EXTENDED TO FEBRUARY 18, 2020

D⊊partment 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 foundations)

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

► Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public Inspection

ŠΑ	For th	ne 2018 calendar year, or tax year beginning $APR \ 1$ , $2018$ and	ending ]	<u>MAR 31, 2019</u>	
B	Check	C Name of organization		D Employer identifi	cation number
•	applicat	LIBERTY BOWL FESTIVAL ASSOCIATION			
٦ [	Addr	ess C/O LIBERTY BOWL VENTURE, INC.			
<u> </u>	Nam chan	e	62-6	064769	
	Initia	1	Room/suite		
<b>≝</b> ें	Final	959 RIDGEWAY LOOP	201		)795-7700
DATE	Iretun termi ated	n-		G Gross receipts \$	10,517,500.
後 「	Amer	nded MEMBUTC MM 20120		H(a) Is this a group re	
<b>ਭ</b> ਾਂ	Appli			for subordinates	
[S] <sup>L</sup>		SAME AS C ABOVE	<b>~</b> /	H(b) Are all subordinates in	
POSTMARK	Tayas	xempt status	or 7 52	<del>_</del> ' '	list. (see instructions)
		ite: HTTP://WWW.LIBERTYBOWL.ORG	il Pari Sc	<b>–</b>	
<u>J</u>			I Van	H(c) Group exemption	A State of legal domicile; TN
	Part I	of organization: Corporation Trust X Association Other Summary		r of formation. 100 / F	M State of legal domiche, 114
نا		Briefly describe the organization's mission or most significant activities PROMO	ንጥፑ ሮ(	OCTAL/ECONOM	C WELFARE
	စ္က  1	OF MID-SOUTH & CITIZENS; SUPPORT MISSION—			
	al				
	2	Check this box In the organization discontinued its operations or dispose	ed of more		
	§ 3	Number of voting members of the governing body (Part VI, line 1a)	cco	(A) (C) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A	5
	4	Number of independent voting members of the governing body (Part VI, line 11)	. FEB	06 2020	5
	ဖ္မ 5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			0
3	<b>}</b>   6	Total number of volunteers (estimate if necessary)	OGI	DEN, UT	0
	Ť۱	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	<u>`</u>   b	Net unrelated business taxable income from Form 990-T, line 38		7b	0.
			<u> </u>	Prior Year	Current Year
	<u>.</u> 8	Contributions and grants (Part VIII, line 1h)	<b>⊢</b>	41,615.	24,675.
į	9	Program service revenue (Part VIII, line 2g)		11,321,670.	10,021,169.
ز	9 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>⊢</b>	1,982.	45,907.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	187,805.	177,137.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	_	11,553,072.	10,268,888.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	4,294,682.	4,700,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	<u> </u>
9	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	. L.	0.	<u> </u>
- 3	16a b	Professional fundraising fees (Part IX, column (A), line 11e)	<u></u>	0.	0.
í	Ь	Total fundraising expenses (Part IX, column (D), line 25)	<u>0.                                    </u>		
نُ	<u>17 ا</u> آ	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	. L	7,258,390.	5,568,888.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,553,072.	10,268,888.
	19	Revenue less expenses. Subtract line 18 from line 12		0.	0.
þ			Ве	eginning of Current Year	End of Year
ets	혈 20	Total assets (Part X, line 16)		2,077,204.	2,084,631.
Ass	품 금 21	Total liabilities (Part X, line 26)		116,661.	124,088.
Net Assets or	<u> 22</u>	Net assets or fund balances. Subtract line 21 from line 20		1,960,543.	1,960,543.
	art II	Signature Block			
Un	der pena	alties of perjury, I declare that I have examined this return, including accompanying schedules a	and statem	ents, and to the best of my	knowledge and belief, it is
	-	ot, and complete. Declaration of preparer (other than officer) is based on all information of whic			
		Yew Winterd		9/5/19	
Sig	חנ	Signature of officer		Date	
He		PERRY WINSTEAD, CONTROLLER			
		Type or print name and title			
_		Print/Type preparer's name Preparer's signature	7	Date Check	PTIN
Pai	d	AMY M. DOOLIN AMY M. DOOLIN		9/05/19 of self-employe	P01297217
	parer	Firm's name DIXON HUGHES GOODMAN LLP	OCAN	Firm's EIN	56-0747981
	Only	Firm's address 999 S. SHADY GROVE RD, STE 400		THEN S EIN	<u> </u>
บชเ	, only	MEMPHIS, TN 38120		Dhone == / 0/	01)761-3000
_				Prione no. ( 9)	
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No
832	001 12-3	1-18 LHA For Paperwork Reduction Act Notice, see the separate instruction	ıs.	a:	2 % Form <b>990</b> (2018)
				10	

C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Form 990 (2018) Page 2 Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission. SEE SCHEDULE O Did the organization undertake any significant program services during the year which were not listed on the Yes X No. prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 5,839,242. including grants of \$ 4,700,000.) (Revenue \$ 10,021,169.) ) (Expenses \$ THE LIBERTY BOWL FESTIVAL ASSOCIATION IS HOST TO THE ANNUAL AUTOZONE LIBERTY BOWL NCAA COLLEGE FOOTBALL GAME AND RELATED EVENTS HELD ANNUALLY IN MEMPHIS, TN. THE CITY AND ITS CITIZENS ARE HOSTS TO GUESTS FROM AROUND THE COUNTRY AND TO A NATIONAL TELEVISION AUDIENCE. ASSOCIATION SPONSORS ATHLETIC, CULTURAL, CIVIC AND RELATED ACTIVITIES TO PROMOTE THE SOCIAL AND ECONOMIC WELFARE OF THE MID-SOUTH AND ITS CITIZENS. THE ASSOCIATION PROMOTES AND SUPPORTS THE MISSION OF AMERICAN UNIVERSITIES OF HIGHER EDUCATION. \_\_\_\_\_ including grants of \$ \_ (Code ) (Expenses \$ ) (Revenue \$ (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ Other program services (Describe in Schedule O.) (Expenses \$ ) (Revenue \$ 5,839,242. Total program service expenses Form 990 (2018)

62-6064769

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		1	l
	public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	1	1	İ
	during the tax year? If "Yes," complete Schedule C, Part II	4		
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	X	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	1		
	Schedule D, Part III	8		X
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		<u>X</u>
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X	İ		,
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ļ		
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	ŀ		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		l	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		- 1	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	, and the same and			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		ŀ	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		1	
	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		<u>X</u>
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			77
_	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	$\rightarrow$	<u>X</u>
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	1		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1	ļ	••
_	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
В	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	X	
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	- 1		••
	complete Schedule G, Part III	19	$\dashv$	<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	+	X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		<b>.</b>	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	Eorm S	X	
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Part IV | Checklist of Required Schedules (continued)

			Yes	No
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23	ĺ	Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	1
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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	ŀ	<b>!</b>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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)			ا ا
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	1 1	Ì	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M .	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>_X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		i	
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		İ	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34	<del></del>	$\frac{x}{x}$
35a		35a	∤	<u>^</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		İ	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	$\dashv$	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		į	
	If "Yes," complete Schedule R, Part V, line 2	36	-	
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	- 1	X
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	3/	$\dashv$	<del></del>
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
Par		<u> </u>	1	—
	Check if Schedule O contains a response or note to any line in this Part V			
		$\neg$	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0	•	- 1	1
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			_ [
-	(gambling) winnings to prize winners?	1c	X	

Page 5

	Statements negaring Other ins Finings and Tax Compliance (continued)	· ···			
,	<b>-</b>	1	<u> </u>	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			ľ	
			<u> 이</u>	_	_
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		_ 2b	-	+
٥	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		٠	-	-
3a	5		3a	1	X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		_3b	+	1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	•	1.	1	x
<b>h</b>	financial account in a foreign country (such as a bank account, securities account, or other financial account "Yes," enter the name of the foreign country	ount)?	<u>4a</u>		┼^
J	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acco	unts (EDAD)	Ι'	1	1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	unts (FBAN).	5a		X
b		n?	5b	<del>                                     </del>	X
c			5c	1	<del> </del>
_	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the or	ganization solicit	130	+	
	any contributions that were not tax deductible as charitable contributions?	ga2011011	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or gifts		$\top$	
	were not tax deductible?	3	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	•			1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	s provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re-	quired			
	to file Form 8282?		7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year . 70	1		.	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra	••	7e	↓	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		71	_	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	•	. 7g	1	[
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	1	<u> </u>
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	1-	
9	Sponsoring organizations maintaining donor advised funds.			·	
	Did the sponsoring organization make any taxable distributions under section 4966?		9a	╂	
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter		9b	<del>                                     </del>	<del>  ,</del>
	Initiation fees and capital contributions included on Part VIII, line 12	_1	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		<b>-</b>		Ì
11	Section 501(c)(12) organizations. Enter:	<u>,</u>	₫′		
	Gross income from members or shareholders	a l			
	Gross income from other sources (Do not net amounts due or paid to other sources against	-	1∙	.	٥
	amounts due or received from them.)	, l			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104		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.		Ŀ	L	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			.	. [
þ	Enter the amount of reserves the organization is required to maintain by the states in which the		l		
	organization is licensed to issue qualified health plans	)			
	Enter the amount of reserves on hand	:	⊢–	$\vdash \vdash$	
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b	$\longmapsto$	
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	or	ŀ		••
	excess parachute payment(s) during the year?		15	<del>  </del>	<u> </u>
	If "Yes," see instructions and file Form 4720, Schedule N.				<del></del> -
	Is the organization an educational institution subject to the section 4968 excise tax on net investment inco	me?	16	$\vdash$	<u> </u>
	If "Yes," complete Form 4720, Schedule O.		Eor~	990 (	2010
			1 0111	, (	4U10]

C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Form 990 (2018) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 5 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. 5 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b 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 g X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10h 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ TN Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply. X Another's website X Upon request Other (explain in Schedule O) \_\_\_ Own website 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. State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2018)

100005 707720 1000271072

LIBERTY BOWL VENTURE, INC. - 901-795-7700 959 RIDGEWAY LOOP, SUITE 201, MEMPHIS,

C/O LIBERTY BOWL VENTURE, INC.

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

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

X Check this box if neither the organization n					nsat	ed any current officer, d				
(A)	(B)	(c)					(D)	(E)	(F)	
Name and Title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		_	Juac	III ect	or/u us	Tee)	from	from related	other
	(list any hours for	recto				ŀ	1	the	organizations	compensation from the
	related	0 20	噩			Sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	Laste	l trus		ae	ng m		(44-27 1099-141130)		and related
	below	l g	e e e	_	l ge	stco	_	1		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Ē			, <b>g</b>
(1) LEIGH SHOCKEY	2.00									
CHAIRMAN		X			L	╙	<u> </u>	0.	0.	0.
(2) BILL KINKADE	2.00	l			Į					
PRESIDENT	2 00	X	ļ.,		⊢		_	0.	0.	0.
(3) BILL GILES	2.00	х						0.	0.	^
VICE PRESIDENT (4) CHRIS MOORE	2.00	^			-			0.	U •	0.
SECRETARY	2.00	х						0.	0.	0.
(5) DAVID BOSTON	2.00		П		<b>-</b>					
TREASURER		х						0.	0.	_ 0.
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Form 990 (2018)

LIBERTY BOWL FESTIVAL ASSOCIATION C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Form 990 (2018) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (C) (E) (F) Position Average Name and title Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an week from from related other (list any trustee or director the organizations compensation hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations line) 0. 1b Sub-total 0. 0. 0. 0. c Total from continuation sheets to Part VII, Section A 0. 0. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 0 compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on 3 X line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 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 Section B. Independent Contractors 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.

Name and	(A) I business address NONE	(B) Description of service	s (C) Compensation
2 Total number of independent con \$100,000 of compensation from t	<del>-</del>	those listed above) who received more that	in 4

Form 990 (2018)

Page 9

Check if Schedule O contains a response or note to any line in t							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	
\$ 5	<u>a</u> 1	a	Federated campaigns	1a					20134	
, Grants	3	b	Membership dues	1b	24,675.	1				
			Fundraising events	1c	(	1 4 3 3 4 2 2 2				
Gifts	3	d		1d						
Contributions, G		е	Government grants (contribut	ions) 1e						
	7	f	All other contributions, gifts, gran							
PC.	9		similar amounts not included abo							
ĒČ	3	g	Noncash contributions included in lines	1a-1f \$	, ,		ումարդարհերդում է և իներկանար	property of the state of the st	managariya. 7 17 buriya	
Ö		h_	Total. Add lines 1a-1f			24,675.		<b>784 (06</b>		
				_	Business Code					
ø	2	а	GAME TICKET SALES		711300	4,102,078.	4,102,078.			
Ž,		b	MEDIA		711300	3,706,849.	3,706,849.			
S		С	SPONSORSHIPS		711300	1,580,675.	1,580,675.			
am		d	PREMIUM SEATING CHARGE	s	711300	377,780.	377,780.			
Program Service	1	e	PROG. LICENSES & ADS		711300	226,800.	226,800.			
₫.		f	All other program service reve	enue	711300	26,987.	26,987.			
		9	Total. Add lines 2a-2f			10,021,169.		XXXXXXXXX		
	. 3		Investment income (including	dıvıdends, ınte	rest <sub>,</sub> and		<i>s</i>	'		
	l		other similar amounts)	•		45,907.			45,907.	
	4		Income from investment of ta	x-exempt bond	proceeds					
,	5		Royalties .	<del></del>	<u>_</u>	ST BELLEVER WAS AN AREA FOR	White Strong William 1 P2	1988,110 MORES THE 18 46.81	1.000.00 km km km km km km km km km km km km km	
				(i) Real	(ii) Personal					
	6		Gross rents	1.1	<del> </del>					
			Less rental expenses	<u> </u>	<del>                                     </del>					
			Rental income or (loss)			The state of the s	The Assessment Constitution of the Constitutio	ather a last transfer		
			Net rental income or (loss)	(A) Securities	6) Other	STATE OF COMMENT	Deci and American	We the street state	THE SULLAND	
	'		Gross amount from sales of	(i) Securities	(ii) Other					
	Į,		assets other than inventory Less cost or other basis	<del></del>	<del></del>					
	[ '	_	and sales expenses	1	1					
	Ι.		Gain or (loss)							
			Net gain or (loss)		<u> </u>	1		Z Version Wassers		
			Gross income from fundraising	a events (not		PINTER TOUTON	THE STATE OF THE S	7447777777		
Jue			including \$	of		op gebruiken in der stelle der st				
Ş.	l		contributions reported on line		1.					
æ	ľ		Part IV, line 18		425,749.					
Other Revenu			Less direct expenses	ı	248,612.					
O			Net income or (loss) from fund	raising events		.177,137.			177,137.	
	9 :	3	Gross income from gaming ac	tivities. See				National Control		
			Part IV, lino 19	, ,	a					
	ŀ	3	Less direct expenses	. '	·			6/1 <b>4</b> (************************************		
	,	•	Net income or (loss) from gam	ing activities						
	10 a		Gross sales of inventory, less i	returns						
			and allowances '	•	·	porturalism at a designation de la company		ji magaminjigi at kalumini dami g		
			Less: cost of goods sold		·					
		<u>;                                    </u>	Net income or (loss) from sales			policing 27 to 12th 14 Society and the Section 27	K. SPARENCES AND TO SEPTEMBER POTENTIANO	90000 A 10000 A 1000 A	PARAMETRIA TRANSCRIPTOR AND THE PROPERTY AND THE	
		_	Miscellaneous Revenue	<u>-</u>	Business Code					
	11 a		·		<u> </u>				<del></del>	
	k	)	<u> </u>	<del></del>	<u> </u>				<del></del>	
	C	;								
Ì	•		All other revenue				STANDERS TO SE	HIDEREN WAR TO MISTER		
	40		Total. Add lines 11a-11d			10,268,888.	10,021,169.	0.	223,044.	
	<u> 12 </u>	_	Total revenue. See instructions			20,200,000.	,,		220,033.	

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21	4,700,000.	4,700,000.							
2	Grants and other assistance to domestic				JULY WITH STATE					
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign			Mark Company	A CONTRACTOR OF THE PARTY OF TH					
•	organizations, foreign governments, and foreign		,							
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members				TO THE REAL PROPERTY.					
5	Compensation of current officers, directors,			133 SAME TO VERY WAR NO SHEARING	A Section of the Asset of Asset of Asset of the Asset of					
,	trustees, and key employees									
6	Compensation not included above, to disqualified	·- <del>-</del>								
0	persons (as defined under section 4958(f)(1)) and	,		}						
		İ	ľ							
_	persons described in section 4958(c)(3)(B)		<del> </del>							
7	Other salaries and wages	<u> </u>								
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes		· · · · · · · · · · · · · · · · · · ·							
11	Fees for services (non-employees)	4 420 646		4 400 646						
а	Management '	4,429,646.		4,429,646.						
Ь	Legal	10 650	10 650							
С	Accounting	19,650.	19,650.							
d	,		Standardona a completor and the manager	dr. wer Person at the later of the Control of the C						
е	Professional fundraising services. See Part IV, line 17		antigues and the	TO THE STATE OF TH						
f	Investment management fees		ļ							
g	Other. (If line 11g amount exceeds 10% of line 25,		·							
	column (A) amount, list line 11g expenses on Sch (0.)	465,495.	465,495.							
12	Advertising and promotion	36,115.	. 36,115.							
13	Office expenses	53,728.	53,728.							
14	Information technology			`						
15	Royalties			•						
16	Occupancy .									
17	Travel	24,024.	24,024.	٠ •						
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates			-						
22 \	Depreciation, depletion, and amortization	4,944.	4,944.	•						
23 `	Insurance'	52,596.	52,596.		•					
24	Other expenses, Itemize expenses not covered									
	above. (List miscellaneous expenses in line 24o. If line 24e amount exceeds 10% of line 25, column (A)		dilien mayan 13,200 da dibiyibi	galasani galaruh dalam d	) 7 (m) (m) (m) (m) (m) (m) (m) (m) (m) (m)					
	amount, list line 24e expenses on Schedule 0.)									
· a	OTHER OPERATING EXPENSE	228,549.	_ 228,549.							
b	OFFICIALS/GAME RELATED	148,957.	148,957.		·					
C	STADIEM RENT	105,184.	105,184.	, ,						
ď	<del>,</del>	_		(						
	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	10,268,888.	5,839,242.	4,429,646.	0.					
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)				•					

Form 990 (2018)
Part X Balance Sheet

R +1% G	34240° 6	Check if Schedule O contains a response or not	o to a	ay line in this Bart V	<del></del>		
		Crieck if Scriedule O Contains a response of not	e to a	iy iine iii tiiis Fart A	T (A)	T	
		•			(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing			2,013,816.	1	2,020,872.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			2,500.	4	10,447.
	5	Loans and other receivables from current and fo	rmer c	officers directors	AT A STATE OF THE		
	1	trustees, key employees, and highest compensa		14.00			
	1.	Part II of Schedule L		5			
	6	Loans and other receivables from other disqualif	ied ne	rsons (as defined under		AGE ST	
		section 4958(f)(1)), persons described in section		•		1	
		employers and sponsoring organizations of secti					
4		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net	<b>ح</b>	1010 1 411 11 01 0011 2		7	
As	8	Inventories for sale or use			<u> </u>	8	
	9	Prepaid expenses and deferred charges		•	10,128.	9	7,494.
	l .	Land, buildings, and equipment, cost or other	l	•		1000	
	""	basis, Complete Part VI of Schedule D	10a	88,406.	13.6		
	Ь		10b	76,588.	16,760.	10c	11,818.
	11	Investments - publicly traded securities		<u> </u>		11	
4'	12	Investments - other securities. See Part IV, line 1	1		h	12	
	13	Investments - program-related. See Part IV, line 1		(		13	. ,
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	34,000.	15	34,000.		
	16	Total assets. Add lines 1 through 15 (must equa	ıl line (	34)	2,077,204.	16	2,084,631.
	17	Accounts payable and accrued expenses		•	116,661.	17	124,088.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	•
	21	Escrow or custodial account liability. Complete P	art IV	of Schedule D		21	
co.	22	Loans and other payables to current and former					
Liabilities	l	key employees, highest compensated employees	s, and	disqualified persons.		110	
abil		Complete Part II of Schedule L		•		22	
ت	23	Secured mortgages and notes payable to unrelat	ed thu	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	third p	parties		24	•
	25	Other liabilities (including federal income tax, pay	ables	to related third		-	
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
	i	Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			116,661.	26	124,088.
		Organizations that follow SFAS 117 (ASC 958),	chec	k here ▶, X and			ing digital translation of the
ŝ		complete lines 27 through 29, and lines 33 and	34.				
Š	27	Unrestricted net assets			1,960,543.	27	1,960,543.
3ala	28	Temporarily restricted net assets				28	
힐	29	Permanently restricted net assets			Art. Call 1/ Prints 1 of Asserting Lines 30 Act. Their side	29	A PART OF THE PART
Ē		Organizations that do not follow SFAS 117 (AS	C 958	), check here 🕨 📖			
Net Assets or Fund Balances		and complete lines 30 through 34.		•			
ets	30	Capital stock or trust principal, or current funds		30			
Ass	31	Paid-in or capital surplus, or land, building, or equ				31	
et .	32	Retained earnings, endowment, accumulated incomment	ome, c	or other funds .	1 060 540	32	
2	33	Total net assets or fund balances			1,960,543.	33	1,960,543.
[	34	Total liabilities and net assets/fund balances			2,077,204.	34	2,084,631.

Forr	n 990 (2018) C/O LIBERTY BOWL VENTURE, INC.	62	-6064769	) Pa	age 12
Pa	Int XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
٠					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,26		
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,26	8,8	88.
3	Revenue less expenses Subtract line 2 from line 1	3			0.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,96	50,5	43.
5	Net unrealized gains (losses) on investments	5			
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,96	0,5	<u>43.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<b>,</b>	<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		·	[	"
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule (	Э.	ļ <u>.    </u>	<u> </u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	<b> </b> ,		
	separate basis, consolidated basis, or both			1	
	Separate basis Consolidated basis Both consolidated and separate basis			<del></del>	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<del> </del> ,
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	i		
	consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			٠,,
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<b> </b> -	X
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sched				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	jie Audi			
	Act and OMB Circular A-133?		3a	_	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ad audr	t	İ	

Form **990** (2018)

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

### SCHEDULE C

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. ➤ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public

OMB No. 1545-0047

Open to Publi Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on 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," on 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," on 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

<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>	ttions Complete Part III.			
Name of organization LIBERTY	BOWL FESTIVAL	ASSOCIATION	Em	ployer identification number
C/O LIE	SERTY BOWL VENTU	RE, INC.		62-6064769
Part I-A Complete if the or	ganization is exempt un	der section 501(c)	or is a section 527 o	rganization.
Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	tures	ical campaign activities		\$
Part I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization ur	nder section 4955	<b>&gt;</b>	\$
2 Enter the amount of any excise tax	incurred by organization manage	gers under section 495	5 .	\$
3 If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was a correction made?		•		Yes No
b If "Yes," describe in Part IV.				1/0)
Part I-C Complete if the org	ganization is exempt und	der section 501(c)	, except section 501 (	c)(3).
Enter the amount directly expended	, ,	•	•	\$
2 Enter the amount of the filing organ	nization's funds contributed to c	ther organizations for s		
exempt function activities			<b>&gt;</b> :	\$
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL	•	
line 17b		•	▶ :	\$
4 Did the filing organization file Form				Yes No
5 Enter the names, addresses and en	•	•	•	• •
made payments. For each organiza				
contributions received that were proposed political action committee (PAC). If	• •		•	te segregated fund or a
	<u> </u>	- 1	· - <del>- · · · · · · · · · · · · · · · · ·</del>	1 / 1 / 1 / 1
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
			funds. If none, enter ·0·.	
			,	delivered to a separate
				political organization.  If none, enter -0
	<u> </u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
- <u>-</u>				
		1	!	i

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018  Part II A Complete if the or	C/O LIBERT ganization is ex	Y BOWL VENTO	TRE, INC. in 501(c)(3) and fil	62-6 led Form 5768 (ele	064769 Page 2
section 501(h)).			·		
A Check ► I if the filing organiz	zation belongs to an a	affiliated group (and list i	n Part IV each affiliated	d group member's nam	e, address, EIN,
expenses, and sha	are of excess lobbyin	g expenditures).	•		
B Check  if the filing organiz	ation checked box A	and "limited control" pr	ovisions apply		
	nits on Lobbying Exp nditures" means am	oenditures ounts paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf	fluores public opinio	(grass roots labbung)		· · · · · · · · ·	<del></del>
	•		1	· · · · · · · · · · · · · · · · · · ·	
<ul> <li>b Total lobbying expenditures to inf</li> <li>c Total lobbying expenditures (add</li> </ul>	_	ody (direct lobbying)	•	<del>-</del>	, , , , , , , , , , , , , , , , , , ,
	•	,	•	<del></del>	
d Other exempt purpose expenditu				<u> </u>	<del></del>
e Total exempt purpose expenditur	1				
f Lobbying nontaxable amount. En				P PROCESS A STREET, COMPANIES STREET, AND A STREET, COMPANIES STRE	Taristic of contrast modes become supremoved in the San Co.
If the amount on line 1e, column (a),		obbying nontaxable an			
Not over \$500,000		of the amount on line 1e	<u> </u>	Property of the second	
Over \$500,000 but not over \$1,00	00,000 \$100,	000 plus 15% of the exc	ess over \$500,000.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Over \$1,000,000 but not over \$1,	500,000 \$175,	000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,,000,000        \$225,	000 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,0Ò	0,000.			
				30%的方式	
g Grassroots nontaxable amount (el	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If ze	ro or less, enter -0-			•	<del>,</del>
i Subtract line 1f from line 1c. If zer		·		•	•
j If there is an amount other than ze	ero on either line 1h c	r line 1:, did the organiz	ation file Form 4720		*
reporting section 4911 tax for this		· ···- · · · · · · · · · · · · · · · ·		Γ	Yes No
	4-Year A	veraging Period Under 501(h) election do not		of the five a law as he	
(Come or gainzations		rate instructions for li		or the live columns be	·
•		enditures During 4-Yea			
		T			
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	( <b>d</b> ) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount	PER CHARGO	444400000000000000000000000000000000000			•
(150% of line 2a, column(e))					
			-	A A COLON ON THE BUILDING WAS IN CO.	1 '
c Total lobbying expenditures	·				
·					
d Grassroots nontaxable amount	•		!		ı
e Grassroots ceiling amount	CARCACAL MARKA	WARREN WARREN	ALCONOMICA A	V-7945 20.0216 20.00	
(150% of line 2d, column (e))					
(10070 of mile Ed, Coldiffit (e))	THE TRUSKS WITH TO THE STREET	★1 本えどっかは一品が下品が正品はまたもかができ	- I south that there is a substitution of	AND THE PROPERTY OF THE PARTY O	
f Grassroots lobbying expenditures	<b>'</b> ,				
i Gradorooto loboying experiolitares	·	. 1			

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Page 3

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

	1 6		<u> </u>	b)
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	, No		ount
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?		,	-	,
d Mailings to members, legislators, or the public?				,
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	<del></del>			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
j Other activities?				
j Total. Add lines 1c through 1i	Y A ST	Telegraph and the second		
· ·	#U.SafeRitages ash.	ANTARA NECESARY	15-20-25-18-4-18-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1	(N) (N) (N) (N) (N) (N) (N) (N) (N) (N)
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	4_32504XX5504	ing majorista	Sentence AND CA	A DOMENT BOOK (SAFE)
b If "Yes," enter the amount of any tax incurred under section 4912	70.5			
c if "Yes," enter the amount of any tax incurred by organization managers under section 4912	Section of the second	322 7090M	NATURE N	KINE I FORES
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III:A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)//	S) or sec		lander whi - 14
501(c)(6).	11 00 1 (0)(0	<i>,,</i> 01 300		
301(0)(0).			Yes	No
			165	X
1 Were substantially all (90% or more) dues received nondeductible by members?		1 1	v	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	2	X	37
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section	e prior year	3 3	tion	Х
				. 2 io
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes."	NO, OR	(D) Part	III-A, IIIIe	, is
		<del></del>		
1 Dues, assessments and similar amounts from members		Yelkishan.		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
expenses for which the section 527(f) tax was paid).				
a Current year .		2a		
<b>b</b> Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ·		3		· · ·
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Partily: Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group	list): Part II-A	A. lines 1 an	d 2 (see	
nstructions), and Part II-B, line 1. Also, complete this part for any additional information.	,,	,		
, and a second of the second o				
,	,			
•				
<del></del>			·	
•				, ,
<u>-</u>			<del></del>	
<b>,</b>				
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1				
	Cobodul	a C /Earm	መርያ እና በርያር	E71 2040

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

LIBERTY BOWL FESTIVAL ASSOCIATION

C/O LIBERTY BOWL VENTURE

Open to Public

Employer identification number 62-6064769

Pa	rt I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iin		,
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	<del>-</del>	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	<del>-</del> -
	for charitable purposes and not for the benefit of the donor or	<u> </u>	•
	impermissible private benefit?		. Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, I	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or el	· · · · · · · · · · · · · · · · · · ·	orically important land area
	Protection of natural habitat		ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last
_	day of the tax year		Held at the End of the Tax Year
	Total number of conservation easements		2a
a h	Total acreage restricted by conservation easements	•	2b
b	Number of conservation easements on a certified historic stru	ucture included in (2)	2c
c	Number of conservation easements included in (c) acquired a		<del></del>
u	listed in the National Register	nter 7723/00, and not on a historic structu	2d
3	Number of conservation easements modified, transferred, rele	Pased extinguished or terminated by the	
J	year	sased, extinguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation easi	omant is located	
5	Does the organization have a written policy regarding the pen		
3	violations, and enforcement of the conservation easements it	<u> </u>	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	•	
0	Star and volunteer flours devoted to florintolling, inspecting, i	landing of violations, and emorcing cons	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ung of violations, and enforcing conservat	on consmitte during the year
•	\$\\$\$ \$\$ \$\$	ing of violations, and emorcing conservat	on easements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170/r	NAVDVI)
•	and section 170(h)(4)(B)(ii)?	satisfy the requirements of section 170(	Yes No
_			. —
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's infancial statements that describes the	te organization's accounting for
Pai	t III Organizations Maintaining Collections of	Art Historical Treasures or Oth	ner Similar Assets
<u> </u>	Complete if the organization answered "Yes" on Form 9		ioi oiiimai Addota.
	If the organization elected, as permitted under SFAS 116 (ASC		ant and balance shoot works of art
14			-
	historical treasures, or other similar assets held for public exhi		ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		and balance about modes of art bustoned
b	If the organization elected, as permitted under SFAS 116 (ASC	,, ,	
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of pub	ic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		gain, provide
	the following amounts required to be reported under SFAS 110	6 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Assets included in Form 990, Part X		▶ \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2018

		BERTY BOWL						62-60	64769	Page 2
	rt III Organizations Maintaining (									
3	Using the organization's acquisition, access (check all that apply):	ion, and other recor	ds, ched	ck any of the	e following th	at are a sı	gnıficant	use of its	collection	tems
а	Public exhibition		a 🗔	Loan or ex	change prog	rams				
t	Scholarly research		e	Other						
c	Preservation for future generations								_	
4	Provide a description of the organization's c	ollections and expla	ın how t	hev further	the organizat	ion's exer	not purpo	se in Part	XIII	
5	During the year, did the organization solicit of								·····	
	to be sold to raise funds rather than to be m						400010		Yes	☐ No
Pa	rt IV Escrow and Custodial Arran	gements. Comp				"Yes" on	Form 99	0, Part IV,		
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contributio	ns or other as	ssets not i	ncluded			
	on Form 990, Part X?		`						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table <sup>.</sup>						
	•								Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance .						_1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or o	custodial acco	ount liabili	ty?		Yes	☐ No
ь										
Pa	rt V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on F	orm 990, Par	t IV, line 1	0.			
		(a) Current year	(b) i	Pnor year	(c) Two yea	ars back	(d) Three y	years back	(e) Four y	ears back
1a	Beginning of year balance									
ь	Contributions									
c	Net investment earnings, gains, and losses									_
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses		1							
g	End of year balance									
2	Provide the estimated percentage of the curr	ent vear end balanc	e fine 1	a. column (a	i)) held as:					
а	Board designated or quasi-endowment	<b>,</b>	%	g, co.c (c	.,,					
b	Permanent endowment	%								
C	Temporarily restricted endowment	<u></u> /%								
_	The percentages on lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posses		ition tha	t are held a	nd administer	red for the	Organiza	ition		
	py.					00 101 1110	organiza		[~	es No
	(i) unrelated organizations								3a(i)	23 140
	(ii) related organizations			•				•	3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on Si	chedule R2		•			3ь	
4	Describe in Part XIII the intended uses of the						•		_ <u> </u>	
	t VI Land, Buildings, and Equipme		WILL CITE I	arias.						
	Complete if the organization answered		. Part IV	/. line 11a. S	See Form 990	. Part X. li	ne 10			
	Description of property	(a) Cost or o			or other		cumulate	<u>a                                    </u>	(d) Book v	value.
	property	basis (investr			(other)		reciation	~	(a) DOOK V	wide.
1a	Land	1			• •					
	Buildings						<u> </u>			
	Leasehold improvements		_	2.	0,415.		10,20	7.	1.0	208.
d	Equipment				1,755.		$\frac{10,14}{10,14}$			610.
	Other				6,236.		56,23			0.
	. Add lines 1a through 1e. (Column (d) must ed	uni Form 000, Dard	V 651:				<u> </u>		11	818.
Vial	The same of the tribught res (Column to) must ed	iuai Form 990. Part 7	s. colum	ıı (⊠). Iine 1	VC.)				<u> </u>	010.

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 C/O LIBERTY		ASSOCIATION URE, INC.		62-6064769	Page
Part VII Investments - Other Securities.					, ugo
Complete if the organization answered "Yes"	on Form 990, Part IV				
(a) Description of security or category (including name of security)	(b) Book value	e (c) Method	of valuation Cost or	end-of-year market va	alue '
(1) Financial derivatives		,			
(2) Closely-held equity interests				•	
(3). Other	***		<u> </u>		- •
(A)		,			ł
(B)		•		-	
(C) ·	1			<u></u>	
(D) '					
(E) '					
(F)	•				
(G) •				<u> </u>	1
(H)				•	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					经货品
Rart VIII Investments - Program Related.	, , , , , , , , , , , , , , , , , , , ,		•		
Complete if the organization answered "Yes" of	on Form 990, Part IV	, line 11c. See Form 99	0, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method o	of valuation. Cost or	end-of-year market va	ilue -
(1)	·				
(2)		ı		:	
(3) .		,			
(4)					
(5)					
(6)				•	
(7)			<i>-</i>		. •
(8)					
(9)					
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			กลักษา เมื่อเลือดก็เลิกคลักเลือดก็ เลือดก็	incontinuation management in the 12 days	
RantilX Other Assets.		•	•		
Complete if the organization answered "Yes" of		, line 11d. See Form 99	0, Part X, line 15.	-	
• (a) [	Description	,		(b) Book valu	Je
(1)		<u> </u>			
(2)		· · ·	• 		
(3)					
(4)					
(5)			·		
(6)				, , , , , , , , , , , , , , , , , , ,	
(7) .		·		,	
(8)					•
(9)					
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	15.)			<b>&gt;</b>	
Complete if the organization answered "Yes" or	n Form 990, Part IV,	line 11e or 11f. See Fo	rm 990, Part X, line 2	25.	
(a) Description of liability		(b) Book value			
(1) Federal income taxes	· · · · · · · · · · · · · · · · · · ·				
(2)					
(3) .					
(4)	•				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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 • X

Schedule D (Form 990) 2018

(7) (8) C/O LIBERTY BOWL VENTURE, INC.

Schedule D (Form 990) 2018

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832054 10-29-18

19

Schedule D (Form 990) 2018

62-6064769

### SCHEDULE G

(Form 990 or 990-EZ)

### Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

► Attach to Form 990 or Form 990-EZ. Open to Public

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection Name of the organization LIBERTY BOWL FESTIVAL ASSOCIATION **Employer identification number** C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) to (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser or control of organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2018

LIBERTY BOWL FESTIVAL ASSOCIATION Schedule G (Form 990 or 990-EZ) 2018 C/O LIBERTY BOWL VENTURE, INC. 62-6064769 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events PREGAME FORMAL (add col (a) through BRUNCH DINNER col. (c)) (event type) (event type) (total number) 199,569. 182,200. 43,980. 425,749. Gross receipts 2 Less: Contributions 199,569. 182,200. 43,980. 425,749. Gross income (line 1 minus line 2) 4. Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages Entertainment 113,971. 113,305. 21,336. 248,612 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 248,612 177,137 11 Net income summary. Subtract line 10 from line 3, column (d) Part III | Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes % Yes 6 Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d)

8 Net gaming income summary. Subtract lin	e 7 from line 1, column (d)	<b>&gt;</b>
9 Enter the state(s) in which the organization col a is the organization licensed to conduct gaming  1. [6] [No. 1] and [a. 1].	nducts gaming activities:	Yes No
10a Were any of the organization's gaming license b If "Yes," explain.	s revoked, suspended, or terminated during the tax year?	Yes No
32082 10-03-18	Sche	edule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) 2018 C/O LIBERTY BOWL VENTURE, INC.	62-6064769 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a   %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	
The first time that is also as a second and possess time properties and angular second and to second	
Name	
Address	<del></del>
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the an	nount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name ►	·
Address >	
16 Gaming manager information.	
Name ►	
Gaming manager compensation ▶ \$	
Description of services provided	
	···
Director/officer Employee Independent contractor	
17 Mandatory distributions.	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	· Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the
organization's own exempt activities during the tax year > \$	·
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v	); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	

# LIBERTY BOWL FESTIVAL ASSOCIATION 62-6064769 Page 4 Schedule G (Form 990 or 990-EZ) C/O LIBERT Part V Supplemental Information (continued) C/O LIBERTY BOWL VENTURE, INC.

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▼ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047	2018	Open to Public Inspection

Employer identification number 62-6064769 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection LIBERTY BOWL FESTIVAL ASSOCIATION INC C/O LIBERTY BOWL VENTURE, Part I General Information on Grants and Assistance Name of the organization

% × es — Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. critena used to award the grants or assistance? Part II

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000. Part II can	be duplicated if additic	onal space is neede	ğ.			
1 (a) Name and address of organization	( <b>p</b> ) EIN	(c) IRC section	(d) Amount of	<u> </u>	(f) Method of	(g) Description of	(h) Purpose of grant
or government		(if applicable)	cash grant	non-cash assistance	FMV, appraisal, other)	noncash assistance	or assistance
							TO SUPPORT THE MISSION OF
BIG 12 CONFERENCE, INC							AMERICAN UNIVERSITIES OF
400 E. JOHN CARPENTER FREEWAY							HIGHER EDUCATION AND
IRVING, TX 75062	75-2604555	501(C)(3)	2,000,000.	0.			THEIR CONFERENCES WHO
							TO SUPPORT THE MISSION OF
SOUTHEASTERN CONFERENCE							AMERICAN UNIVERSITIES OF
2201 RICHARD ARRINGTON BOULEVARD NO							HIGHER EDUCATION AND
BIRMINGHAM, AL 35203-1103	63-0377461 501(C)(3)	501(c)(3) -	2,700,000.	0.			THEIR CONFERENCES WHO
		,					
						_	
						-	
			-				

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS 3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

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62-6064769

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2018) | Part III. | Grants and Other

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
				ι	
Part IV Supplemental Information. Provide the information required in	quired in Part I, lin	e 2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	Iditional information.	
PART II, LINE 1, COLUMN (H):			-		
NAME OF ORGANIZATION OR GOVERNMENT:		BIG 12 CONFERENCE,	s, INC		
(H) PURPOSE OF GRANT OR ASSISTANCE:	ο'n	ORT THE MI	SUPPORT THE MISSION OF AMERICAN	MERICAN	
UNIVERSITIES OF HIGHER EDUCATION AND	THEIR	CONFERENCES WHO	S WHO PART	PARTICIPATE IN	
THE LIBERTY BOWL GAME EACH YEAR.	į				
	:				

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHEASTERN CONFERENCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE MISSION OF AMERICAN

UNIVERSITIES OF HIGHER EDUCATION AND THEIR CONFERENCES WHO PARTICIPATE IN

832102 11-02-18

Schedule I (Form 990) (2018)

# LIBERTY BOWL FESTIVAL ASSOCIATION 62-6064769 Page 2 C/O LIBERTY BOWL VENTURE, INC. Schedule I (Form 990) Part IV Supplemental Information THE LIBERTY BOWL GAME EACH YEAR.

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### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information. LIBERTY BOWL FESTIVAL ASSOCIATION

C/O LIBERTY BOWL VENTURE,

Open to Public Inspection

OMB No 1545-0047

**Employer identification number** 62-6064769

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE LIBERTY BOWL FESTIVAL ASSOCIATION IS HOST TO THE ANNUAL AUTOZONE
LIBERTY BOWL NCAA COLLEGE FOOTBALL GAME AND RELATED EVENTS HELD
ANNUALLY IN MEMPHIS, TN. THE CITY AND ITS CITIZENS ARE HOSTS TO GUESTS
FROM AROUND THE COUNTRY AND TO A NATIONAL TELEVISION AUDIENCE. THE
ASSOCIATION SPONSORS ATHLETIC, CULTURAL, CIVIC AND RELATED ACTIVITIES
TO PROMOTE THE SOCIAL AND ECONOMIC WELFARE OF THE MID-SOUTH AND ITS
CITIZENS. THE ASSOCIATION PROMOTES AND SUPPORTS THE MISSION OF
AMERICAN UNIVERSITIES OF HIGHER EDUCATION.
FORM 990, PART VI, SECTION A, LINE 3:
LIBERTY BOWL FESTIVAL ASSOCIATION HAS AN AGREEMENT WITH LIBERTY BOWL
VENTURE, INC., LOCATED AT 959 RIDGEWAY LOOP, SUITE 201, MEMPHIS, TN 38120,
FOR THE OPERATIONS AND THE MANAGEMENT OF THE BOWL. LIBERTY BOWL VENTURE,
INC. RECEIVED COMPENSATION IN ACCORDANCE WITH THE TERMS OF THIS AGREEMENT.
FORM 990, PART VI, SECTION B, LINE 11B:
THE TAX RETURN IS CURRENTLY REVIEWED BY LIBERTY BOWL VENTURE INC.
<del></del>
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC IN ITS OFFICE AND UPON REQUEST.