Form 990

**Return of Organization Exempt From Income Tax** 

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

2018

Department of the Treasury Internal Revenue Service 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

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AUBURN RESEARCH & TECHNOLOGY FOUNDATION

20-1806718

Form 990 (2018)

Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 1 X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Χ Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, Х assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . . . . . . Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Χ 8 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 9 Χ Did the organization, directly or through a related organization, hold assets in temporarily restricted Χ endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. . . . . . . 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Х 11a b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more Χ 11b c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more Х of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.......... 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Х 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . . . . 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . . . 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Χ 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If Х "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . | 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. . . . . . . . . . 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States?.......... 14a 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 Х foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Χ Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)........... 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х 19 Х 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . . . . . . . . . . . . . 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . . . 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

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Part	IV Checklist of Required Schedules (continued)		V	
	Did the account was a thought 000 of contains another positions to be for demontic individuals on		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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<del>"</del>
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	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 Schedule K If "No." go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		<b></b>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del>                                     </del>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25.		х
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		$\stackrel{\boldsymbol{\wedge}}{-}$
U	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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			$\overline{}$
	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			ĺ
	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,			ĺ
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		x
•	Schedule L, Part IV	260		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	li		
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			.,
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		х	ĺ
25.0	or IV, and Part V, line 1	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ĺ
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	Х	L
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	Х	
Part				$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part V	• • • •	Yes	الليار
4 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 10	<del></del>	162	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			ĺ
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
·	reportable gaming (gambling) winnings to prize winners?	1c	Х	 
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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0.		-	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		Х
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	_	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
	solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			,
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		X
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_
·	required to file Form 8282?	7c		х
ч	If "Yes," indicate the number of Forms 8282 filed during the year			,
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
		7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		Х
	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		Х
9	Sponsoring organizations maintaining donor advised funds.			,
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			,
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			١,
11	Section 501(c)(12) organizations. Enter			i
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			١.
	against amounts due or received from them )		-	١.
12 a	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 Lab			1
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?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			•
b	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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		_ X
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O Check if Schedule O contains a response or note to any line in this Part VI	See ır	struc	tions
Sect	ion A. Governing Body and Management	···	<u>···</u>	
0000	on A. Coverning Dody and management		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			
h	committee, explain in Schedule O  Enter the number of voting members included in line 1a, above, who are independent	þ		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
•	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			1
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
	Did the organization make any significant changes to its governing documents since the prior Point 950 was filed?	5		Х
5	Did the organization become aware during the year of a significant diversion of the organizations assets?	6		Х
6 7-	Did the organization have members of stockholders, or other persons who had the power to elect or appoint	<u> </u>		
7a	one or more members of the governing body?	7a	x	
	Are any governance decisions of the organization reserved to (or subject to approval by) members,	<u></u>		<del>                                     </del>
D	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			1
а	The governing body?	8a	Х	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	l	١	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	ļ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	_	<u> </u>
13	Did the organization have a written whistleblower policy?	13	Х	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by	İ		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	İ		
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	'		Ī
_	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?	46h		
Soci	on C. Disclosure	16b		
			-	
17	List the states with which a copy of this Form 990 is required to be filed   Section 6104 requires an expension to make its Forms 1023 (1024 or 1024 A if applicable), 990, and 990 I	10	tio= 5	:01/-
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	y, and
20	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 record CARY CHANDLER 570 DEVALL DRIVE, SUITE 101 AUBURN, AL 36832 (334)844-7480	ls ▶		
	CART CHARDED 370 DEVALUE DATES, SULTE TOT MUDURA, AL 30032 (334)044-7400			

AUBURN RESEARCH & TECHNOLOGY FOUNDATION

Form 990 (2018)

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	<u> </u>				re than one n is both an ctor/trustee)		(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)JAMES H. SANFORD	1.00									
CHAIRMAN	0.	Х		Х				0.	0.	0.
(2)ROBERT W. DUMAS	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(3)BILL HAM, JR.	1.00									-
SECRETARY, BOARD MEMBER	0.	Х		Х				0.	0.	0.
(4)BILL HARDGRAVE	1.00									
PRESIDENT	0.	Х		Х				0.	499,904.	47,479.
(5)JIM ODOM	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(6)DAVID R. THRASHER	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(7)CHRISTOPHER ROBERTS	1.00									
BOARD MEMBER	0.	Х			<u>.</u>			0.	371,152.	57,405.
(8)VINI NATHAN	1.00									
BOARD MEMBER	0.	X						0.	285,499.	45,052.
(9)LARRY FILLMER	1.00									_
EXEC. DIRECTOR, BOARD MEMBER	0.	Х		Х				0.	262,175.	41,170.
(10)CARY CHANDLER	1.00									
DIRECTOR, BUS. DEV.	0.	Х		Х				0.	151,983.	27,612.
(11)JIM WEYHENMEYER	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(12)CHRISTOPHER CRUMBLY	1.00									
BOAD MEMBER	0.	X						0.	0.	0.
(13)THOM GOSSOM JR	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(14) PATRICK MURPHY	1.00			•						
BOARD MEMBER	0.	X						0.	0.	0.

Form 990 (2018)

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אבי	ne	

(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles	Pos neck ss pe d a d	more rson irect	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E)  Reportable compensation f  related organizations		(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		from the organization and related organizations
15) JON ROCOVICH JR BOARD MEMBER	1.00	x						0.		0.	0 .
16) STEVE SPENCER BOARD MEMBER	1.00	x						0.		0.	0.
17) LESLEE BELLUCHIE	1.00										
BOARD MEMBER 0. X 8) PATRICK COX 1.00 BOARD MEMBER 0. X								0.		0.	0.
										$\downarrow$	
											<u> </u>
1b Sub-total	 ection A .						<b>&gt;</b>	0.	1,570,71	0.	218,718.
d Total (add lines 1b and 1c)	limited to t		liste					0. eceived more than	1,570,71 \$100,000 of	3.	218,718.
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched											Yes No
4 For any individual listed on line 1a, is the organization and related organizations grandvidual	eater than	\$15 	60,0 • •	 00?		"Yes	s," (	complete Schedu	le J for suc	h ·	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y											5 X
Complete this table for your five highest com- compensation from the organization Report of year											
(A) Name and business add	Iress							(B) Description of se	ervices	Co	(C) empensation
							<u> </u>				
					-						
Total number of independent contractors (if more than \$100,000 in compensation from the contractors of				nite		thos	se li	isted above) who	received		
JSA 8E1055 1 000 4 0 0 5 9 R 3 8 5 7	3					-			J		Form <b>990</b> (2018

Par	t VIII	<del>_</del>	a response or note to	any line in this Dad \	/III		
		Check if Schedule O contains	a response or note to a	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tau under sections 512-514
rants	1a b	Federated campaigns	4.5				
Gifts, Gillar Am	c d	Fundraising events	. 1c				
Contributions, Gifts, Grants and Other Similar Amounts	e f	Government grants (contributions) . All other contributions, gifts, grants,					
	g h	and similar amounts not included above  Noncash contributions included in lines 1a  Tutal Add lines 1a-11	a-1f \$	655,004			
Revenue	2a	CONTRACT REVENUE	Business Code 541610	250,914	250,914		
ervice R	h						
Frogram Service	e d	All other program applies roughly					
5	g	All other program service revenue .  I otal. Add lines 2a 2l		250,014		•	
	3	Investment income (including				-	
		and other similar amounts)	_	116			116
	4	Income from investment of tax-exe	_	0	******************************		
	5	Royalties	<u>.</u> <b>.</b>	0			
		(1)	Real (II) Personal				
	6a	Gross rents 1,	252,127				
	b	Less rental expenses		}			•
	C		252,12/				
	d		<u> </u>	1,252,127			1,252,127
	7a	Gross amount from sales of (i) So	ecunties (ii) Other				
		assets other than inventory					1
	ь	Less cost or other basis					
	1	and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		0			
e	8a	Gross income from fundraising					
		events (not including \$	_				
Š		of contributions reported on line 1c)					
Other Reven		See Part IV, line 18		<b>⊣</b>			
ş	ь	Less direct expenses					
	С	Net income or (loss) from fundraising	ig events <u> </u>	0			
	9a	Gross income from gaming activities See Part IV, line 19	a 0	-			
	l) C	Less direct expenses Net income or (loss) from gaming			<u> </u>		
	10a	Gross sales of inventory, le returns and allowances	a 0	⊣			
	b	Less cost of goods sold	b				
	<u>c</u>	Net income or (loss) from sales of in					
		Miscellaneous Revenue	Business Code	. '			
	11a					-	
	ь			<u> </u>			
	c						
	l a	All other revenue					
	e	Total Add lines 11a-11d		0			
	1		_	2 150 241	250 014	l	

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX . . . . . . . . . (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to domestic organizations 0 and domestic governments. See Part IV, line 21 . . . 2 Grants and other assistance to domestic 0. individuals See Part IV, line 22 . . . . . . . . 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 . . . . . . . . . 5 Compensation of current officers, directors, 187,061. 58,512. 128,549. trustees, and key employees . . . . . . . . . . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) . . . . . 0. 8 Pension plan accruals and contributions (include 0 section 401(k) and 403(b) employer contributions) 0. 0 11 Fees for services (non-employees) Λ 150,441. 150,441 38,685 38,685 c Accounting . . . . . . . . . . . . 0. 0. e Professional fundraising services See Part IV, line 17, 45. 45. f Investment management fees ...... g Other (If line 11g amount exceeds 10% of line 25, column 38,843 38,843. (A) amount, list line 11g expenses on Schedule O). . . . . . 27,000. 27,000. 4,676. 2,370. 2,306 13 Office expenses . . . . . . . . . . . . . . . . . . 958 958 14 Information technology........ n 15 208,161 208,161. 56,392. 56,392 17 Payments of travel or entertainment expenses n for any federal, state, or local public officials 0. Conferences, conventions, and meetings . . . . 118,176. 118,176 20 0. Payments to affiliates...... 21 3,486. 425,213. 421,727 Depreciation, depletion, and amortization . . . 26,125. 26,125 Insurance . . . . . . . . . . . 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24c If line 24e amount everyds 10% of line 25, column (A) amount, list line 24e expenses on Schedule (1) FEES AND TAXES hOPERATING AGREEMENT EXPENSE cCLEANING AND LANDSCAPING 45,214. 45,214. dREPAIRS AND MAINTENANCE 50,144. 14,718. 35,426 e All other expenses ATCH 1 74,756 159,963. 85,207. 164,293. 1,372,804. 1,537,097. 25 Total functional expenses Add lines 1 through 24e 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 following SOP 98-2 (ASC 958-720) . . . . . 0

Part	tΧ	Balance Sheet			<del>_</del>
		Check if Schedule O contains a response or note to any line in this P	art X	<del></del>	X
	_		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	770,902.	1	873,324.
	2	Savings and temporary cash investments	0.	2	0.
	3	Pledges and grants receivable, net	1,263,821.	3	1,830,101.
	4	Accounts receivable, net	1,328,496.	4	1,415,580.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees	1		
		Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0.	5	0.
	6				
		4958(f)(1)), persons described in section 4958(c)(3)(f), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		organizations (see instructions) Complete Part II of Schedule L	0.	6	0.
Assets	7	Notes and loans receivable, net	0.	7	0.
SSI	8	Inventories for sale or use	0.	8	0.
•	9	Prepaid expenses and deferred charges	0.	9	0.
11	10 a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 12,741,308.			
	b	Less accumulated depreciation	8,565,490.	10c	9,648,544.
11	11	Investments - publicly traded securities	0.	11	0.
1	12	Investments - other securities See Part IV, line 11	0.	12	0.
1	13	Investments - program-related See Part IV, line 11	0.	13	0.
1	14	Intangible assets		14	0.
1	15	Other assets See Part IV, line 11	56,653.		98,985.
1	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,985,362.	16	13,866,534.
	17	Accounts payable and accrued expenses	295,371.	17	63,801.
- 1	18	Grants payable	0.	18	0.
	19	Deferred revenue	577,195.	19	648,290.
	20	Tax-exempt bond liabilities	0.	20	0.
12	21	Escrow or custodial account liability Complete Part IV of Schedule D	0.	21	0.
g z	2?	Loans and other payables to current and former officers, directors			
Liabilities		trustees, key employees, highest compensated employees, and			
ig		disqualified persons Complete Part II of Schedule L	0.	22	0.
ַב <u>֡</u>	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	723,070.	24	680,262.
	25	Other liabilities (including federal income tax, payables to related third			
i		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	922,073.	25	2,362,069.
	26	Total liabilities. Add lines 17 through 25	2,517,709.	26	3,754,422.
sa		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
<u>نا يو</u>	27	Unrestricted net assets	8,203,790.	27	8,281,970.
38	28	Temporarily restricted net assets	1,263,863.	28	1,830,142.
	29	Permanently restricted net assets	0.	29	0.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
<u>s</u>	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
AS S	32	Retained earnings, endowment, accumulated income, or other funds		32	
- <del>-</del> -	33	Total net assets or fund balances	9,467,653.	33	10,112,112.
- 1	34	Total liabilities and net assets/fund balances	11,985,362.	34	13,866,534.
Щ,			,,		Form <b>990</b> (2018)

Form **990** (2018)

Form **990** (2018)

Form 9	90 (2018)			Pa	ige <b>1</b> 2
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		<u></u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,	158,2	241.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	537,0	397.
3	Revenue less expenses Subtract line 2 from line 1	3		621,	_
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,	467,6	653.
5	Net unrealized gains (losses) on investments	5			0.
6	Donated services and use of facilities	6		23,3	315.
7	Investment expenses	7			0.
8	Prior period adjustments	8			0.
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	10,	112,1	112.
Part					
	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 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaın ı	_ n		1
	Schedule O	•			1
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?,		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were cor				<u> </u>
	reviewed on a separate basis, consolidated basis, or both	.,			
	Separate basis Consolidated basis Both consolidated and separate basis				
<b>.</b>	Were the organization's financial statements audited by an independent accountant?		2ь	Х	
b	If "Yes." check a box below to indicate whether the financial statements for the year were aud				
	separate basis, consolidated basis, or both	.00 0	~		1
	Separate basis Consolidated basis Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	ovorcial	.,		
C	of the audit, review, or compilation of its financial statements and selection of an independent accommission of the statements and selection of an independent accommission of the statements and selection of an independent accommission of the statements and selection of an independent accommission of the statements and selection of an independent accommission of the statements and selection of an independent accommission of the statements and selection of an independent accommission of the statements and selection of the statement and selection of the statem	_	1 -	Х	
	If the organization changed either its oversight process or selection process during the tax year, e		` —	<b>†</b>	$\vdash$
	Schedule O	vhiaiii i	"		
9 -	Schedule O  As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth :	_	1	
s a			"   3a		X
	the Single Audit Act and OMB Circular A-133?		• •	+-	<del>                                     </del>
b	of the organization undergo the required audit or audits ∕ it the organization did not undergo. The organization did not undergo such au required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	_	<sub>3b</sub>		
	required addit of addits, explain why in Schedule O and describe any steps taken to didengo such ac	uito	30		

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury

### **Public Charity Status and Public Support**

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047
2018
Open to Public
Inspection

Name of the organization

AUBURN RESEARCH & TECHNOLOGY FOUNDATION

Employer identification number 20-1806718

Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization g Provide the following information about the supported organization(s) (v) Amount of monetary (iii) Type of organization (i) Name of supported organization (II) EIN (IV) is the organization (vi) Amount of (described on lines 1-10 isted in your governing support (see other support (see above (see instructions)) document? instructions) instructions) ATTACHMENT 1 Ye<u>s</u> No . (A) (B) (C)

655,084

(D)

(E)

Total

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Ρ	а	a	e		Ź

Par	Support Schedule for Orga (Complete only if you checke Part III If the organization fai	ed the box on l	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	/ (f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		•				,
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total Add lines 1 through 3				<del>  /                                   </del>		· · · · · · · · · · · · · · · · · · ·
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		•				,
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support					· · · · · · · · · · · · · · · · · · ·	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	<b>/(c)</b> 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4			/			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support Add lines / through 10			•			
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization check this box and stop here	<u>f</u>					
Sec	tion C. Computation of Public Sup	<del></del>				<del></del>	
14	Public support percentage for 2018	ne 6, column (f	) divided by line	: 11, column (f))		14	<u>%</u>
15	T done support percentage from 2017						<u></u> %
16a	331/3% support test - 2018. If the or	-					
	box and stop here. The organization q	•		_			
D	331/3% support test - 2017. If the organization	<del>-</del>					
47-	this box and stop here. The organization 10%-facts-and-circumstances test - 2						
174	10% or more, and if the organization Part VI how the organization meets to organization	n meets the "fa the "facts-and-o	cts-and-circums circumstances" t	tances" test, ch	neck this box a ization qualifies	nd <b>stop here.</b> as a publicly s	Explain in supported
b	10%-facts-and-circumstances test - : 15 is 10% or more, and if the orga Explain in Part VI how the organizati	<b>2017</b> . If the organization meets	ganization did r s the "facts-an	not check a box d-circumstances	c on line 13, 16 s" test, check t	a, 16b, or 17a his box and s	, and line top here.
18	supported organization	did not check a	a box on line 13	3, 16a, 16b, 17a	, or 17b, check		
	instructions	· · · · · · · · · · · · · · · · · · ·		<u> </u>			
	<b>/</b> ·				S	cnequie A (Form	990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

Sched	dule A (Form 990 or 990-EZ) 2018						Page <b>3</b> ′
Par	t III Support Schedule for Orga	nizations Des	cribed in Sec	tion 509(a)(2)			$\overline{}$
	(Complete only if you check	ed the box on	line 10 of Par	t I or if the orga	anızatıon faıle	d to qualify und	der Part Jl
	If the organization fails to qu	alify under the	tests listed be	elow, please co	omplete Part I	1)	
Sec	tion A. Public Support		****				
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	/ (f) Total
1	Gifts, grants, contributions, and membership fees						7
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
	* * * *					1	
3	Gross receipts from activities that are not an					1	
_	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf			-	/	ļ <u>.</u>	
5	The value of services or facilities						
	furnished by a governmental unit to the			4			
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3			/			
	received from disqualified persons					ļ	
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		/				
8	Public support (Subtract line 7c from						
	line 6)						
Sec	tion B. Total Support					•	
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> ∕2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
-	Gross income from interest, dividends,						
	payments received on securities loans,	,					
	rents, royalties, and income from similar sources						
h	Unrelated business taxable income (less						
·	section 511 taxes) from businesses	/					
	acquired after June 30, 1975						
_	Add lines 10a and 10b						
44	Net income from unrelated business	/					
" "	activities not included in line 10b,						
	whether or not the business is regularly	ĺ					
	carried on					<del> </del>	
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)					<u> </u>	
13	Total support (Add lines 9/10c, 11,						
	and 12)					<u> </u>	
14	First five years. If the Form 990 is	<del>-</del>					
	organization, check this box and stop here			<del> <u>.</u></del>			<u></u>
Sec	tion C. Computation of Public Sup					1 1	
15		3. column (f), divid	led by line 13, colu	mn (f))		. 15	
	Public support percentage for 2018 (line 8					1 1	• • • • • • • • • • • • • • • • • • • •
16	Public support percentage for 2018 (line 8 Public support percentage from 2017 Sch		ne 15	<u> </u>		<u>  16  </u>	%_
16	• • • • • • • • • • • • • • • • • • • •	edule A, Part III, Iır		· · · · · · · · · · · · · · · · · · ·		16	%
16	Public support percentage from 2017 Sch	edule A, Part III, lir	centage			· · · · · · · · · · · · · · · · · · ·	%
16 Sec	Public support percentage from 2017 Sch tion D. Computation of Investmen	edule A, Part III, lir nt Income Perc ine 10c, column (	centage f), divided by line	13, column (f))		· · · · · · · · · · · · · · · · · · ·	
16 Sec 17 18	Public support percentage from 2017 Sch tion D. Computation of Investmer Investment income percentage for 2018 (I	edule A, Part III, Iir <b>nt Income Perc</b> ine 10c, column ( Schedule A, Part	f), divided by line	13, column (f))		17 18	% %
16 Sec 17 18	Public support percentage from 2017 Schition D. Computation of Investmer Investment income percentage for 2018 (Investment income percentage from 2017	edule A, Part III, Irr <b>t Income Perc</b> ine 10c, column ( Schedule A, Part ganization did no	centage f), divided by line III, line 17 ot check the box	13, column (f))	J line 15 is moi	17 18 re than 331/3%,	% % and line
16 Sec 17 18 19 a	Public support percentage from 2017 Schitton D. Computation of Investmen Investment income percentage for 2018 (Investment income percentage from 2017 331/3% support tests - 2018. If the or	edule A, Part III, lir at Income Pero ine 10c, column ( Schedule A, Part ganization did no nis box and stop	centage f), divided by line III, line 17 ot check the box p here The org	13, column (f)) c on line 14, and	d line 15 is moi	17 18 re than 331/3%, a supported organi	% and line
16 Sec 17 18 19 a	Public support percentage from 2017 Schitton D. Computation of Investmen Investment income percentage for 2018 (Investment income percentage from 2017 331/3% support tests - 2018. If the or 17 is not more than 331/3%, check the	edule A, Part III, lir at Income Pero ine 10c, column ( Schedule A, Part ganization did no anization did not	centage f), divided by line III, line 17 ot check the box p here The org check a box on	13, column (f)) con line 14, and anization qualifies line 14 or line 19	d line 15 is moi s as a publicly ba, and line 16 i	17 18 re than 331/3%, a supported organis more than 331/3	% % and line ization . ► 3%, and

### Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I complete Sections A and D. and complete Part V.)

Section A. All Supporting	g Organizations
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ecti	on A. All Supporting Organizations	<u>. v )</u>		
CCLI	On 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 <b>Part VI</b> how the supported organizations are designated If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1	x-	7.7
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	-	. X
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	 3a		- x
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 <b>Part VI</b> when and how the organization made the determination	3b		_
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> 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 12a or 12b in Part I, answer (b) and (c) below	4a		X.
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		-
С	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 $(2)$ ? If "Yes," explain in <b>Part VI</b> 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 <b>Part VI</b> , 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	<u>-1</u>	X
b c	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?  Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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		X
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	,	x
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 I of Schedule L (Form 990 or 990-EZ)	8		х
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 <b>Part VI</b> .	9a		х
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		X
C	Did a disqualified person (as defined in line 9a) 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 <b>Part VI</b> .	9с		x
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a		<u>x</u>

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

Part	V Supporting Organizations (continued)			
			Yes	No
11	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		X
b	A family member of a person described in (a) above?	11b		Х
с	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		Х
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			١,
	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,			٠,
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			å
	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			. ا
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Section	on 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		1	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			İ
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
Casti		1		<u> </u>
Secu	on D. All Type III Supporting Organizations		Vaa	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		res	NO
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			1
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	x	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	·-		$\vdash$
_	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	х	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			<b></b>
•	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	Х	
Secti	on 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 ins	tructi	ons)	
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
а	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part Vi identify</b>			
	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			١.
	that these activities constituted substantially all of its activities	2a		<u> </u>
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			l '
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these			'
	activities but for the organization's involvement	2b		ļ
3	Parent of Supported Organizations Answer (a) and (b) below.			1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		_	لـــا
	trustees of each of the supported organizations? Provide details in Part VI.	3a		ļ
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-		لــا
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		<u> </u>

Page 6
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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
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	1 1		
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)			,
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	· <del></del>	
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)	i		
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			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y integra	ated Type III supporting	g organization (see
instructions)	-		

Schedule A (Form 990 or 990-EZ) 2018

Part	ion D - Distributions	Supporting Organizat	ions (continued)	Current Year
-		vomnt nurnacaa		Current Year
1	Amounts paid to supported organizations to accomplish examounts paid to perform activity that directly furthers exer			
2	• • •	ript purposes or support	60	
	organizations, in excess of income from activity	and of summerted example		
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6	Abo 02000-0400-0-0		
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI) See			
	ınstructions			
3	Excess distributions carryover, if any, to 2018	١,		1
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
<u>_i</u>	Carryover from 2013 not applied (see instructions)			
<u>j</u> _	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount		<u> </u>	
С	Remainder Subtract lines 4a and 4b from 4			_
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c			
8	Breakdown of line 7			
а	Excess from 2014			
b	Excess from 2015			
С				
d	Excess from 2017			
е				
				A /Farm 000 as 000 F7) 004

Schedule A (Folili 990 of 990-EZ)

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)

SCHEDULE A, PART IV, SECTION D, LINE 2, 3 & SECTION 3, LINE 1C ALTHOUGH THE FOUNDATION IS SEPARATE AND INDEPENDENT FROM THE UNIVERSITY, ITS MISSION IS TO FACILITATE THE ACQUISITION, CONSTRUCTION AND EQUIPPING OF A TECHNOLOGY AND RESEARCH PARK ON THE UNIVERSITY'S CAMPUS IN ORDER TO CREATE NEW ACADEMIC AND ENTREPRENEURIAL OPPORTUNITIES FOR THE UNIVERSITY'S FACULTY AND STUDENTS. CONSIDERATION RECEIVED BY THE UNIVERSITY FROM THE FOUNDATION INCLUDES THE TRADITIONAL BENEFITS ENJOYED BY A UNIVERSITY FROM AN AFFILIATED RESEARCH PARK, INCLUDING BUT NOT LIMITED TO, INCREASED EXPOSURE FOR DEVELOPMENT AND COMMERCIALIZATION OF THE UNIVERSITY'S INTELLECTUAL PROPERTY AND TECHNOLOGIES, INCREASED RESEARCH OPPORTUNITIES FOR THE UNIVERSITY'S STUDENTS AND PROFESSORS, AND HEIGHTENED EXPOSURE WITHIN THE COMMERCIAL WORLD OF THE TECHNOLOGICAL CAMPUS OFFERINGS. THE UNIVERSITY PROVOST & SENIOR VICE PRESIDENT OF ACADEMIC AFFAIRS AGREED TO SERVE AS PRESIDENT OF THE FOUNDATION. PRESIDENT IS A MEMBER OF THE FOUNDATION BOARD WITH FULL VOTING POWERS. CONTRIBUTED SERVICES IN THE AMOUNT OF APPROXIMATELY \$24,641 AND\$19,000 WERE RECOGNIZED BY THE FOUNDATION DURING EACH FISCAL YEAR 2019 AND 2018, RESPECTIVELY, RELATED TO SERVICES PROVIDED BY THE PROVOST SERVING AS THE PRESIDENT OF THE FOUNDATION.

THE FOUNDATION BOARD INCLUDES MEMBERS WHO ARE ALSO MEMBERS OF THE VCOM
BOARD OF DIRECTORS, AUBURN UNIVERSITY FOUNDATION BOARD OF DIRECTORS,
UNIVERSITY BOARD OF TRUSTEES AS WELL AS OTHER UNIVERSITY EMPLOYEES. A
BANKING RELATIONSHIP EXISTS BETWEEN THE FOUNDATION AND A FINANCIAL
INSTITUTION WHOSE PRESIDENT/CEO IS A MEMBER OF THE FOUNDATION BOARD AND

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)

THE UNIVERSITY'S BOARD OF TRUSTEES. ADDITIONALLY, THE SPOUSE OF ONE BOARD MEMBER IS ALSO ON THE BOARD OF RIVER BANK & TRUST WHERE THE LOC AND THE CONSTRUCTION LOAN WERE OBTAINED, AND ANOTHER BOARD MEMBER IS ALSO A BOARD MEMBER OF THAT SAME LENDING INSTITUTION.

THE FOUNDATION AND THE UNIVERSITY ENTERED INTO AN OPERATING AGREEMENT (THE AGREEMENT), WHICH GOVERNS THE GENERAL AND ADMINISTRATIVE AND DEVELOPMENT FINANCIAL RELATIONSHIPS BETWEEN THESE TWO ENTITIES. IN SUMMARY, THE AGREEMENT STATES THAT IN RETURN FOR CERTAIN SERVICES AND FACILITIES THAT ARE WITHIN THE CAPABILITY AND CONTROL OF THE UNIVERSITY, THE FOUNDATION WILL REIMBURSE THE UNIVERSITY FOR THE COST OF SUCH SERVICES AND FACILITIES. THE FOUNDATION MAKES AN ANNUAL DETERMINATION OF ITS ALLOCABLE SHARE OF THESE COSTS AND RECORDS THE TRANSACTION. AS DISCUSSED BELOW, UNPAID AMOUNTS AT SEPTEMBER 30 ARE INCLUDED IN OTHER PAYABLE TO AUBURN UNIVERSITY ON THE STATEMENTS OF FINANCIAL POSITION.

THE FOUNDATION AND THE UNIVERSITY REVIEW THE AGREEMENT ANNUALLY AND PROVIDE AN ESTIMATE OF THE MAXIMUM CONSIDERATION TO BE PAID FOR THE UPCOMING YEAR FOR APPROVAL BY THE RESPECTIVE BOARDS. THE ACTUAL REIMBURSEMENT IS DETERMINED BASED ON THE ACTUAL COSTS INCURRED. IN ACCORDANCE WITH THE AGREEMENT FOR FISCAL YEAR 2019 AND 2018, PERSONNEL COSTS INCURRED BY THE UNIVERSITY AND CHARGED TO THE FOUNDATION WERE \$187,061 AND \$238,450, RESPECTIVELY. ALSO, PERSONNEL COSTS INCURRED BY THE UNIVERSITY AND NOT REIMBURSED BY THE FOUNDATION WERE \$404,130 IN FISCAL YEAR 2019. THESE COSTS ARE REFLECTED IN THE FOUNDATION'S FINANCIAL STATEMENTS AS GENERAL AND ADMINISTRATIVE EXPENSE AND AS CORRESPONDING

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)

CONTRIBUTION REVENUE WITHOUT DONOR RESTRICTIONS. AT SEPTEMBER 30, 2019 AND 2018, \$49,280 AND \$95,519 WERE PAYABLE.

THE FOUNDATION ENTERED INTO SUBCONTRACTS WITH THE UNIVERSITY TO PROVIDE SERVICES TO FULFILL THE FOUNDATION'S SPONSORED PROJECT AGREEMENTS. AS OF SEPTEMBER 30, 2019 AND 2018, THE FOUNDATION OWED THE UNIVERSITY \$0 AND \$18,856, RESPECTIVELY. THE UNIVERSITY PROVIDES CERTAIN OPERATING SERVICES TO THE FOUNDATION. AS OF SEPTEMBER 30, 2019 AND 2018, THE FOUNDATION OWED THE UNIVERSITY \$6,245 AND \$33,284, RESPECTIVELY, RELATED TO THESE SERVICES. ADDITIONALLY, THE FOUNDATION SHARES MISCELLANEOUS COSTS RELATED TO OFFICE EXPENSES AND EOUIPMENT LEASES WITH AUNIVERSITY DEPARTMENT. PAYABLES TO THE UNIVERSITY FOR THESE EXPENSES WERE \$599 AND \$704 AS OF SEPTEMBER 30, 2019 AND 2018, RESPECTIVELY.

ALL AMOUNTS OWED TO THE UNIVERSITY ARE SHOWN IN OTHER PAYABLES TO AUBURN UNIVERSITY ON THE STATEMENTS OF FINANCIAL POSITION. THE AMOUNTS DUE FROM THE UNIVERSITY TO THE FOUNDATION OF \$64,087 AND \$106,087 AT SEPTEMBER 30, 2019 AND 2018, RESPECTIVELY, RELATED TO OPERATING TRANSACTIONS BETWEEN THE UNIVERSITY AND THE FOUNDATION. THIS AMOUNT IS INCLUDED IN ACCOUNTS RECEIVABLE ON THE STATEMENTS OF FINANCIAL POSITION.

THE COUNDATION HELD LEASE AGREEMENTS WITH THREE UNIVERSITY DEPARTMENTS IN FISCAL YEAR 2010 AND 2018 WHEREBY THE DEPARTMENTS LEASED OFFICE SPACE FROM THE FOUNDATION. AS LEASING TENANTS, THE UNIVERSITY DEPARTMENTS

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 )

REMIT A MONTHLY RENTAL FEE TO THE FOUNDATION IN ACCORDANCE WITH THEIR LEASE AGREEMENTS. THE UNIVERSITY PAID APPROXIMATELY \$232,700 AND \$224,000 IN LEASE COSTS DURING FISCAL YEARS ENDED SEPTEMBER 30, 2019 AND 2018, RESPECTIVELY.

DURING FISCAL YEAR 2018, THE UNIVERSITY ENTERED INTO AN AGREEMENT TO LEASE SPACE IN BUILDING 5 AND MADE A PREPAYMENT OF \$245,000. UPON COMMENCEMENT OF THE LEASE AND OCCUPANCY OF THE FACILITY BY THE UNIVERSITY, FOR A PERIOD OF TEN YEARS, \$24,500 SHALL BE CREDITED AND DEDUCTED ANNUALLY FROM ALL RENT OTHERWISE PAYABLE BY THE UNIVERSITY TO

CREDIT SHALL SERVE AS A DECLINING CREDIT ACCOUNT IN FAVOR OF THE UNIVERSITY AGAINST THE PREPAYMENT FUNDS.

THE FOUNDATION ENTERED INTO A CONTRACT WITH THE UNIVERSITY DURING FISCAL YEAR 2011 TO DEVELOP AND MANAGE A FULL SERVICE BUSINESS INCUBATOR. REVENUES OF \$91,355 AND \$118,366 RELATED TO THIS CONTRACT WERE RECOGNIZED DURING FISCAL YEAR 2019 AND 2018, RESPECTIVELY. AS OF SEPTEMBER 30, 2019 AND 2018, THE REMAINING AMOUNTS OF THE CONTRIBUTIONS OF \$171,666 AND

OF CONSOLIDATED FINANCIAL POSITION AND WILL BE RECOGNIZED WHEN THE EXPENDITURES ARE INCURRED.

				ATTACHMENT	1
SCHEDULE A, PART I - INFORMATION ABOUT	SUPPORTED C	RGANIZATIO	NS		
		(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) OTHER
(1) NAME OF SUPPORTED ORGANIZATION	(1I) E1N	ORGANIZATION	YES NO	SUPPORT	SUPPORT AMOUNT
AUBURN UNIVERSITY	63-6000724	02	x	655,084	0
TOTAL AMOUNT OF SUPPORT				655,084	
					١ -
					; <b></b>

### **SCHEDULE D** (Form 990)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► Go to www.irs gov/Form990 for instructions and the latest information

Employer identification number Name of the organization AUBURN RESEARCH & TECHNOLOGY FOUNDATION 20-1806718

Pa	Organizations Maintaining Donor Advis			Accounts.
	Complete if the organization answered "			4) 5 1 1 4 4 4
	_	(a) Donor advised fu	inds	(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 a			
	funds are the organization's property, subject to the			
6	Did the organization inform all grantees, donors, an			
	only for charitable purposes and not for the benefit	of the donor or donor a	dvisor, or for a	
	conferring impermissible private benefit?	<del> <u></u></del>		Yes No
Pa	rt II Conservation Easements.			
	Complete if the organization answered "			
1	Purpose(s) of conservation easements held by the o			
	Preservation of land for public use (e.g., recre	ation or education)	Preservation	of a historically important land area
	Protection of natural habitat		Preservation	of a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization hele	d a qualified conservation	contribution in	
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements			
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified hi	storic structure included in	(a)	2c
d	Number of conservation easements included in (c)	acquired after 7/25/06, a	ind not on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, trans	ferred, released, extinguis	hed, or termin	nated by the organization during the
	tax year ▶			
4	Number of states where property subject to conserv	vation easement is located	<b>&gt;</b>	
5	Does the organization have a written policy rega	irding the periodic moni	toring, inspect	tion, handling of
	violations, and enforcement of the conservation ease	ements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecti	ng, handling of violations, ar	nd enforcing cor	nservation easements during the year
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, a	and enforcing c	onservation easements during the year
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(	d) above satisfy the require	ements of sect	ion 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(II)?			1 1 1
9	In Part XIII, describe how the organization reports of			
	balance sheet, and include, if applicable, the text of	the footnote to the organ	zation's financ	ial statements that describes the
	organization's accounting for conservation easement			
Pa	rt III Organizations Maintaining Collections	of Art, Historical Treas	ures, or Othe	r Similar Assets.
	Complete if the organization answered "	Yes" on Form 990, Part	IV, line 8	
1a	If the organization elected, as permitted under SFA	AS 116 (ASC 958), not to	report in its	revenue statement and balance shee
	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the foo	assets held for public of	exhibition, edu	ication, or research in turtherance of
b	If the organization elected, as permitted under SI	FAS 116 (ASC 958), to	report in its r	evenue statement and balance shee
	works of art, historical treasures, or other similar public service, provide the following amounts relatin		sambidon, edi	ication, or research in future affect of
	(i) Revenue included on Form 990, Part VIII, line 1.			<b>▶</b> \$
	(ii) Assets included in Form 990, Part VIII, line 1.			<b>&gt;</b> \$
_	If the organization received or held works of art.	historical transuras as	other cimiler	assets for financial cain provide the
2	-			
_	following amounts required to be reported under SF	WO I TO (MOC 908) relating	y to these item	D ¢
a b	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X			

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

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) Loan or exchange programs Public exhibition а Scholarly research Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . . . . Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not b If "Yes," explain the arrangement in Part XIII and complete the following table Amount 1c 1d 1e 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII . . . . . . . . Part V **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10 (c) Two years back (d) Three years back (a) Current year (b) Prior year 1a Beginning of year balance . . . . c Net investment earnings, gains, and losses........ d Grants or scholarships . . . . . . e Other expenditures for facilities and programs . . . . . . . . . . . . f Administrative expenses . . . . . g End of year halance..... 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment > b Permanent endowment ▶\_ c Temporarily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No 3a(i) 3a(iı) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?........ Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10 Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation 1a Land............ 9,575,685. 2,674,267. 12,249,952. **b** Buildings . . . . . . . . . . . . . . . . . c Leasehold improvements..... 491,356. 418,497. 72,859.

8,172,217.

Total, Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

8,172,217. 17,820,761.

Part VII Investments - Other Securities.  Complete if the organization answered "Yes	s" on Form 990. Pa	irt IV, line 11b See Form 990, Part X, line 12
	(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)		
(B)		
(C)		
(D)		· ·
(E)		
(F)		
(G)		
(H)		
Total (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments - Program Related.  Complete if the organization answered "Yes	es" on Form 990, Pa	nt 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
(1)		
(2)		
(3)		
(4)		
_(6)		
		<del>.</del>
(9)		
Total (Column (b) must equal Form 990 Part X col. (B) line 13.)		
Part IX Other Assets.	o" on Form 000 Da	ort IV line 11d See Form 000 Port V line 15
		art IV, line 11d See Form 990, Part X, line 15
(a) Descrip	tion	(b) Book value
(1)	<del>-</del>	
(2)		
(3)		-
(4)		
(5)		
(6)	····	
(7)		
(8)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 1	(5)	
Part X Other Liabilities.		art IV, line 11e or 11f See Form 990, Part X,
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes	(b) Dook value	†
(2) INTEREST PAYABLE	28,278	-
(3) PAYABLE TO AUBURN UNIVERSITY	56,124	
(4) DEPOSITS	27,439	
(5) CAPITAL LEASE OBLIGATION	26,025	→
(6) PAYABLE TO RIVER BANK AND TRUST	2,132,076	
(7) DUE TO ARP1	92,127	<del></del>
(8)	1 22,127	┪
(9)	<u> </u>	1
Total, (Column (h) must equal Form 990 Part X, col. (B) line 25.)	2,362,069	
come promine (a) musi equal come 370 Earl N, cor (a) me 75)	1 2,302,303	<u> </u>

Schedule D (Form 990) 2018

Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	n.	
1	Total revenue, gains, and other support per audited financial statements	1	2,610,327.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	]	
b	Donated services and use of facilities	4	
С	Recoveries of prior year grants	4	
d	Other (Describe in Part XIII )	┨- ╽	450 007
е	Add lines 2a through 2d	2e	452,087.
3	Subtract line 2e from line 1	3	2,158,240.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1	
ь	Other (Describe in Part XIII )	<b>┤</b> ╻-│	
_	Add lines 4a and 4b	4c	2,158,240.
5 Part			2,100,210.
Tart	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	<b></b>	
1	Total expenses and losses per audited financial statements	1	1,965,868.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	<u>.</u>	
b	Prior year adjustments	<b>↓  </b>	
С	Other losses	1	
d	Other (Describe in Part XIII )	- I	400 271
е	Add lines 2a through 2d	2e	428,771.
3	Subtract line 2e from line 1	3	1,537,097.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b	-{	
	Other (Describe in Fait Aiii )	4c	
5	Add lines 4a and 4b		1,537,097.
	XIII Supplemental Information.	1 - 1	, , , , , ,
2, <b>Pa</b> ОТНЕ	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, P rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional infor ER REVENUE AND EXPENSES INCLUDED ON FORM 990 BUT NOT ON LINE 1  CNUE REPORTED ON FINANCIAL STATEMENTS NET OF EXPENSES		e 4, Fait X, line
			<del></del>
	<del></del> <del></del>		
		_	
			·· <del>·</del>

Part XIII Supplemental Information (continued)

### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public Inspection Employer identification number

Name of the organization AUBURN RESEARCH & TECHNOLOGY FOUNDATION

20-1806718

Pan	Questions Regarding Compensation			
	Check the appropriate havings) if the appropriate projected only of the following to or for a person listed on Form		Yes	No
Ίа	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	4.		
_	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	<del></del>		
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a <sup>9</sup>	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	•		
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	-		
•	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018 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 on 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 aren't 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

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	in column (B) reported as deferred on prior Form 990
BILL HARDGRAVE	(0)	0	0	0				
1PRESIDENT	- [60]	499,904	0	0	47,479.		547,383	
CHRISTOPHER ROBERTS	761	0	0	0.		·		
BOARD MEMBER	(n)	371,152	0	0	57,405.		428,557	
VINI NATHAN	(0 <u> </u>	0	0	0				
3BOARD MEMBER	(11)	285,499	0.	0	45,052		330,551	
LARRY FILLMER	[0]	0.	0	0				
EXEC DIRECTOR, BOARD MEMBER	(11)	262,175	0.	0	41,170		303,345	
CARY CHANDLER	(0)	0.	0	0	07.61		170 505	
DIRECTOR, BUS DEV	(0)	151,983	0	0	27,612		179,595	
	[0]							
<u></u>	(11)							
	[0]						4	
7	<u> </u>							
	[0]							
. 8	(10)							-
	(0)							
9	(0)			· · · · · · · · · · · · · · · · · ·			<del></del>	
	(i) (ii)							
10	(0)						-	
44	(0)							
<u></u>	(1)							
12	(11)							
	(1)							
13	(0)					.,	<u> </u>	
	(1)		ĺ					-
14	(0)							
	(0)							
15	(0)							
	(i)							
16	(0)							

Schedule J (Form 990) 2018

8E1291 1 000 4 0 0 5 9 R 3 8 5 7

AUBURN RESEARCH & TECHNOLOGY FOUNDATION

20-1806718

Page 3

Schedule J (Form 990) 2018

Part III 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

Schedule J (Form 990) 2018

8E1505 1 000 4 0 0 5 9R 3857

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

### 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

2018
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

AUBURN RESEARCH & TECHNOLOGY FOUNDATION

Employer identification number 20-1806718

PART III PROGRAM SERVICE ACCOMPLISHMENTS

THE AUBURN RESEARCH AND TECHNOLOGY FOUNDATION (THE FOUNDATION) IS AN INDEPENDENT ALABAMA NONPROFIT CORPORATION ORGANIZED ON AUGUST 24, 2004, TO DEVELOP AND OPERATE THE AUBURN RESEARCH PARK AND TO ASSIST AUBURN UNIVERSITY (THE UNIVERSITY) WITH THE ATTRACTION, DEVELOPMENT, AND COMMERCIALIZATION OF TECHNOLOGY. THE FOUNDATION'S ACTIVITIES ARE GOVERNED BY ITS OWN BOARD OF DIRECTORS (THE FOUNDATION BOARD).

THE FIRST MAJOR PROJECT OF THE FOUNDATION WAS THE ESTABLISHMENT OF A RESEARCH PARK. THE RESEARCH PARK IS THE RESULT OF A PARTNERSHIP AGREEMENT BETWEEN THE STATE OF ALABAMA (THE STATE) THROUGH THE GOVERNOR'S OFFICE, THE UNIVERSITY, THE CITY OF AUBURN, AND THE CITY OF AUBURN INDUSTRIAL DEVELOPMENT BOARD (THE BOARD). THE VISION FOR THE PARK IS TO ESTABLISH AN ENTREPRENEURIAL ATMOSPHERE IN A BUSINESS AND RESEARCH ENVIRONMENT WHICH FOSTERS CREATIVITY AND INNOVATION, AND EMBRACES COLLABORATION, PAPTNERSHIPS, AND NETWOPKING THAT LEADS TO ECONOMIC DIVERSIFICATION AND ENHANCED ECONOMIC VITALITY OF THE UNIVERSITY AND THE LOCAL COMMUNITY, STATE, AND REGION. THE CITY OF AUBURN CONTRIBUTED \$5,000,000 IN-KIND INFRASTRUCTURE IMPROVEMENTS TO THE UNIVERSITY AS IMPROVEMENTS TO THE LAND WHERE THE AUBURN RESEARCH PARK (THE PARK) IS LOCATED. ON OCTOBER 31, 2010, CONSTRUCTION OF BUILDING 570 WAS COMPLETED. THE FOUNDATION LEASES BUILDING SPACE IN BUILDING 570 TO BUSINESSES INVOLVED IN PROJECTS PROMOTING THE UNIVERSITY'S RESEARCH MISSION.

ON MARCH 1, 2007, FOR THE PURPOSE OF MAKING LOANS AND ADVANCES, THE BOARD ENTERED INTO AN AGREEMENT TO LEASE THE SITE FOR BUILDING 570 FROM THE UNIVERSITY. THE BOARD PAID ANNUAL RENT OF \$10 TO THE UNIVERSITY UNDER THE TERMS OF THE LEASE. THE GROUND LEASE AGREEMENT HAD AN EXPIRATION DATE OF JANUARY 1, 2025; HOWEVER, THE AGREEMENT WAS TERMINATED ON OCTOBER 8, 2010, THE TIME ALL OBLIGATIONS DUE TO THE BOARD BY THE FOUNDATION WERE PAID IN FULL. AT THAT TIME, THE UNIVERSITY ENTERED INTO AN AGREEMENT WITH THE FOUNDATION WHERE THE FOUNDATION LEASES THE SITE FOR BUILDING 570 FROM THE UNIVERSITY. THE FOUNDATION PAYS ANNUAL RENTAL OF \$1 TO THE UNIVERSITY UNDER THE TERMS OF THIS GROUND LEASE. THE GROUND LEASE AGREEMENT EXPIRES ON MARCH 15, 2057, UNLESS TERMINATED PRIOR TO THAT DATE. THESE TRANSACTIONS REPRESENT AN UNCONDITIONAL PROMISE OF THE USE OF A LONG-LIVED ASSET, THE LEASED LAND. SINCE THE RENTAL PAYMENTS ARE DELOW THE FAIR MARKET VALUE OF THE PROPERTY, THE FOUNDATION RECORDED A CONTRIBUTION RECEIVABLE FOR THE DIFFERENCE BETWEEN THE FAIR RENTAL VALUES OF THE PROPERTY, INITIALLY CALCULATED USING A 7% DISCOUNT RATE, AND THE STATED AMOUNT OF THE LEASE PAYMENTS. AT THE FORMATION OF THE ORIGINAL LEASE, THE CONTRIBUTION RECEIVABLE BOOKED WAS \$302,878, NET OF A DISCOUNT OF \$251,740. DURING FISCAL YEAR 2011, THE INTEREST RATE WAS REEVALUATED AND CHANGED TO 5%, AND THE LEASE PERIOD WAS EXTENDED. AN ADDITIONAL CONTRIBUTION RECEIVABLE OF \$589,790 AND DISCOUNT OF\$401,121 WERE BOOKED IN FISCAL YEAR 2011. AN ADJUSTMENT TO THE CONTRIBUTION RECEIVABLE WAS MADE IN FISCAL YEAR 2016 TO INCREASE TOTAL ACREAGE FROM THE ORIGINAL 156 ACRES TO 170.43 ACRES TO INCLUDE THE VCOM ACREACE (DISCUSSED BELOW) IN THE CALCULATION. THE OFFSETTING CONTRIBUTION RECEIVABLE IS AMORTIZED

USING THE STRAIGHT-LINE METHOD OVER THE LIFE OF THE LEASE. AMORTIZATION RELATED TO THE LEASE WAS \$21,243 DURING FISCAL YEAR 2019 AND 2018. THE DISCOUNT IS AMORTIZED USING THE EFFECTIVE INTEREST METHOD. AMORTIZATION OF THE DISCOUNT WAS \$7,550 AND \$6,865 DURING FISCAL YEAR 2019 AND 2018, RESPECTIVELY.ON AUGUST 30, 2012, THE FOUNDATION SIGNED AN AGREEMENT WITH THE EDWARD VIA COLLEGE OF OSTEOPATHIC MEDICINE (VCOM) IN BLACKSBURG, VA TO ESTABLISH A BRANCH CAMPUS TO BE LOCATED WITHIN THE RESEARCH PARK. THE FOUNDATION ENTERED INTO AN AGREEMENT TO LEASE THE SITE FOR VCOM FROM THE UNIVERSITY ON AUGUST 9, 2013. THE FOUNDATION PAYS ANNUAL RENT OF \$1 TO THE UNIVERSITY UNDER THE TERMS OF THE LEASE. THE GROUND LEASE AGREEMENT EXPIRES ON JUNE 30, 2085, UNLESS TERMINATED PRIOR TO THAT DATE. THIS TRANSACTION REPRESENTS AN UNCONDITIONAL PROMISE OF THE USE OF A LONG-LIVED ASSET, THE LEASED LAND. SINCE THE RENTAL PAYMENTS ARE BELOW THE FAIR MARKET VALUE OF THE PROPERTY, THE FOUNDATION RECORDED A CONTRIBUTION RECEIVABLE IN FISCAL YEAR 2013 FOR THE DIFFERENCE BETWEEN THE FAIR RENTAL VALUES OF THE PROPERTY, CALCULATED USING A 5% DISCOUNT RATE, AND THE STATED AMOUNT OF THE LEASE PAYMENTS. AT THE FORMATION OF THE LEASE. THE CONTRIBUTION RECEIVABLE BOOKED WAS \$3,035,051, NET OF A DISCOUNT OF \$2,239,619. THE OFFSETTING CONTRIBUTION RECEIVABLE IS AMORTIZED USING THE STRAIGHT-LINE METHOD OVER THE LIFE OF THE LEASE. AMORTIZATION RELATED TO THE LEASE WAS \$42,812 DURING FISCAL YEAR 2019 AND 2018. THE DISCOUNT IS AMORTIZED USING THE EFFECTIVE INTEREST METHOD. AMORTIZATION OF THE DISCOUNT WAS \$12,386 AND \$10,065 DURING FISCAL YEAR 2019 AND 2018, RESPECTIVELY. ON JUNE 12, 2018, FOR THE PURPOSE OF CONSTRUCTING BUILDING 7, THE FOUNDATION ENTERED INTO AN AGREEMENT TO

LEASE THE SITE FROM THE UNIVERSITY. THE FOUNDATION PAID ANNUAL RENT OF \$1 TO THE UNIVERSITY UNDER THE TERMS OF THE LEASE. THE GROUND LEASE AGREEMENT EXPIRES ON JUNE 12, 2068, UNLESS TERMINATED PRIOR TO THAT DATE. THIS TRANSACTION REPRESENTS AN UNCONDITIONAL PROMISE OF THE USE OF A LONG-LIVED ASSET, THE LEASED LAND. SINCE THE RENTAL PAYMENTS ARE BELOW THE FAIR MARKET VALUE OF THE PROPERTY, THE FOUNDATION RECORDED A CONTRIBUTION RECEIVABLE IN FISCAL YEAR 2019 FOR THE DIFFERENCE BETWEEN THE FAIR RENTAL VALUES OF THE PROPERTY, CALCULATED USING A 5% DISCOUNT RATE, AND THE STATED AMOUNT OF THE LEASE PAYMENTS. AT THE FORMATION OF THE LEASE, THE CONTRIBUTION RECEIVABLE BOOKED WAS \$1,168,950, NET OF A DISCOUNT OF \$756,344. THE OFFSETTING CONTRIBUTION RECEIVABLE IS AMORTIZED USING THE STRAIGHT-LINE METHOD OVER THE LIFE OF THE LEASE. AMORTIZATION RELATED TO THE LEASE WAS \$23,379 DURING FISCAL YEAR 2019. THE DISCOUNT IS AMORTIZED USING THE EFFECTIVE INTEREST METHOD. AMORTIZATION OF THE DISCOUNT WAS \$2,174 AND \$336 DURING FISCAL YEAR 2019 AND 2018, RESPECTIVELY.

ON JANUARY 31, 2019, FOR THE PURPOSE OF CONSTRUCTING BUILDING 6, THE FOUNDATION ENTERED INTO AN AGREEMENT TO LEASE THE SITE FROM THE UNIVERSITY. ALSO ON JANUARY 31, 2019, THE FOUNDATION SIGNED AN AGREEMENT WITH THE EAST ALABAMA HEALTH CAPE AUTHORITY IN OPELIKA, AL TO ESTABLISH A MEDICAL BUILDING TO BE LOCATED ON THIS LAND. THE FOUNDATION PAID ANNUAL RENT OF \$1 TO THE UNIVERSITY UNDER THE TERMS OF THE LEASE. THE CROUND LEASE AGREEMENT EXPIRES ON DECEMBER 31, 2117, UNLESS TERMINATED PRIOR TO THAT DATE. THIS TRANSACTION REPRESENTS AN UNCONDITIONAL PROMISE OF THE

USE OF A LONG-LIVED ASSET, THE LEASED LAND. SINCE THE RENTAL PAYMENTS ARE BELOW THE FAIR MARKET VALUE OF THE PROPERTY, THE FOUNDATION RECORDED A CONTRIBUTION RECEIVABLE IN FISCAL YEAR 2019 FOR THE DIFFERENCE BETWEEN THE FAIR RENTAL VALUES OF THE PROPERTY, CALCULATED USING A 5% DISCOUNT RATE, AND THE STATED AMOUNT OF THE LEASE PAYMENTS. AT THE FORMATION OF THE LEASE, THE CONTRIBUTION RECEIVABLE BOOKED WAS \$1,801,214, NET OF A DISCOUNT OF \$1,437,797. THE OFFSETTING CONTRIBUTION RECEIVABLE IS AMORTIZED USING THE STRAIGHT-LINE METHOD OVER THE LIFE OF THE LEASE. AMORTIZATION RELATED TO THE LEASE WAS \$16,933 DURING FISCAL YEAR 2019. THE DISCOUNT IS AMORTIZED USING THE EFFECTIVE INTEREST METHOD. AMORTIZATION OF THE DISCOUNT WAS \$806 DURING FISCAL YEAR 2019. ON MARCH 15, 2019, FOR THE PURPOSE OF CONSTRUCTING BUILDING 5, THE FOUNDATION ENTERED INTO AN AGREEMENT TO LEASE THE SITE FROM THE UNIVERSITY. THE FOUNDATION PAID ANNUAL RENT OF \$1 TO THE UNIVERSITY UNDER THE TERMS OF THE LEASE. THE GROUND LEASE AGREEMENT EXPIRES ON MARCH 15, 2068, UNLESS TERMINATED PRIOR TO THAT DATE. THIS TRANSACTION REPRESENTS AN UNCONDITIONAL PROMISE OF THE USE OF A LONG-LIVED ASSET, THE LEASED LAND. SINCE THE RENTAL PAYMENTS ARE BELOW THE FAIR MARKET VALUE OF THE PROPERTY, THE FOUNDATION RECORDED A CONTRIBUTION RECEIVABLE IN FISCAL YEAR 2019 FOR THE DIFFERENCE BETWEEN THE FAIR RENTAL VALUES OF THE PROPERTY, CALCULATED USING A 5% DISCOUNT RATE, AND THE STATED AMOUNT OF THE LEASE PAYMENTS. AT THE FORMATION OF THE LEASE, THE CONTRIBUTION RECEIVABLE BOOKED WAS \$760,513, NET OF A DISCOUNT OF \$468,846. THE OFFSETTING CONTRIBUTION RECEIVABLE IS AMORTIZED USING THE STRATGHT-LINE METHOD OVER THE LIFE OF THE LEASE. AMORTIZATION RELATED TO THE LEASE WAS

Name of the organization	•		Employer identification number
AUBURN RESEARC	H & TECHNOLOGY	FOUNDATION	20-1806718

\$7,720 DURING FISCAL YEAR 2019.

PART VI, SECTION B, LINE 11B INFORMATION IS REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO SUBMISSION.

PART VI, SECTION B, LINE 12C ALL CONFLICTS OF INTEREST OR APPARENT CONFLICTS OF INTEREST OF DIRECTORS ARE TO BE DISCLOSED TO THE CHAIRPERSON OF THE BOARD AND THE EXECUTIVE DIRECTOR. CONFLICTS OR APPARENT CONFLICTS OF ALL OTHERS ACTING FOR OR BEHALF OF THE ARTF ARE TO BE DISCLOSED TO THE EXECUTIVE DIRECTOR. VIOLATIONS OF THE POLICY, INCLUDING FAILURE TO DISCLOSE CONFLICTS, MAY RESULT IN TERMINATION OF THE CONFLICTED PERSON.

PART VI, SECTION A, LINE 8B THE FOUNDATION DID NOT HAVE ANY COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

PART VI, SECTION C, LINE 19 AUBURN RESEARCH AND TECHNOLOGY FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST.

FORM 990, PART IX - OTHER EXPENSES		:	ATTACHMENT 1
DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.	(C) (D) MANAGEMENT FUNDRAISING AND GENERAL EXPENSES
OTHER EXPENSES	159,963.	85,207.	71,756.
TOTALS	159,963.	85,207.	74,756.

Page 2

Schedule O (Form 990 or 990-EZ) 2018	Page 2
Name of the organization	Employer identification number
AUBURN RESEARCH & TECHNOLOGY FOUNDATION	20-1806718
	ATTACHMENT 2
FORM 990, PART X - DEFERRED REVENUE	
	ENDING
DESCRIPTION	BOOK VALUE
DEFERRED REVENUE	648,290.
TOTALS	648,290.

### AUBURN RESEARCH & TECHNOLOGY FOUNDATION

SCHEDULE R (Form 990)

### **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990

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

OMB No 1545-0047

Opportment of the Treasury Internal Revenue Service Name of the organization

AUBURN RESEARCH & TECHNOLOGY FOUNDATION

20-1806718

	(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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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 chanty status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled rty?
							Yes	No
(1) AUBURN UNIVERSITY	63-6000724					I		
AUBURN UNIVERSITY	AUBURN, AL 36849	PUBLIC UNIV	AL	115	2	N/A	1	Х
(2) AUBURN RESEARCH PARK 1	83-3566518							
570 DEVALL DRIVE, STE 101	AUBURN, AL 36832	SUPPORTING OR	AL	501(c)(3)		ARTF	Х	İ
(3)								
		İ						
(4)		]		]			1	]
	-			1			<u> </u>	<u> </u>
(5)							1	i
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(6)		-						i
(7)	<u> </u>			<del> </del>		<del> </del>	1	
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For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule R (Form 990) 2018

JSA

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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 (c)
Legal
domicile
(state or
foreign
country) (e)
Predominant
income (related
unrelated,
excluded from
tax under
sections 512 - 514) (i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065) (d) Direct controlling entity (f) Share of total income (g) Share of end-of-year assets (k) Percentage ownership (b) Primary activity related organization managing partner? Yes No Yes No (1) (2) (3) (4) (5) (6)

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	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp S corp or trust)	(f) Share of total	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled enjay?
(1)						ļ	Yes No
[3]	 					_	
(4)							
(6)	 						
(7)							

Schedule R (Form 990) 2018

JSA

(7)

8E1308 1 000 40059R 385/

20-1806718

Sched	le R (Form 990) 2018					Pa	ge 3
Part	Transactions With Related Organizations. Complete if the organization answered "Yes	es" on Form 990, Pa	rt IV, line 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 the tax year, did the organization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?		$\sqcup$		- 1
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	_	X
b	Gift, grant, or capital contribution to related organization(s) , , , , , , ,				1b		Х
С	Gift, grant, or capital contribution from related organization(s).				1c	Х	
d	Loans or loan guarantees to or for related organization(s) , , , ,				1d		X
e	Loans or loan guarantees by related organization(s)		• • • • • • • • • • • • • • • • • • • •		1e	X	<del></del> ;
f					11		
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		- <u>x</u>
1	Exchange of assets with related organization(s)				11	V	
J	Lease of facilities, equipment, or other assets to related organization(s)			•	1	X	—
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	х	
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11	-	X
	Performance of services or membership or fundraising solicitations by related organization(s), $\dots$				1m	$\dashv$	$\frac{x}{x}$
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			• •	1n	-,	<u> </u>
Û	Sharing of paid employees with related organization(s)				10	X	
					, ,	x	•
р	Reimbursement paid to related organization(s) for expenses			• • • •	1p	$\frac{x}{x}$	
q	Reimbursement paid by related organization(s) for expenses				1q	$\stackrel{\sim}{+}$	—
	Out of the standard and the standard assessments of the				1r	- 1	х
	Other transfer of cash or property to related organization(s)			• • • •	15	-	<del></del>
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including cove	ered relationships and trans	action thres		'	
_	(a)	(b)	(c)	1	(d)		
	Name of related organization	Transaction type (a-s)	Amount involved	Method o	of dete nt invo		g
	<u></u>	туре (а-5)		amou		IAGO	
(1)							
(2)							
1-/				_			_
(3)							
(4)							
(5)							
1.7							_
(6)	<u> </u>			hedule R (F		0001	2010
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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

(a) Name address and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related unrelated excluded from tax under	Are all	e) partners ton (c)(3) retons?	rn r	(g) Share of end-of-year assets	Desprop	h) ortionate atlons?	(i) Code V - UBI amount in box 20 of Schedule K i (Form 1065)	Gene	]) eral or aging ner?	(k) Percentage ownership
			sections 512-514)	Yes				Yes	No		Yes	No	1
(1)													
(2)													
_(3)		-											
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(15)													
(16)													

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018

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Part VII Supplemental Information
Provide additional information for responses to questions on Schedule R See instructions