33 3) 23 13		age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493127011076

OMB No 1545-0047

2014

Employer identification number

E0 C043304

Department of the Treasury Internal Revenue Service

Name of the organization

GEORGIA TECH FOUNDATION INC

SCHEDULE F

(Form 990)

▶ Complete if the organization answered "Yes" to Form 990,

Statement of Activities Outside the United States

Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

Open to Public **Inspection**

					30-0043294				
Pai	rt I General Information "Yes" to Form 990, Par			he United States. C	omplete if the organiza	ation answered			
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	For grantmakers. Describe in assistance outside the United	d States.				s and other			
3	Activites per Region (The follow	ing Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region			
(1)	Central America and the Caribbean			r	RESEARCH COLLABORATION				
(2)	North America			Program Services	VARIOUS PROGRAMS				
(3)									
(4)									
(5)									
3a	Sub-total								
b	Total from continuation sheets to Part I								
C	Totals (add lines 3a and 3b)								

Schedule F (Form 990) 2014

Pa				i zations or Entitie ived more than \$5,0		•	9		to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are ro or counsel has pro					
3	Enter total num	nber of other or	ganizations or ent	ities					

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											
(15)											
(16)											
(17)											
(18)											
				I.	I .						

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	▼	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	▽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	굣	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	দ	Yes	Γ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	۱✓	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	√	Yes	Г	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULEF	SCHEDULE F, PART V GEORGIA TECH FOUNDATION, INC ATTACHES ALL FOREIGN FILINGS TO FORM 990T , WHICH IS PAPER FILED WITH THE INTERNAL REVENUE SERVICE

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service
Name of the organization

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

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

► Attach to Form 990.

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

OMB No 1545-0047

2014

DLN: 93493127011076

Open to Public Inspection

Employer identification number

GEORGIA TECH FOUNDATION	NINC					58-6043294	
Part I General Inform	nation on Grants	and Assistance					
Does the organization mathe selection criteria used Describe in Part IV the or	d to award the grants (orassistance?			ity for the grants or a	ssistance, and	
		Domestic Organiz recipient that receive				organization answere al space is needed.	d "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GEORGIA TECH ALUMNI ASSOCIATION 190 NORTH AVENUE ATLANTA,GA 30313	58-0634853	501(C)(3)	3,130,127				ALUMNI ASSOCIATION
(2) GEORGIA INSTITUTE OF TECHNOLOGY 225 NORTH AVENUE ATLANTA,GA 30332	58-6002023	UNIV SYS OF GA	78,050,580				SCHOLARSHIPS, FELLOWSHIPS, AWARDS & OTHER
(3) GEORGIA TECH FACILITIES INC 225 NORTH AVENUE ATLANTA,GA 30332	52-1442293	501(C)(3)	296,814				CONSTRUCTION PROJECTS/BUILDING GRANTS
(4) GEORGIA TECH FOUNDATION FUNDING CORPORATION 760 SPRING ST NW STE 400 ATLANTA,GA 30308	58-2587017	501(C)(3)	197,155				CAPITAL PROJECTS
(5) GEORGIA TECH FOUNDATION REAL ESTATE HOLDING CORP 760 SPRING ST NW STE 400 ATLANTA,GA 30308	58-1948026	501(C)(2)	12,640				REAL ESTATE OPERATIONS
(6) GEORGIA TECH ATHLETIC ASSOCIATION 150 BOBBY DODD WAY ATLANTA,GA 30332	58-0622514	501(C)(3)	524,534				SCHOLARSHIPS
(7) GEORGIA TECH GLOBAL INC 221 UNCLE HEINIE WAY NW LYMAN HALL BUILDING ROOM 304 ATLANTA,GA 30332	27-1010747	501(C)(3)	240,000				COSTA RICA TIP PROG

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

Schedule I	(Form 990) 2014
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Explanation								
	MONITORING THE USE OF GRANT FUNDS GEORGIA TECH FOUNDATION, INC PROVIDES GRANTS TO THE GEORGIA INSTITUTE OF TECHNOLOGY AND OTHER AFFILIATED ORGANIZATIONS THAT SUPPORT THE GEORGIA INSTITUTE OF TECHNOLOGY THE USE OF THE FUNDS IS MONITORED TO ENSURE THAT THE GRANT IS USED FOR ITS ORIGINAL PURPOSE NO GRANTS ARE PROVIDED TO INDIVIDUALS								

Schedule I (Form 990) 2014

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DLN: 93493127011076

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization GEORGIA TECH FOUNDATION INC **Employer identification number**

58-6043294

Pa	rt I Questions Regarding Compensation						
				Yes	No		
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to pro						
	First-class or charter travel	Housing allowance or residence for personal use					
	Travel for companions	Payments for business use of personal residence					
	□ Tax idemnification and gross-up payments □	Health or social club dues or initiation fees					
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)					
b	If any of the boxes in line 1a are checked, did the organizate reimbursement or provision of all of the expenses describe		1b	Yes			
2	Did the organization require substantiation prior to reimbu directors, trustees, officers, including the CEO/Executive		2	Yes			
				165			
3	Indicate which, if any, of the following the filing organization organization organization. The call that appused by a related organization to establish compensation	ply Do not check any boxes for methods					
	✓ Compensation committee	Written employment contract					
	☐ Independent compensation consultant ☐	Compensation survey or study					
	Form 990 of other organizations	Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part V or a related organization	II, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control payment	4a		No			
b	Participate in, or receive payment from, a supplemental no	onqualified retirement plan?	4b	Yes			
С	Participate in, or receive payment from, an equity-based of	compensation arrangement?	4c		Νo		
	If "Yes" to any of lines 4a-c, list the persons and provide	the applicable amounts for each item in Part III					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.					
5	For persons listed in Form 990, Part VII, Section A, line 1 compensation contingent on the revenues of						
а	The organization?		5a	Yes			
	Any related organization?	ŀ	5b	100	No		
	If "Yes," to line 5a or 5b, describe in Part III		36				
6	For persons listed in Form 990, Part VII, Section A, line 1 compensation contingent on the net earnings of	La, did the organization pay or accrue any					
а	The organization?		6a	Yes			
b	Any related organization?		6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III						
8	Were any amounts reported in Form 990, Part VII, paid or	r accured pursuant to a contract that was					
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe						
	ın Part III						
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?							

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

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

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

(A) Name and Title		(B) Breakdown of	FW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation		other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 MARK W LONG, CFO & (i) Secretary (ii)		196,091 0	0 0	100 0	0 0	0	196,191 0	0 0
2 DR G P PETERSON, President GA Institute of Tech	(i) (ii)	0 456,580	0	0	166,666	0 166,666 0 456,580		0 0
3 JAMES TAYLOR, CHIEF INVESTMENT OFFICER	(i) (ii)	324,279 0	0 205,260	100	0	0	324,379 205,260	 0
4 PATRICK LIU, DIRECTOR OF INVESTMENTS	(i) (ii)	165,325 0	0 138,188	100	0	0	165,425 138,188	0 0
5 HERBERT BRUNSWICK JR, DIR - SYSTEMS AND REPORTING	(i) (ii)	143,049 0	0	100	14,844	23,604	181,597 0	0
6 JONATHAN KARCSH, DIRECTOR OF INVESTMENTS	(i) (ii)	201,666	0 130,741	100	0	0	201,766 130,741	0
7 RONALD L JOHNSON, TRUSTEE	(i) (ii)	208,574 0	0	0	26,856 0	9,261	244,691 0	0
8 ALFREDO TRUJILLO, President & COO	(i) (ii)	286,732 0	0	22,706 0	0	0	309,438	0
9 TODD WILLIAM, TRUSTEE	(i) (ii)	177,900 0	0	0	0	0	177,900	0

Schedule J (Form 990) 2014

SCHEDULE J, PART II

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information								
Return Reference	Explanation							
LINE 2	HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES GEORGIA TECH FOUNDATION, INC PROVIDES JOHN B CARTER, JR AND DR GP PETERSON REIMBURSEMENT FOR THE BUSINESS EXPENSES AND THE DUES RELATED TO THEIR MEMBERSHIP IN A SOCIAL CLUB THE BUSINESS EXPENSES ARE SUBSTANTIATED THE DUES ARE ALSO PAID AND THE PERSONAL USE AMOUNT IS INCLUDED AS COMPENSATION ON THEIR W-2'S							
	ESTABLISHMENT OF CEO/EXECUTIVE DIRECTOR COMPENSATION THE COMPENSATION COMMITTEE OF THE GEORGIA TECH FOUNDATION IS CHARGED WITH REVIEWING AND APPROVING COMPENSATION AND BENEFITS PROVIDED BY THE GEORGIA TECH FOUNDATION, INC THE COMPENSATION COMMITTEE IS COMPOSED OF THE FOUR BOARD OFFICERS OF THE GEORGIA TECH FOUNDATION, WHO ARE NOT COMPENSATED AND ARE NOT RELATED TO INDIVIDUALS WHOSE COMPENSATION IS UNDER REVIEW THE COMPENSATION COMMITTEE MAY HIRE COMPENSATION CONSULTANTS AND RELIES ON MARKET DATA IN ASSESSING REASONABLENESS OF COMPENSATION AND BENEFITS FOR THE PRESIDENT AND CHIEF OPERATING OFFICER AND THE SENIOR STAFF							
SCHEDULE J, PART I, LINE 4B	NONQUALIFIED RETIREMENT PLAN Dr G P Peterson, a trustee of Georgia Tech Foundation and President of Georgia Institute of Technology (The Institute) participated in a non-qualified supplemental retirement plan Contributions to the plan of \$118,000 in calendar year 2014 consisted of two installments, the first for plan year 2013-2014, the second for plan year 2014-2015 for a combined total of \$271,000 Contributions are included in amounts disclosed on Schedule J, part II Column C Deferred Compensation When compared to the previous year's Form 990, total payments indicate a significant increase in total compensation, due to the fact that contributions were paid for two plan years during one calendar year Dr Peterson also participated in a non-qualified supplemental retirement plan organized and managed by the Board of Regents for the University System of Georgia Annual contributions under the plan are scheduled to vest in 2018 The Foundaton's contribution of \$166,666 was made in calendar 2014 and is included in amounts disclosed on Schedule J, Part II Column C Deferred Compensation in calendar 2012 is included in amounts disclosed on Schedule J, Part II Column C Deferred Compensation in calendar 2012 is included in amounts disclosed on Schedule J, Part II							
SCHEDULE J, PART I, LINE 5A & 6A	INCENTIVE COMPENSATION BONUSES ARE PAID TO INVESTMENT STAFF IF THE INVESTMENT RETURN EXCEEDS THE TARGET							

SUPPLEMENTAL INFORMATION DR G P PETERSON IS THE PRESIDENT OF THE GEORGIA INSTITUTE OF TECHNOLOGY AS PRESIDENT HE SERVES AS AN EX-OFFICIO VOTING TRUSTEE OF THE GEORGIA TECH FOUNDATION THE GEORGIA INSTITUTE OF TECHNOLOGY, A UNIT OF

THE UNIVERSITY SYSTEM OF GEORGIA, PROVIDES COMPENSATION TO DR PETERSON, AS REPORTED IN SCHEDULE J, PART II

Schedule J (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 58-6043294

Name: GEORGIA TECH FOUNDATION INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of (i) Base Compensation	of W-2 and/or 1099-MISC compensation (ii) Bonus & (iii) Other Incentive reportable compensation compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990	
MARK W LONG, CFO & Secretary	(I) (II)	1	0	100	0	0 0	196,191 0	0	
DR G P PETERSON, President GA Institute of Tech	(I) (II)		0	0	166,666 0	0	166,666 456,580	0	
JAMES TAYLOR, CHIEF INVESTMENT OFFICER	(I) (II)	324,279 0	0 205,260	100	0	0	324,379 205,260	0	
PATRICK LIU, DIRECTOR OF INVESTMENTS	(ı) (ıı)	165,325 0	0 138,188	100 0	0	0	165,425 138,188	0	
HERBERT BRUNSWICK JR, DIR - SYSTEMS AND REPORTING	(I) (II)	143,049 0	0	100	14,844 0	23,604 0	181,597 0	0	
JONATHAN KARCSH, DIRECTOR OF INVESTMENTS	(I)	201,666 0	0 130,741	100	0	0	201,766 130,741	0	
RONALD L JOHNSON, TRUSTEE	(I) (II)	208,574 0	0	0	26,856 0	9,261 0	244,691 0	0	
ALFREDO TRUJILLO, President & COO	(I) (II)		0	22,706 0	0	0	309,438 0	0	
TODD WILLIAM, TRUSTEE	(I)	177,900 0	0	0	0 0	0	177,900	0	

DLN: 93493127011076

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990.

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

Open to Public **Inspection**

Name of the organization GEORGIA TECH FOUNDATION INC										Emp	Employer identification number						
											60432	94					
Part I Bond Issues																	
	(a) Issuer name	(a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued				(e) Issue price		scripti	on of purpose	(g) De	feased		On alf of		Pool ncing		
															ssuer		ilcilig
										Yes	No	Yes	No	Yes	No		
Α	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1639487	359900WR4	06-11-2009	19,80	07,439	REAL ES	TATE	ACQUISITION		X		X		X		
В	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	359900R41	11-09-2011	37,49	98,996	REFUND ISSUE	A PRIC	OR BOND		Х		X		Х		
c_	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	3599003ES	04-11-2012	92,30	02,322	REFUND ISSUE	REFUND A PRIOR BOND ISSUE			Х		Х		Х		
Pa	Part II Proceeds																
						١			В		С		D				
1_	A mount of bonds retired						0		0			0					
2	Amount of bonds legally defeas	sed ————————————————————————————————————					0 0			0)				
3	Total proceeds of issue					19,807,439 37,498,996			37,498,996	92,302,322			:				
4	Gross proceeds in reserve fund						0		0			0					
5	Capitalized interest from proce						0 0			()				
6	Proceeds in refunding escrows						0 37,025,339						<u> </u>				
7	Issuance costs from proceeds					337,545 473,597		473,597	7 837			322					
8	Credit enhancement from proc						0 0		0)			0				
9	Working capital expenditures f	<u> </u>				0 0		0)			0					
10	Capital expenditures from proc	eeds				19,469,	895		0	0		0					
11	Other spent proceeds						0		0			0					
12	O ther unspent proceeds						0 0					0					
13	Year of substantial completion				20			20			012						
	Were the bonds issued as part of a current refunding issue?				Yes	No		/es	No	Yes	<u> </u>	lo	Yes		No		
14	·					Х		Х		X							
15	Were the bonds issued as part		Х			X		,	<u> </u>								
16	Has the final allocation of proc	Х			Χ		X										
17	allocation of proceeds?							Х		Х							
Pa	Part III Private Business Use																

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

No

Χ

Α

Yes

В

No

Χ

Χ

Yes

Yes

D

No

С

No

Χ

Χ

Yes

Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Χ of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-С Χ Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 % 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 Does the bond issue meet the private security or payment test? 7 Χ Χ Х Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Х Χ Х 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В С Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Exception to rebate? Χ b Χ Χ No rebate due? Χ c Χ Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Has the organization or the governmental issuer entered 4a Х Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

		Α	Α		В		С			
		Yes	No	Yes	No	Yes	No	Yes	No	
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		Х			
b	Name of provider	0		0		0				
С	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
6	Were any gross proceeds invested beyond an available temporary period?		x		X		X			
7	Has the organization established written procedures to monitor the requirements of section 148?		x		X		X			

Part V Procedures To Undertake Corrective Action

	Α		В		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		Х		Х		Х		

Part VI	Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).	

Return Reference Explanation

SCHEDULE K, PART IV, LINE 2C

THE REBATE COMPUTATION WAS PERFORMED FOR BONDS B AND C IN APRIL 2015

DLN: 93493127011076

OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

SCHEDULE M

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.

Inspection

Name	of the	organization	า
GEORG:	IA TECH	FOUNDATION	INC

Employer identification number

58-6043294

					-6043294			
Pa	rt I Types of Property	T			<u> </u>			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		_	nts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional Interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	164	9,533,325	FMV			
	Securities—Closely held stock .			77-1-7				
	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts Other ► (2	711 600	ENAL/			
	ritable Trusts)	X	3	711,699	FIM V			
26	Other ►()							
	Other►()							
	O ther ► ()							
	Number of Forms 8283 received by th	e organizat	ion during the tax year for					
	for which the organization completed F	orm 8283,	Part IV, Donee Acknowled	dgement 2	9			
							Yes	No
30a	During the year, did the organization							
	it must hold for at least three years fi				d to be used			
	for exempt purposes for the entire ho	ldıng period	?			30a		Νo
b	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
32a	Does the organization hire or use thir contributions?	•	related organizations to s	olicit, process, or sell no	ncash 	32a		No
h	If "Yes," describe in Part II							
33	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked.			
	describe in Part II		(-) z -) F b - b	, (4)				

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

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DLN: 93493127011076

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 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.

Name of the organization GEORGIA TECH FOUNDATION INC **Employer identification number** 58-6043294

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 REVIEW PROCESS THE TRUSTEES, DIRECTORS, AND OFFICERS OF GEORGIA TECH FOUNDATION, INC. ARE GIVEN ACCESS TO ALL GEORGIA TECH FOUNDATION, INC. 'S TAX RETURNS THROUGH A WEBSITE AND ASKED TO REVIEW AND PROVIDE ANY QUESTIONS AND COMMENTS BEFORE A CERTAIN DATE. ANY QUE STIONS AND COMMENTS FROM THE BOARD MEMBERS ARE NOTED AND CHANGES ARE MADE. TO THE RETURN AS APPROPRIATE. ONCE ALL CHANGES HAVE BEEN MADE, AN UPDATED RETURN IS PROVIDED TO THE BOARD. MEMBERS THROUGH THE SAME WEBSITE PRIOR TO THE RETURN BEING FILED.
FORM 990, PART VI, SECTION B, LINE 12	CONFLICT OF INTEREST POLICY THE BOARD OF DIRECTORS AND OFFICERS OF GEORGIA TECH FOUNDATION , INC ARE REQUIRED TO DISCLOSE ANY CONFLICT OF INTEREST WITH GEORGIA TECH FOUNDATION, INC THE AUDIT COMMITTEE OF GEORGIA TECH FOUNDATION, INC IS THEN CHARGED WITH REVIEWING ANY CONFLICTS OF INTEREST AND REPORTING THEM TO THE EXECUTIVE COMMITTEE IF ANY ACTION IS NECE SSARY, THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR TAKING THE APPROPRIATE ACTION
FORM 990, PART VI, SECTION B, LINE 15	REVIEW OF OFFICER COMPENSATION THE COMPENSATION COMMITTEE OF THE GEORGIA TECH FOUNDATION I S CHARGED WITH REVIEWING AND APPROVING COMPENSATION AND BENEFITS PROVIDED BY THE GEORGIA T ECH FOUNDATION, INC. THE COMPENSATION COMMITTEE IS COMPOSED OF THE FOUR BOARD OFFICERS OF THE GEORGIA TECH FOUNDATION, WHO ARE NOT COMPENSATED AND ARE NOT RELATED TO INDIVIDUALS WH OSE COMPENSATION IS UNDER REVIEW. THE COMPENSATION COMMITTEE MAY HIRE COMPENSATION CONSULT ANTS AND RELIES ON MARKET DATA IN ASSESSING REASONABLENESS OF COMPENSATION AND BENEFITS FO R THE PRESIDENT AND CHIEF OPERATING OFFICER AND THE SENIOR STAFF. THE COMPENSATION COMMITT EE OF GEORGIA TECH FOUNDATION CONTEMPORANEOUSLY DOCUMENTS THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION OF THESE INDIVIDUALS
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS AVAILABLE TO THE PUBLIC THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE POSTED TO THE GEORGIA TECH FOUNDATION, INC WEBSITE THE FORM 99 0 AND FORM 990-T OF GEORGIA TECH FOUNDATION, INC ARE AVAILABLE UPON REQUEST
OTHER PROGRAM SERVICES	GEORGIA TECH FOUNDATION, INC PROVIDES GENERAL SUPPORT TO THE GEORGIA INSTITUTE OF TECHNOL OGY AND ITS AFFILIATED ORGANIZATIONS THE GENERAL SUPPORT PROVIDES FUNDS FOR EDUCATIONAL A ND VARIOUS OTHER ACTIVITIES
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS THE AMOUNT REPORTED ON PART XI, LINE 5 CONSISTS OF THE FOLLOWI NG AMOUNTS ACTUARIAL GAIN (587,228) INCREASE IN CASH SURRENDER VALUE 306,790 T OTAL FORM 990, PART XI, LINE 9 (280,438)
UNDERTAKING SIGNIFICANT PROGRAM SERVICES	THE GEORGIA TECH FOUNDATION PROVIDED A GRANT TO THE GEORGIA INSTITUTE OF TECHNOLOGY FOR THE ENGINEERED BIOSY STEMS BUILDING (EBB)
FAMILY RELATIONSHIPS	FRAN ROGERS AND JOE ROGERS HAVE A FAMILY RELATIONSHIP

DLN: 93493127011076

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

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

Related Organizations and Unrelated Partnerships

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

Internal Revenue Service Name of the organization

GEORGIA TECH FOUNDATION INC

Department of the Treasury

58-6043294

58-6043294

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, 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) THE FIFTH STREET HOTEL LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	HOLDING COMP	GA	7,484,134	38,743,179	GTF INC						
(2) TECHNOLOGY SQUARE LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	HOLDING COMP	GA	6,908,078	134,984,190	GTF INC						
(3) CYPRESS ACADEMY LLC 760 SRPING ST NW STE 400 ATLANTA, GA 30308 26-3042898	HOLDING COMP	GA		4,895,803	GTF INC						
(4) GEORGIA TECH FOUNDATION PROPERTIES LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	REAL ESTATE	GA		0	GTF INC						
(5) ACADEMY OF MEDICINE LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	REAL ESTATE	GA		0	GTF INC						
(6) MIDTOWN OPERA LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308	REAL ESTATE	GA		0	GTF INC						

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

	,						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))			512(b) ontrolled ity?
						Yes	No
(1) GEORGIA TECH FOUNDATION FUNDING CORP 760 SPRING ST NW SUITE 400 ATLANTA, GA 30308 58-2587017	FINANCING	GA	501(C)(3)	11A	GTF INC	Yes	
(2) GEORGIA TECH FOUND REAL ESTATE HOLDING 760 SPRING ST NW SUITE 400 ATLANTA, GA 30308	REAL ESTATE	GA	501(C)(3)	N/A	GTF INC	Yes	
58-1948026							
(3) GEORGIA INSTITUTE OF TECHNOLOGY 225 NORTH AVENUE ATLANTA, GA 30332	EDUCATION	GA	N/A	N/A	NA		No
58-6002023						1	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	n 512 13) olled ty?
							1	Yes	No
(1) CHARITABLE REMAINDER UNITRUSTS (30)	TRUST	GA	GTF INC	Т					
760 SPRING STREET NW SUITE 400									
ATLANTA, GA 30308									
(2) CHARITABLE REMAINDER ANNUITY TRUSTS (3)	TRUST	GA	GTF INC	Т	-				
760 SPRING STREET NW SUITE 400 ATLANTA, GA 30308									
(3) GTF POOLED INCOME FUND	TRUST	GA	GTF INC	Т					
760 SPRING STREET NW SUITE 400 ATLANTA, GA 30308 58-6093829									
(4) GEORGIA TECH CHARITABLE LIFE INC	INSURANCE SER	GA	GTF INC	С					
760 SPRING STREET NW SUITE 400 ATLANTA, GA 30309 58-1609015									

(4) GEORGIA TECH FOUNDATION FUNDING CORPORATION

(5) GEORGIA INSTITUTE OF TECHNOLOGY

Part V	Transactions With Related Organizations Complete if the organizatio	n answer	ed "Yes" on Form	990, Part IV, lın	e 34, 35b, or 36.			
Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	No
1 During t	ne tax year, did the orgranization engage in any of the following transactions with one or	r more rela	ted organizations lis	ted in Parts II-IV				
a Rece	pt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity					1a		No
b Gift,	grant, or capital contribution to related organization(s)					1b	Yes	
c Gift,	c Gift, grant, or capital contribution from related organization(s)							
d Loan:	d Loans or loan guarantees to or for related organization(s)							
e Loans	or loan guarantees by related organization(s)					1e	Yes	
f Divid	ends from related organization(s)					1f		
g Sale	g Sale of assets to related organization(s)							
h Purcl								
i Excha	nge of assets with related organization(s)					1i		No
j Lease	of facilities, equipment, or other assets to related organization(s)					1j		No
k Lease of facilities, equipment, or other assets from related organization(s)								No
l Performance of services or membership or fundraising solicitations for related organization(s)						11	Yes	
m Perfoi	mance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharır	g of facilities, equipment, mailing lists, or other assets with related organization(s)					1n		No
o Shari	ng of paid employees with related organization(s)					10		No
p Reim	oursement paid to related organization(s) for expenses					1 p	Yes	
q Reim	oursement paid by related organization(s) for expenses					1q		No
r Othei	transfer of cash or property to related organization(s)					1r		No
s Othe	transfer of cash or property from related organization(s)					1s		No
2 If the	answer to any of the above is "Yes," see the instructions for information on who must c	omplete th	nis line, including co	vered relationships	and transaction thresholds			
	(a) Name of related organization		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining an	nount i	involve	d
(1) GEORGIA	TECH FOUNDATION FUNDING CORPORATION	E			FMV			
(2) GEORGIA	INSTITUTE OF TECHNOLOGY	В	,		FMV			
(3) GEORGIA	TECH FOUNDATION FUNDING CORPORATION	В			FMV			

С

FMV

FMV

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

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No	
									\Box	1			

Schedule R (Form 990) 2014

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

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Additional Data

Software ID:

Software Version:

EIN: 58-6043294

Name: GEORGIA TECH FOUNDATION INC

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(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
THE FIFTH STREET HOTEL LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	HOLDING COMP	GA	7,484,134	38,743,179	GTF INC
TECHNOLOGY SQUARE LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	HOLDING COMP	GA	6,908,078	134,984,190	GTF INC
CYPRESS ACADEMY LLC 760 SRPING ST NW STE 400 ATLANTA, GA 30308 26-3042898	HOLDING COMP	GA		4,895,803	GTF INC
GEORGIA TECH FOUNDATION PROPERTIES LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	REAL ESTATE	GA		0	GTF INC
ACADEMY OF MEDICINE LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	REAL ESTATE	GA		0	GTF INC
MIDTOWN OPERA LLC 760 SPRING ST NW STE 400 ATLANTA, GA 30308 58-6043294	REAL ESTATE	GA		0	GTF INC