EXTENDED TO AUGUST 16, 2021 Return of Organization Exempt From Income Tax

(Rev. January 2020) Department of the Treasury Internal Revenue Service

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

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

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

OMB No. 1545-0047 Open to Public Inspection

A	For tr	ie 2019 calendar year, or tax year beginning OCT 1, 2019 and	ending S	EP 30, 2020						
В	Check i applica	C Name of organization		D Employer identifi	cation number					
	Addr									
	Nam char	ge Doing business as		63-60224	22					
	Initia retur Final	Number and street (or P.U. box if mail is not delivered to street address)	Room/suite	E Telephone number 334-844-7048						
70	retur term			G Gross receipts \$	326,039,695.					
Amended ATTRITON AT 36949 5170										
return AODOIN, AD 30049 3170 In(a) is this a group return										
Application pending F Name and address of principal officer: DR • CHRISTOPHER ROBERTS for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes No										
1				1						
		tempt status: X 501(c)(3)	or 527	1	list. (see instructions)					
		ite: WWW.AUBURNUNIVERSITYFOUNDATION.ORG	-1	H(c) Group exemption						
	art I	f organization: X Corporation Trust Association Other ►	L Year	of formation: 1900	M State of legal domicile: AL					
Γ.		Summary	אדד	ZYMTOM ODED	A TEC FOD					
ø	1	Briefly describe the organization's mission or most significant activities: THE OTHE EXCLUSIVE BENEFIT OF AUBURN UNIVERSIT								
Governance										
ern	2	Check this box if the organization discontinued its operations or dispos		1 988	24					
Ş	3			<u>3</u>	24					
8	335	Number of independent voting members of the governing body (Part VI, line 1b)			0					
Activities &	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			2864					
iš	6	Total number of volunteers (estimate if necessary)			0.					
Aci	2	Total unrelated business revenue from Part VIII, column (C), line 12			0.					
_	b	Net unrelated business taxable income from Form 990-T, line 39	······································							
	_	0 - 1-11-11-11-1-1-11-11-11-11-11-11-11-1	-	Prior Year 54,251,609.	Current Year 47,772,436.					
ne	8	Contributions and grants (Part VIII, line 1h)	Service and a service of the service	170,202.	175,530.					
len /	9	Program service revenue (Part VIII, line 2g)		12,320,270.	20,036,438.					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,585,417.	2,474,327.					
	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		69,327,498.	70,458,731.					
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		46,605,835.	47,681,628.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)	3200000000000	0.	0.					
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5.5.5.000 (Cont.)	0.	0.					
ens	ioa	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 2,081,36								
Expenses	, D			9,383,031.	6,809,477.					
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		55,988,866.	54,491,105.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		13,338,632.	15,967,626.					
		Revenue less expenses. Subtract line 16 from line 12		inning of Current Year	End of Year					
ts o	00	Total access (Dout V. line 16)		81,507,810.	710,019,152.					
Rala	20	Total assets (Part X, line 16)		33,476,421.	33,682,144.					
Net Assets or	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		48,031,389.	676,337,008.					
P	irt II	Signature Block		10,001,005.	070733770001					
	7715	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and statemer	nts, and to the best of my	knowledge and belief, it is					
		et, and complete. Declaration of preparer (other than officer) is based on all information of whi			,					
	00110	Marsh		4/30	12021					
Sigi	า	Signature of officer		Date						
Her										
500.000	ā	WILLIAM B. HUGHES, ASSISTANT TREASURER Type or print name and title								
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN					
Paid		D. CLYNTON HART, JR., CPA	0 4	4/27/21 self-employe	P00191509					
	arer	Firm's name WARREN AVERETT, LLC			45-4084437					
	Only	Firm's address 3815 INTERSTATE CT.								
		MONTGOMERY, AL 36109		Phone no. 33	4-271-2200					
N 4	the II	20 diaguas this vature with the evengrar shows above (accompany)			X Vos No					

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE ORGANIZATION OPERATES FOR THE EXCLUSIVE BENEFIT OF AUBURN
	UNIVERSITY, AN EDUCATIONAL, LAND GRANT INSTITUTION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	<u> </u>
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
 4а	(Code:) (Expenses \$47,549,628including grants of \$47,549,628) (Revenue \$ 2,405,362)
ти	GRANTS TO AUBURN UNIVERSITY (AU) FOR ACADEMIC, OUTREACH AND RESEARCH
	MISSIONS AND ITS SUPPORTING/RELATED ORGANIZATIONS IN SUPPORT OF THEIR
	ORGANIZATION'S PRIMARY PURPOSES, OUTREACH AND INTERCOLLEGIATE
	ATHLETICS, IN SUPPORT OF AU.
	·
	0.666.000
4b	(Code:) (Expenses \$ $2,666,909.$ including grants of \$ $0.$) (Revenue \$ $175,530.$)
	EXPENDITURES MADE BY AUBURN UNIVERSITY FOUNDATION (AUF) ON BEHALF OF AU
	IN SUPPORT OF ITS ACADEMIC, OUTREACH AND RESEARCH MISSIONS.
4c	(Code:) (Expenses \$132,000 •including grants of \$132,000 •) (Revenue \$)
	GRANTS FOR OPERATIONS TO AUBURN UNIVERSITY REAL ESTATE FOUNDATION,
	INC.(AUREF), FOR OPERATIONS AND THE TRANSFER OF REAL PROPERTIES TO AU
	FOR PERPETUAL MANAGEMENT.
4d	Other program services (Describe on Schedule O.)
4-	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 50,348,537.
→ €	rotar program 301 VIOC CAPCH3C3 P 30 / 3 TO 1 J J J J J

Form 990 (2019) AUBURN UNIVERSITY FOUNDATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			,,
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		37	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			1 37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	l		₩
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		x
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	400	Х	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	Λ	Х
13				X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		1
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u>. </u>		 -
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u>. </u>		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
_		_		_

Form 990 (2019) AUBURN UNIVERSITY FOUNDATION
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
Lou	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part II	26		x
27				
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	07		х
00		27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		х
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	Х	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٠,,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	Х	
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?			
Da	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

019) AUBURN UNIVERSITY FOUNDATION

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				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	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 3b		X			
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over				, v			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X			
D	If "Yes," enter the name of the foreign country							
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FB, Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	· ·	5a		х			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X			
	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	I						
	any contributions that were not tax deductible as charitable contributions?		6a	Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?		6b	X				
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided	d to the payor?	7a	X				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?		7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X			
f			7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as		7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Fo	rm 1098-C'?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.		8					
a	Did the agree with a secretarity made and the state of the state of the state of the secretarity at 10000		9a					
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b					
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-	40					
а	Is the organization licensed to issue qualified health plans in more than one state?		13a					
h	Note: See the instructions for additional information the organization must report on Schedule O.							
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
^	Enter the amount of reserves on hand 13c							
14a			14a		Х			
			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 VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

<u> </u>						X			
Sec	tion A. Governing Body and Management								
		ı			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	24						
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent 1b 24								
2									
	officer, director, trustee, or key employee?								
3									
	of officers, directors, trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х			
6	Did the organization have members or stockholders?			6		Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap								
	more members of the governing body?			7a		Х			
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st								
	persons other than the governing body?			7b		х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year								
	The governing body?	-	=	8a	X				
a b				8b	X				
	• • • • • • • • • • • • • • • • • • • •			OD	21				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			9		Х			
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		21			
000	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>venue</u>	Code.)		V	NI.			
40-	Did the constant of the board of the standard boards of the standard of the st			40-	Yes	No X			
	Did the organization have local chapters, branches, or affiliates?			10a					
р	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? Ha Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				37				
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," a	escribe						
	in Schedule O how this was done			12c	<u> </u>				
13	Did the organization have a written whistleblower policy?			13	X				
14	Did the organization have a written document retention and destruction policy?			14	X				
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official			15a		X			
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 arrangen	nent w	rith a						
	taxable entity during the year?			16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	ı's						
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup$ FL , KY , MA , MD , M	I,M	N, NH, NJ, NY	, ND,	OH,	OR			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	-T (Section 501(c)(3)s	only)	availa	ble			
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request Other (explain	on S	chedule O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	cial				
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records						
	WILLIAM B. HUGHES - 334-844-7048		·						
	317 SOUTH COLLEGE STREET, AUBURN, AL 36849-5170								

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

X Check this box if neither the organization no	or any related	orga	niza	tion	con	nper	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unles cer an	ss per	son i	s both	an	compensation	compensation	amount of
	week	-	Cer an	uau	recid	i / ii us	iee)	from	from related	other
	(list any hours for	lirecto				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or 0	stee			satec		(W-2/1099-MISC)	(***2/1099*****100)	organization
	organizations	truste	al trus		yee	mper		(** 2, 1000 111100)		and related
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	Jer.			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) BENNY M. LARUSSA	1.40								_	_
CHAIR		Х		Х				0.	0.	0.
(2) CHERYL LYNN CASEY	1.40	1								_
VICE CHAIR		Х		Х				0.	0.	0.
(3) WALTON T. CONN, JR.	1.10									
TREASURER		Х		Х				0.	0.	0.
(4) OLIVIA OWEN	0.40									•
DIRECTOR	0.40	Х				_		0.	0.	0.
(5) DOTTIE KENADY BLAIR	0.40								_	•
DIRECTOR	0 00	Х						0.	0.	0.
(6) PAUL JACOBSON	0.80	3,7							_	0
DIRECTOR	0 00	Х				_		0.	0.	0.
(7) KATH CARTER	0.90	. ,							_	0
DIRECTOR (8) GREG HESTON	0.50	Х						0.	0.	0.
OIRECTOR	0.50	Х						0.	0.	0.
(9) JAMES M. HOSKINS	0.20	Λ						0.	0.	<u> </u>
DIRECTOR	0.20	Х						0.	0.	0.
(10) BETH STUKES	0.90	77						0.	0.	<u></u>
DIRECTOR	0.50	х						0.	0.	0.
(11) JOHN A. JERNIGAN	0.40							•	•	
DIRECTOR	- 5515	х						0.	0.	0.
(12) LESLEE BELLUCHIE	0.60	T-							0.1	
DIRECTOR		Х						0.	0.	0.
(13) MELISSA B. HERKT	0.50								-	
DIRECTOR		Х						0.	0.	0.
(14) RONALD M. DYKES	0.50									
DIRECTOR		Х						0.	0.	0.
(15) SHARLENE EVANS	1.20									
DIRECTOR		Х						0.	0.	0.
(16) STEVEN R. SPENCER	1.10									
DIRECTOR		Х						0.	0.	0.
(17) KERRY BRADLEY	1.10									
DIRECTOR		Х						0.	0.	0.

Form **990** (2019)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box,	not cl	ss per	more son is	than o s both r/trus	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) THOMAS R. CAMPBELL	1.20									
DIRECTOR		Х						0.	0.	0.
(19) WALTER S. WOLTOSZ DIRECTOR	0.90	х						0.	0.	0.
(20) STEVE CATES	1.00	Λ						0.	0.	· ·
DIRECTOR	1.00	Х						0.	0.	0.
(21) BRUCE DONNELLAN	1.10									
DIRECTOR		Х						0.	0.	0.
(22) JAVIER GOIZUETA	0.80									
DIRECTOR		Х						0.	0.	0.
(23) MARK FORCHETTE	0.90									
DIRECTOR		Х						0.	0.	0.
(24) JOHN STEIN	1.10									
DIRECTOR		Х						0.	0.	0.
(25) JANE DIFOLCO PARKER	4.00									
FORMER PRESIDENT				Х				0.	0.	0.
(26) CHRISTOPHER ROBERTS	4.00									
INTERIM PRESIDENT				Х				0.	0.	0.
1b Subtotal							>	0.	0.	0.
c Total from continuation sheets to Part VI							>	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	0.	0.	0.
2 Total number of individuals (including but n	at limited to th	000	licto	d ah	0.40	\ wh	0 r0	coived more than \$100	000 of roportable	

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

Per No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
TERRA COTTA CATERING CO.		
415 E. MAGNOLIA AVE, AUBURN, AL 36830	CATERING	505,056.
IDEAS UNITED, LLC		
200 ARIZONA AVE NE #104, ATLANTA, GA 30307	EVENT PLANNING	298,500.
BLACKBAUD, INC., 2000 DANIEL ISLAND DRIVE,		
CHARLESTON, SC 29492	FUNDRAISING SUPPORT	228,852.
EVERTRUE, INC., 330 CONGRESS STREET, 2ND		
FLOOR, BOSTON, MA 02210	FUNDRAISING SUPPORT	192,000.
AUBURN TAILGATE GUYS, LLC		
P.O. BOX 3885, AUBURN, AL 36831	HOSPITALITY	170,218.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization ► 12	d above) who received more than	

0

DATTON		63-602	2422		
d Highest C	Compensated Employe	es (continued)			
)	(D) (E)				
ion nat apply)	Reportable compensation	Reportable compensation	(F) Estimated amount of		
Key employee Highest compensated employee Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
			_		
	0.	0.	0.		
			_		
	0.	0.	0.		
			_		
	0.	0.	0.		
			_		
\perp	0.	0.	0.		
	0.	0.	0.		
	•	•	•		
	0.	0.	0.		
	0	0	0		
	0.	0.	0.		
	0.	0.	0.		

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		Check if Schedule O contains a response	or note to any line	in this Part VIII			
		Cricck ii Gerieddie G coritains a response	or riote to arry line	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							30000013 0 12 0 14
ints	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
	С	Fundraising events 1c					
	d	Related organizations1d					
S, imi	е	Government grants (contributions) 1e	40,262.				
rio S	f	All other contributions, gifts, grants, and					
ig the		similar amounts not included above 1f	47,732,174.				
dat	g	Noncash contributions included in lines 1a-1f 1g \$	8,906,176.				
a C a	h	Total. Add lines 1a-1f		47,772,436.			
			Business Code				
ø	2 a	N/D PORTION OF CONTRIBUTION	900099	95,106.	95,106.		
Program Service Revenue	b	PROG SRVC REGISTRATION	611710	70,059.	70,059.		
Ser	С				·		
m Ver	d						
gra Re	u 0						
Pro	f	All other program service revenue	900099	10,365.	10,365.		
				175,530.	10,000.		
\rightarrow		Total. Add lines 2a-2f		175,550.			
	3	Investment income (including dividends, inter		3 537 759			2 527 750
	_	other similar amounts)		3,537,758.			3,537,758.
	4 Income from investment of tax-exempt bond pr		·	60.065			60.065
	5	Royalties		68,965.			68,965.
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 272,079,644					
	b	Less: cost or other basis					
ē		and sales expenses 7b 255,580,964	.				
enr	С	Gain or (loss) 7c 16,498,680					
Revenue		Net gain or (loss)		16,498,680.			16,498,680.
er		Gross income from fundraising events (not					, ,
Ğ.	0 4	including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188					
	h						
		Less: direct expenses					
	э а	Gross income from gaming activities. See	_				
	_	Part IV, line 19					
		Less: direct expenses 9	0				
		Net income or (loss) from gaming activities	P				
	10 a	Gross sales of inventory, less returns					
		and allowances10)a				
		Less: cost of goods sold10	b				
\longrightarrow	С	Net income or (loss) from sales of inventory					
ς l			Business Code				
Miscellaneous Revenue	11 a	ADMIN COST RECOVERY	561000	2,401,287.	2,401,287.		
ane	b	MISCELLANEOUS	900099	4,075.	4,075.		
eve	С						
Aisc B	d	All other revenue					
2	е	Total. Add lines 11a-11d	_	2,405,362.			
	12	Total revenue See instructions		70 458 731.	2 580 892.	0.	20 105 403.

Form 990 (2019) AUBURN UNIVER Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respon		this Part IX		(P)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	47,681,628.	47,681,628.		
2	Grants and other assistance to domestic				
	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):	1 060 100		0.70 0.46	000 060
а	Management	1,863,109.	6 105	972,846.	890,263. 13,975.
	Legal	51,513.	6,125.	31,413.	13,975.
С	Accounting	106,000.	2,000.	104,000.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	176 201	70 600	44 060	F0 C00
	column (A) amount, list line 11g expenses on Sch 0.)	176,301.	72,609.	44,069.	59,623.
12	Advertising and promotion	223,081.	116,732.	1,947.	104,402.
13	Office expenses	819,801.	530,069. 26,212.	137,431.	152,301. 38,121.
14	Information technology	237,579.	20,212.	173,246.	38,121.
15	Royalties	215 405	101 057	112 //0	
16	Occupancy	215,405. 260,255.	101,957. 54,962.	113,448. 23,673.	101 600
17	Travel	200,233.	34,962.	23,0/3.	181,620.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	59,169.	26,099.	13,480.	19,590.
19	Conferences, conventions, and meetings	33,103.	40,033.	13,400.	13,330.
20	Interest Payments to offiliates				
21	Payments to affiliates Depreciation, depletion, and amortization				
22		35,338.		35,338.	
23 24	Other expenses. Itemize expenses not covered	33,330.		33,330.	
24	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	OFFICIAL GUESTS AND ENT	2,202,666.	1,520,736.	118,906.	563,024.
b	OTHER NONPROFESSIONAL O	316,266.	153,269.	105,094.	57,903.
c	ADMINISTRATIVE COSTS	242,994.	56,139.	186,315.	540.
d		,	.,	, , , , , ,	
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	54,491,105.	50,348,537.	2,061,206.	2,081,362.
26	Joint costs. Complete this line only if the organization	-	-	-	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)				
					000

Form 990 (2019)
Part X Balance Sheet

Pal	rt X	Balance Sneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments			37,654,412.	2	48,110,325.
	3	Pledges and grants receivable, net			85,014,804.	3	71,526,426.
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
Ś	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,128,169.			
	b	Less: accumulated depreciation	10b	305,016.	833,098.	10c	823,153.
	11	Investments - publicly traded securities	209,759,449.	11	227,376,045.		
	12	Investments - other securities. See Part IV, line 1	335,552,610.	12	349,020,966.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			12,693,437.	15	13,162,237.
	16	Total assets. Add lines 1 through 15 (must equa	681,507,810.	16	710,019,152.		
	17	Accounts payable and accrued expenses	516,041.	17	186,921.		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
jab		controlled entity or family member of any of thes	-			22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X	32,960,380.	0.5	33 405 223
	00				33,476,421.		33,495,223. 33,682,144.
	26			- ▶ 🏹	33,470,421.	26	33,002,144.
S		Organizations that follow FASB ASC 958, che	ck ner	e F A			
nce	27	and complete lines 27, 28, 32, and 33.			30,503,857.	27	33,852,524.
<u>a</u>	27 28	Net assets without donor restrictions Net assets with donor restrictions			617,527,532.	28	642,484,484.
B	20	Organizations that do not follow FASB ASC 9			017,527,552.	20	042,404,404.
튑		and complete lines 29 through 33.	Jo, Cite	ck liefe			
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
\ss	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32				648,031,389.	32	676,337,008.
Ž	33	Total net assets or fund balances			681,507,810.	33	710,019,152.
	<u>აა</u>	rotal liabilities and het assets/fund balances			001,001,010.	აა	, 10,010,1020

63-6022422 Page **12** AUBURN UNIVERSITY FOUNDATION Form 990 (2019) Part XI Reconciliation of Net Assets X Check if Schedule O contains a response or note to any line in this Part XI 70,458,731. Total revenue (must equal Part VIII, column (A), line 12) 1 Total expenses (must equal Part IX, column (A), line 25) 54,491,105. 2 2 15,967,626. Revenue less expenses. Subtract line 2 from line 1 3 648,031,389. 11,809,760. Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 4 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 6 7 7 Investment expenses 8 8 Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) 528,233. 9 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, 10 676,337,008. column (B)) Part XII Financial Statements and Reporting X 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:			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	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 compiled or reviewed on a			
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both:			
	Separate basis X Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2019

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

				ITY FOUNDATION				6	3-6022422
Pa	rt I	Reason for Public (Charity Status 🖟	All organizations must co	mplete th	is part.) Se	ee instructions		
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990 or 99	90-EZ).)			
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	or operate	ed by a go	vernmental un	it describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local government	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	e general _l	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a l	and-grant	college
		or university or a non-land-g	grant college of agrice	ulture (see instructions).	Enter the r	name, city	, and state of t	he college	or
		university:							
10		An organization that norma	Illy receives: (1) more	than 33 1/3% of its supp	oort from c	contributio	ns, membersh	ip fees, ar	d gross receipts from
		activities related to its exem	npt functions - subjec	ct to certain exceptions,	and (2) no	more thar	n 33 1/3% of its	s support	from gross investment
		income and unrelated busing		(less section 511 tax) fro	m busines	ses acqui	red by the orga	anization a	after June 30, 1975.
		See section 509(a)(2). (Co							
11	Н	An organization organized a							_
12	Ш	An organization organized a	•	•	-			•	
		more publicly supported or	~						Check the box in
		lines 12a through 12d that	* *					-	
а			•	•	•	-			
		the supported organization			majority o	or the aired	tors or trustee	s of the su	apporting
		organization. You must o			.:		. al	·/->	atan an
b		☐ Type II. A supporting org							
		control or management o organization(s). You mus			arrie persor	iis iiiai co	ntroi or manag	e trie supp	oorted
С		Type III functionally inte			in connect	tion with	and functionall	v integrate	ad with
·		its supported organization	-					y integrate	a with,
d		Type III non-functionally		·				ed organi:	zation(s)
-		that is not functionally int						-	
		requirement (see instructi	-		•		-		
е		Check this box if the orga	•	•	•			l. Type III	
		functionally integrated, or					31 / 31	, ,,	
f	Ente	er the number of supported o	ranizations						
g	Prov	vide the following information	about the supporte	d organization(s).					•
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of	•	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see in:	structions)	support (see instructions)
_ -									
Tota	<u> </u>						<u> </u>		i

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

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

Sec	ction A. Public Support		·	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and		, ,	, ,	,	, ,	
	membership fees received. (Do not						
	include any "unusual grants.")	72026204.	66341403.	40566440.	54251609.	47779204.	280964860
2	Tax revenues levied for the organ-						
	ization'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						
	Total. Add lines 1 through 3	72026204.	66341403.	40566440.	54251609.	47779204.	280964860
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,						46006410
_	column (f)						46096418. 234868442
	Public support. Subtract line 5 from line 4.						234000442
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	72026204	66341403.	40566440	54251609	47779204	280964860
	Gross income from interest,	720202011	003111030	103001100	312310031	177732010	200301000
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1833157.	2548250.	3799223.	3530155.	3606723.	15317508.
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.)	2199529.	2268927.	2538153.	2667461.		12248194.
11	Total support. Add lines 7 through 10						308530562
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3)	
0-	organization, check this box and stop						>
	ction C. Computation of Publi		_			 	76 10
	Public support percentage for 2019 (I					14	76.12 %
	Public support percentage from 2018					15	78.00 %
16a	33 1/3% support test - 2019. If the containing and life is						
L	stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
D		-					
170	and stop here. The organization qual 10% -facts-and-circumstances test						
114	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"				· ·	-	
h	10% -facts-and-circumstances test						
	more, and if the organization meets the	ū				•	
	organization meets the "facts-and-circ				-		ightharpoons
18	Private foundation. If the organization		-	•			s

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	now, please comp	Diete Part II.)				
Cale	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and membership fees 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						
3	Gross receipts from activities that are not an 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						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	nother than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
8 Se	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ► 📗	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organiza	ation,
	check this box and stop here						>
	ction C. Computation of Public					т т	
	Public support percentage for 2019 (lin					15	%
						16	%
	ction D. Computation of Inves					T I	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
198	a 33 1/3% support tests - 2019. If the						r is not
k	more than 33 1/3%, check this box an 33 1/3% support tests - 2018. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	
	line 18 is not more than 33 1/3%, chec						. \square
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in:	structions	>

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 Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **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.*
- **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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 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).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **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 **Part VI.**
- 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 Part VI.
- 10a 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.
 - **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.)

		Vac	Nic
		Yes	No
	1		
	2		
	3a		
	2h		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5h		
	5b 5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	90		
	10a		
_	10b		
~ O	an or ac	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	·20140

Par	Part IV Supporting Organizations (continued)			
			Yes	No
11	11 Has the organization accepted a gift or contribution from any of the follow	owing persons?		
а	a A person who directly or indirectly controls, either alone or together with	n persons described in (b) and (c)		
	below, the governing body of a supported organization?	<u>11a</u>		
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If "Ye	s" to a, b, or c, provide detail in Part VI. 11c		
Sect	Section B. Type I Supporting Organizations		1	Ι
	4 6:11		Yes	No
	regularly appoint or elect at least a majority of the organization's director	9		
	tax year? If "No," describe in Part VI how the supported organization(s)			
	controlled the organization's activities. If the organization had more than			
	describe how the powers to appoint and/or remove directors or trustees			
	organizations and what conditions or restrictions, if any, applied to such Did the organization operate for the benefit of any supported organization	pewere daring the tax year.		
	organization(s) that operated, supervised, or controlled the supporting of			
	Part VI how providing such benefit carried out the purposes of the supp	· ·		
	supervised, or controlled the supporting organization.	2		
	Section C. Type II Supporting Organizations	·		
			Yes	No
1	1 Were a majority of the organization's directors or trustees during the tax	year also a majority of the directors		
	or trustees of each of the organization's supported organization(s)? If	No," describe in Part VI how control		
	or management of the supporting organization was vested in the same p	ersons that controlled or managed		
	the supported organization(s).	1		
Sect	Section D. All Type III Supporting Organizations		_	
			Yes	No
1	1 Did the organization provide to each of its supported organizations, by t	the last day of the fifth month of the		
	organization's tax year, (i) a written notice describing the type and amou			
	year, (ii) a copy of the Form 990 that was most recently filed as of the da			
	organization's governing documents in effect on the date of notification			
	organization(s) or (ii) serving on the governing body of a supported orga	· ·		
	the organization maintained a close and continuous working relationship			
	3 By reason of the relationship described in (2), did the organization's sup significant voice in the organization's investment policies and in directin			
	income or assets at all times during the tax year? If "Yes," describe in F			
	supported organizations played in this regard.	are vi the role the organization's		
Sect	Section E. Type III Functionally Integrated Supporting Orga	ınizations		
а				
b				
С	c The organization supported a governmental entity. Describe in Pa	art VI how you supported a government entity (see instruction	ns) <u>. </u>	
2			Yes	No
а	a Did substantially all of the organization's activities during the tax year di	rectly further the exempt purposes of		
	the supported organization(s) to which the organization was responsive	? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities direc	tly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, a	and how the organization determined		
	that these activities constituted substantially all of its activities.	<u>2a</u>		
	,			
	of the organization's supported organization(s) would have been engage	· '		
	reasons for the organization's position that its supported organization(s)			
	activities but for the organization's involvement.	<u>2b</u>		
		vity of the officers divestors or		
	trustees of each of the supported organizations? <i>Provide details in</i> Part			
	b Did the organization exercise a substantial degree of direction over the of its supported organizations? If "Yes." describe in Part VI the role pla			
	5 Supported organizations. II Tes. Describe III I die 1 III I III I III I III	Ved by the Ordanization in this redaid.		

Par	rt V Type III Non-Functionally Integra	ted 509(a)(3) Supporting Org	anizations	
1	Check here if the organization satisfied the l	ntegral Part Test as a qualifying trust o	on Nov. 20, 1970 (explain in	Part VI). See instructions. Al
	other Type III non-functionally integrated sup	pporting organizations must complete	Sections A through E.	
Secti	tion 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, cor	nservation, or		
	maintenance of property held for production of inc	· · · · · · · · · · · · · · · · · · ·		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 fi	rom line 4) 8		
	tion 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 pa	art of year):		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exemp	ot-use assets 2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of	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		
Secti	tion 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	n B, line 8, Column A)		
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	ation's first as a non-functionally integr	rated Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions).

ı aı	Type in Non-Functionally integrated 509(aj(s) Supporting Orga	(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	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.			
8	Distributions to attentive supported organizations to which th	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
	Evenes from 2010			

Schedule A (Form 990 or 990-EZ) 2019

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

AUBURN UNIVERSITY FOUNDATION

Employer identification number 63-6022422

Pa			imilar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised	a idilus	(w) i dilde and other accounts
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	vriting that the assets hel	d in donor advised f	unds
Ū	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·		Yes No
Pai				
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a h	istorically important land area
	Protection of natural habitat		Preservation of a c	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribu	ition in the form of a	conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				
С	Number of conservation easements on a certified historic stru	ıcture included in (a)		2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on	a historic structure	
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or te	erminated by the org	anization during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspecti	on, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	handling of violations, an	d enforcing conserva	ation easements during the year
				
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enf	orcing conservation	easements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	• •		
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footness.	ote to the organization's	financial statements	that describes the
Dai	organization's accounting for conservation easements. † III Organizations Maintaining Collections of	Art Historical Tres	euros or Otho	r Similar Assots
I a	Complete if the organization answered "Yes" on Form		asures, or other	Ollilla Assets.
			nue statement and h	palanaa ahaat warka
ıa	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for pub			erance or public
h	service, provide in Part XIII the text of the footnote to its finan			noe shoot works of
D	If the organization elected, as permitted under FASB ASC 958	· ·		
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in lurthera	nce of public service,
	provide the following amounts relating to these items:			• \$
	(i) Revenue included on Form 990, Part VIII, line 1			L .
2		neuroe or other similar as		
2	If the organization received or held works of art, historical treation following amounts required to be reported under EASP ASP			iii, provide
_	the following amounts required to be reported under FASB AS	~		•
a	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X			
IJ	ASSERT INCIDITED IN FULL BOOK FAIL A			🕶 🛡

Sche	dule D (Form 990) 2019 AUBURN U	NIVERSITY	FOUNDATIO)N		63-6	022422	2 P:	age 2
	t III Organizations Maintaining Co				r Other	Similar Asset	ts _{(contin}	nued)	g-
3	Using the organization's acquisition, accession	n, and other records	s, check any of the	following that	make sig	nificant use of its	;	,	
	collection items (check all that apply):								
а	Public exhibition	d	Loan or ex	change progra	am				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's col	lections and explain	how they further	the organizatio	n's exem	pt purpose in Par	t XIII.		
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be mail		•	•		_	Yes		No
Par	t IV Escrow and Custodial Arrang								
	reported an amount on Form 990, Part		oto ii tilo organizat	on anowered	100 0111	omi ooo, i aitiv	, 11110 0, 01		
	Is the organization an agent, trustee, custodia		ary for contributio	ns or other ass	sets not in	ncluded			
Iu	on Form 990, Part X?		•			_	Yes		No
h	If "Yes," explain the arrangement in Part XIII a					∟	103		_ 140
b	ii res, explain the analigement in Fart Alli a	na complete the lon	lowing table.				Amount		
_	Deginning belongs					10	Amoun		
	Beginning balance								
	Additions during the year								
	Distributions during the year								
f	Ending balance					_ <u>_ 1f</u>	٦,,	_	٦
	Did the organization include an amount on For					y?∟	Yes		∐ No
Par	If "Yes," explain the arrangement in Part XIII. (
Fai	t V Endowment Funds. Complete if						1,,,,		
		(a) Current year	(b) Prior year	(c) Two yea		d) Three years back		-	
	Beginning of year balance	544,691,937.	533,333,931	+		461,954,124		,066,	
	Contributions	23,841,137.	24,037,765	-	0,984.	15,107,452		,580,	
	Net investment earnings, gains, and losses	30,944,185.	8,364,870		1,221.	49,622,032		,329,	
d	Grants or scholarships	18,111,703.	16,473,062	. 15,558	8,917.	13,643,380	. 12,	,471,	005.
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses	4,893,301.	4,571,567	. 4,22	6,205.	3,873,380	. 3,	,551,	176.
g	End of year balance	576,472,255.	544,691,937	. 533,33	3,931.	509,166,848	. 461,	,954,	124.
2	Provide the estimated percentage of the curre		e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	3.52	_%						
b	Permanent endowment ► 76.04	%							
С	Term endowment ▶ 20.44 %	6							
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%.							
За	Are there endowment funds not in the possess		tion that are held a	and administer	ed for the	organization			
	by:	· ·					ſ	Yes	No
	(i) Unrelated organizations						3a(i)		Х
	(ii) Related organizations							х	
h	If "Yes" on line 3a(ii), are the related organizati	ons listed as require	ed on Schedule R	· · · · · · · · · · · · · · · · · · ·				X	
4	Describe in Part XIII the intended uses of the o						[00]		
Par	t VI Land, Buildings, and Equipme		Willett fullus.						
	Complete if the organization answered		Part IV line 11a	See Form 990	Dart Y li	ine 10			
							(d) Do-1	k veli	
	Description of property	(a) Cost or of basis (investment)	, ,	st or other s (other)	. ,	cumulated reciation	(d) Bool	n value	e
	Land	 	· ·	70,150.	uep	TOTALION	Q1 (9,60	60
	Land	. 049,3	<u> </u>	, , , , , , , ,			01	, 0	09.
D	Buildings	1	ı						

308,500.

Schedule D (Form 990) 2019

3,484.

823,153.

305,016.

e Other

c Leasehold improvements

d Equipment

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

	1		
Dart VIII	Investmen	ite - Othar	Securiti

Complete if the organization answered "Yes"	on Form 000 Bort IV line 1	11h Soo Form 000 Part V line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	, ,	
(2) Closely held equity interests		
(3) Other		
(A) ADAGE LARGE CAP FUND, LP	76,022,949.	END-OF-YEAR MARKET VALUE
(B) AEW GLOBAL PROPERTY		
(C) SECURITIES	17,420,027.	END-OF-YEAR MARKET VALUE
(D) AG CORE PLUS REALTY IV	5,012,672.	END-OF-YEAR MARKET VALUE
(E) AG REALTY VALUE FUND X	2,424,414.	END-OF-YEAR MARKET VALUE
(F) AG REALTY VIII	1,252,210.	END-OF-YEAR MARKET VALUE
(G) AMERICAN SECURITIES		
(H) PARTNERS VI	2,862,683.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	349,020,966.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	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
<u>(1)</u>		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.

(8) (9)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must squal Form 900, Part V col. (P) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	11,354,029.
(3) DUE TO AUBURN ALUMNI ASSOCIATION	9,011,379.
(4) DUE TO TIGERS UNLIMITED FOUNDATION	9,320,341.
(5) RETAINED LIFE COMMITMENT	17,684.
(6) DUE TO OTHER RELATED ORGANIZATIONS	1,263,340.
(7) DEFERRED REVENUE	88,596.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	33,495,223.

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

Par	T XI Reconciliation of Revenue per Audited Financial State		eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	Τ.	02 250 640
1			1	83,350,649.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	11 900 760		
a	Net unrealized gains (losses) on investments		_	
b	Donated services and use of facilities		-	
q	Recoveries of prior year grants Other (Describe in Part XIII.)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
d	, , , , , , , , , , , , , , , , , , , ,		2e	12,891,918.
е 3	Add lines 2a through 2d Subtract line 2e from line 1		3	70,458,731.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			70,130,7320
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	70,458,731.
Par	t XII Reconciliation of Expenses per Audited Financial Stat	tements With Expenses per	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total expenses and losses per audited financial statements		1	55,597,605.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	_	
С	Other losses	4 406 500		
d	, , , , , , , , , , , , , , , , , , , ,	•	_	1 106 500
_	Add lines 2a through 2d		2e	1,106,500. 54,491,105.
3	Subtract line 2e from line 1		3	34,491,103.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	الما		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)			
b	A 1115 A 144		4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.			54,491,105.
Par	t XIII Supplemental Information.	,		, ,
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b and 2b; Part V, line	4; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information.		
DAE	RT V, LINE 4:			
PAL	XI V, DINE 4:			
ACA	ADEMIC UNIT SUPPORT \$128,929,831			
	7			
FAC	CULTY SUPPORT \$148,671,093			
STU	JDENT AID \$244,630,903			
PRC	OGRAM SUPPORT \$17,413,850			
D 17 C	383 DOM GUDDODE #15 020 222			
RES	SEARCH SUPPORT \$15,930,333			
ОТТП	DENCY YMD DIIDI TO GEDILLOE GIIDDODW GN USE	735		
001	REACH AND PUBLIC SERVICE SUPPORT \$4,035	, 135		
CAF	PITAL AND PLANT SUPPORT \$3,276,637			
CHI	TIME MAD TERMI BOTTONI \$5,270,037			
ADM	INISTRATIVE SUPPORT \$13,583,873			
	7-7//			
PAF	RT X, LINE 2:			

THE AU FOUNDATION AND THE REAL ESTATE FOUNDATION HAVE RECEIVED LETTERS

Part XIII | Supplemental Information (continued)

FROM THE INTERNAL REVENUE SERVICE RECOGNIZING THE AU FOUNDATION AND THE REAL ESTATE FOUNDATION AS TAX-EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3)

OF THE CODE. HOWEVER CERTAIN TYPES OF INCOME MAY BE SUBJECT TO TAX FROM UNRELATED BUSINESS INCOME AS DEFINED BY THE TAX CODE. THE AU FOUNDATION AND THE REAL ESTATE FOUNDATION HAVE DETERMINED THAT NO TAX IS DUE FOR EITHER THE 2020 OR 2019 YEAR. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.

THE AU FOUNDATION AND THE REAL ESTATE FOUNDATION FOLLOW THE ACCOUNTING

GUIDANCE FOR UNCERTAINTY IN INCOME TAXES USING THE PROVISIONS OF FASB

ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME TAXES. AS OF

SEPTEMBER 30, 2020 AND 2019, THE AU FOUNDATION AND THE REAL ESTATE

FOUNDATION HAVE NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR

DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS AND NO INTEREST AND

PENALTIES RELATED TO INCOME TAXES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:	
NET REVENUE FOR AU REAL ESTATE FOUNDATION REPORTED ON	
SEPARATE RETURN	554,074.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	528,233.
INCOME/EXPENSE RECLASSIFICATION	-149.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,082,158.

PART XII, LINE 2D - OTHER ADJUSTMENTS:	
NET EXPENSES FOR AU REAL ESTATE FOUNDATION REPORTED ON	
SEPARATE RETURN	1,106,649.
INCOME/EXPENSE RECLASSIFICATION	-149.

Schedule D (Form 990) 2019

1,106,500.

TOTAL TO SCHEDULE D, PART XII, LINE 2D

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
AMERICAN SECURITIES PARTNERS VII	2,425,526.	FMV
AMERICAN SECURITIES PARTNERS VIII	1,896,668.	FMV
ANCHORAGE CAPITAL PARTNERS OFFSHORE	5,576,406.	FMV
BAIN CAPITAL FUND IX, LP	193,965.	FMV
CABOT INDUSTRIAL VALUE FUND VI	176,919.	FMV
CANYON VALUE REALIZATION FD LTD	12,702,705.	FMV
CLOPTON STRUCTURED NOTES	47,469.	FMV
DAVIDSON KEMPNER LTDO II	1,943,733.	FMV
DAVIDSON KEMPNER LTDO IV	4,538,888.	FMV
DAVIDSON KEMPNER LTDO INTL V	701,819.	FMV
DEEDED MINERAL RIGHTS	420,000.	FMV
DENHAM COMMODITIES PTRS VI	2,517,348.	FMV
EMG III	1,421,297.	FMV
EMINENCE FUND LTD.	11,090,070.	FMV
ENCAP ENERGY CAPITAL FUND XI	914,762.	FMV
ENCAP ENERGY CAPITAL IX	480,785.	FMV
ENCAP ENERGY CAPITAL X	1,131,431.	FMV
ENCAP FLATROCK MIDSTREAM IV	1,900,382.	FMV
EQT INFRASTRUCTURE IV	4,190,511.	FMV
ETON PARK OVERSEAS FUND	12,842.	FMV
FARALLON PARTNERS	15,687,971.	FMV
FRONTIER FUND V	3,156,283.	FMV
GEM REALTY FUND VI	2,211,127.	FMV
GREENSPRING GLOBAL PARTNERS IX	2,316,230.	FMV
GREENSPRING GLOBAL PARTNERS V	4,648,753.	FMV
GREENSPRING GLOBAL PARTNERS VI	6,063,662.	FMV

932421 04-01-19 Schedule D (Form 990)

Part XIII Supplemental Information (continued)

D. Will Leave Land College College Cities		
Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
GREENSPRING GLOBAL PARTNERS VII	4,629,776.	FMV
GREENSPRING GLOBAL PARTNERS VIII	2,585,062.	FMV
GREENSPRING GLOBAL PARTNERS X	250,000.	FMV
GREYCROFT GROWTH III	574,752.	FMV
GREYCROFT PARTNERS VI	153,967.	FMV
HIGHFIELDS CAPITAL LTD	237,000.	FMV
HIGHLINE CAPITAL INTL LTD	482,093.	FMV
LANDMARK EQUITY PARTNERS XV	1,668,336.	FMV
LEXINGTON PARTNERS, LP	309,392.	FMV
MARATHON LONDON INTERNATIONAL	20,104,070.	FMV
MERIT ENERGY G	2,916,748.	FMV
MERIT ENERGY H	2,925,409.	FMV
NATURAL GAS PARTNERS IX, LP	88,053.	FMV
NATURAL GAS PARTNERS X, LP	790,918.	FMV
OCM OPPORTUNITY FUND IV, LP	22,665.	FMV
OCM OPPORTUNITY FUND VII-B, LP	3,828.	FMV
OCM OPPORTUNITY FUND VIII, LP	47,830.	FMV
OTHER INTERMEDIATE INVESTMENTS	2,439,854.	FMV
SEG PARTNERS OFFSHORE LTD	10,894,261.	FMV
SILCHESTER INT VAL	26,100,608.	FMV
SIRE PARTNERS, LP	72,772.	FMV
STEADFAST INTERNATIONAL LTD	13,759,104.	FMV
SUMMIT PARTNERS GROWTH EQUITY IX	7,020,408.	FMV
SUMMIT PARTNERS GROWTH EQUITY X	674,083.	FMV
SUN CAPITAL PARTNERS FUND VII	1,210,071.	FMV
TACONIC OPPORTUNITY OFFSHORE FD	8,093,283.	FMV

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
VARDE INVESTMENT PARTNERS LTD	12,854,608.	FMV
WALTON STREET REAL ESTATE V, LP	139,533.	FMV
WARBURG PINCUS GLOBAL GROWTH	2,394,513.	FMV
WARBURG PINCUS XII	6,721,317.	FMV
WELLINGTON EMERGING MARKETS FUND	16,040,500.	FMV
WELSH CAROSN XIII	1,355,861.	FMV
WELSH CARSON ANDERSON & STOWE FUND XI, LP	632,486.	FMV
WELSH CARSON XII	3,594,561.	FMV
WHEELOCK ST REAL ESTATE FUND V	3,914,531.	FMV
WHEELOCK ST REAL ESTATE FUND VI	-43,794.	FMV

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2019
Open to Public Inspection

Name of the organization

Employer identification number

	BURN UNIVERSI	TY FOUND	ATION			63-602242	
Pa	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "\	Yes" on
	Form 990, Part IV						
1				ds to substantiate the amount of its gra			Yes No
	the grantees eligibility it	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	tance? 21	res No
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and oth	ner assistance outs	ide the
	United States.						
3				n be duplicated if additional space is no			
	(a) Region	(b) Number of offices in the region	employees, agents, and independent contractors	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, specific type (s) in the region	(f) Total expenditures for and investments
			in the region	resipiente lecated in the region,	01 001 11001	(5) III III TOGICII	in the region
URC	OPE	0	1	FUNDRAISING			3,208.
3 a	Subtotal	0	1				3,208.
b	Total from continuation	_	_				
	sheets to Part I	0	0				0.
С	Totals (add lines 3a						2 200

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
by the IRS, or for which	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

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

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

Schedule F (Form 990) 2019 Part IV Foreign Forms

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

Schedule F (Form 990) 2019

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

2019

OMB No. 1545-0047

Open to Public Inspection

Name of the organization AUBURN UN	IVERSITY	FOUNDATION					63-6022422
Part I General Information on Grants a	nd Assistance					•	
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	tance?				-	stance, and the selection	ਓ , □ ,,
Part II Grants and Other Assistance to I					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	5,000. Part II can	be duplicated if additi	onal space is neede	ed.			
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AUBURN UNIVERSITY							
107 SAMFORD HALL							
AUBURN, AL 36849	63-0000724	115	11,858,300.	0.			ACADEMIC SUPPORT
AUBURN UNIVERSITY 107 SAMFORD HALL							
AUBURN, AL 36849	63-0000724	115	2,509,218.	0.			RESEARCH SUPPORT
AUBURN UNIVERSITY 107 SAMFORD HALL AUBURN, AL 36849	63-0000724	115	2,514,690.	0.			OUTREACH SERVICE
AUBURN UNIVERSITY 107 SAMFORD HALL AUBURN, AL 36849	63-0000724	115	444,436.	0.			NONACADEMIC SUPPORT
AUBURN UNIVERSITY 107 SAMFORD HALL AUBURN, AL 36849	63-0000724	115	5,120,491.	0.			FACULTY SUPPORT
AUBURN UNIVERSITY 107 SAMFORD HALL AUBURN, AL 36849	63-0000724	115	456,384.	0.			STUDENT SERVICES
 Enter total number of section 501(c)(3) at Enter total number of other organizations 	nd government org	ganizations listed in the	e line 1 table			1	> <u>4.</u>

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AUBURN UNIVERSITY											
107 SAMFORD HALL											
AUBURN, AL 36849	63-0000724	115	40,220.	0.			INTERCOLLEGIATE ATHLETICS				
AUBURN UNIVERSITY											
107 SAMFORD HALL											
AUBURN, AL 36849	63-0000724	115	231,374.	0.			LIBRARY				
AUDUDA HATUBD GTWY											
AUBURN UNIVERSITY 107 SAMFORD HALL							INSTITUTIONAL				
AUBURN, AL 36849	63-0000724	115	3,852.	0.			ADMINISTRATION				
nozem, im seers	03 0000721		3,002.	•							
AUBURN UNIVERSITY											
107 SAMFORD HALL											
AUBURN, AL 36849	63-0000724	115	11,435,251.	0.			CAPITAL SUPPORT				
AUBURN UNIVERSITY											
107 SAMFORD HALL											
AUBURN, AL 36849	63-0000724	115	11,692,629.	0.			STUDENT FINANCIAL AID				
AUBURN UNIVERSITY											
107 SAMFORD HALL											
AUBURN, AL 36849	63-0000724	115	1,171,923.	0.			OTHER PROGRAM SUPPORT				
				-							
AUBURN ALUMNI ASSOCIATION											
317 S COLLEGE STREET											
AUBURN, AL 36849	63-0439459	501(C)(3)	55,683.	0.			ALUMNI RELATIONS				
AUBURN UNIVERSITY REAL ESTATE											
FOUNDATION, INC 317 S COLLEGE	56 0535000	501/61/21	120 000								
STREET - AUBURN, AL 36849	56-2535892	DU1(C)(3)	132,000.	0.			CAPITAL SUPPORT				
TIGERS UNLIMITED FOUNDATION											
392 S DONAHUE DR											
AUBURN, AL 36849	36-4538203	501(C)(3)	15,177.	0.			INTERCOLLEGIATE ATHLETICS				
	•	•			•	•	•				

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance						
Part IV Supplemental Information. Provide the information rec	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	Iditional information.							
PART I, LINE 2:											
THE GRANTEE, AUBURN UNIVERSITY (AU), IS A S	ECTION 115	ENTITY.	AS A							
LAND-GRANT INSTITUTION OF HIGHER E	DUCATION,	ITS MAJOF	R SOURCE OF	FUNDS ARE							
FEDERAL AND STATE APPROPRIATIONS.	ITS DISB	URSEMENTS	ARE GOVERN	ED BY							
FEDERAL LAW AND THE STATE OF ALABA	MA LAW.	ITS TRANSA	ACTIONS ARE	SUBJECT TO							
PUBLIC DISCLOSURE. GRANTS DESIGNA	red for A	SPECIFIC	PURPOSE AR	E CREDITED							
TO A FUND ESTABLISHED SPECIFICALLY	FOR THAT	PURPOSE.	AU'S OFFIC	E OF							
PROCUREMENT AND PAYMENT SERVICES E	NSURES CO	MPLIANCE V	VITH RESTRI	CTIONS							
SUBJECT TO ANY APPLICABLE LAWS.											

SCHEDULE I, PART II, LINE 2: THE GRANTEE, AUBURN ALUMNI ASSOCIATION (AAA),

IS A SECTION 501(C)(3) ENTITY. ITS PRIMARY PURPOSE IS THE CREATION,

NURTURING AND STRENGTHENING OF THE TIES BETWEEN AU AND ITS ALUMNI AND

FRIENDS THROUGH THE SPONSORSHIP OF PROGRAMS TO ENCOURAGE IDENTIFICATION

WITH AND ALLEGIANCE TO THE INTEREST IN AU'S SUCCESS. THE MANAGEMENT OF AAA

IS RESPONSIBLE FOR THE EXPENDITURES OF AAA AND REPORTS TO AN ACTIVE BOARD

OF DIRECTORS.

SCHEDULE I, PART II, LINE 2: THE GRANTEE, AUBURN UNIVERSITY REAL ESTATE

FOUNDATION, INC (AUREF) IS A SECTION 501(C)(3) ENTITY. ITS PRIMARY PURPOSE

IS TO SUPPORT AUBURN UNIVERSITY FOUNDATION (AUF) WHICH IS THE SOLE MEMBER

OF THE AUREF. AS THE CONTROLLING ENTITY, AUF HAS THE AUTHORITY TO REVIEW

AUREF'S FINANCIAL RECORDS. EACH ENTITY HAS AN ACTIVE BOARD OF DIRECTORS TO

WHICH MANAGEMENT IS RESPONSIBLE.

SCHEDULE I, PART II, LINE 2 THE GRANTEE, TIGERS UNLIMITED FOUNDATION (TUF),

IS A SECTION 501(C)(3) ENTITY. ITS PRIMARY PURPOSE IS THE SUPPORT OF AU'S

INTERCOLLEGIATE ATHLETICS. TUF'S MANAGEMENT IS RESPONSIBLE FOR ITS

EXPENDITURES AND REPORTS TO AN ACTIVE BOARD OF DIRECTORS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990.

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

AUBURN UNIVERSITY FOUNDATION

Employer identification number 63-6022422

Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of d noncash contrib	etermin	•	5
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	121	8,486,436.	FMV			
10	Securities - Closely held stock			., ,				
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential	Х	2	35,000.	APPRAISAL			
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ (LIVESTOCK)	X	1	300,000.	APPRAISAL			
26	Other (INSURANCE)	Х	36	84,740.	COST			
27	Other							
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	gh 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be u	sed for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	equires the review	of any nonstandard contribu	tions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is che	cked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 990).	Schedule I	M (Forn	n 990)	2019

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

Schedule M (Form 990) 2019

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

2019
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AUBURN UNIVERSITY FOUNDATION

Employer identification number 63-6022422

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: LAND-GRANT INSTITUTION WHICH IS TAX EXEMPT UNDER IRC SECTION 115. FORM 990, PART VI, SECTION B, LINE 11B: THE RETURN WAS REVIEWED BY THE AUDIT COMMITTEE AND RECOMMENDED TO THE FULL BOARD OF DIRECTORS FOR A REVIEW PERIOD PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: "CONFLICT OF INTEREST AND SELF-DEALING STATEMENT" WAS PRESENTED TO ALL NEW MEMBERS AND ANNUALLY TO RETURNING BOARD MEMBERS BY POLICY. THE STATEMENT INCLUDED THE POLICY AND AN AFFIRMATION SECTION THAT DOCUMENTED ANY POTENTIAL CONFLICT AND WAS SIGNED BY EACH BOARD MEMBER. THIS SIGNED STATEMENT WAS COLLECTED BY THE BOARD SECRETARY AND THE RESULTS WERE REPORTED TO THE CHAIR OF THE BOARD FOR ANY NECESSARY FOLLOW-UP. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: FL, KY, MA, MD, MI, MN, NH, NJ, NY, ND, OH, OR, PA, SC, UT, WA FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES THE FOLLOWING GOVERNING DOCUMENTS AVAILABLE ON ITS WEBSITE AT WWW.AUBURNUNIVERSITYFOUNDATION.ORG: FORM 1023, FORM 990, AND DETERMINATION LETTER. THE AUDITED FINANCIAL STATEMENTS WERE INCLUDED IN AUBURN UNIVERSITY'S AUDITED FINANCIAL STATEMENTS WHICH ARE PUBLIC THE FOUNDATION'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE DOCUMENTS.

UPON WRITTEN REQUEST TO THE FOUNDATION'S SECRETARY.

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization	Page : Employer identification number
AUBURN UNIVERSITY FOUNDATION	63-6022422
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	528,233.
FORM 990, PART XII, LINE 2C:	
PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	

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.

AUBURN UNIVERSITY FOUNDATION

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

63-6022422

(a)	(b)	(c)	(d)	(e))	(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea	ır assets	Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiorganizations during the tax year.	zations. Complete if the organization	answered "Yes" on Form 990	D, Part IV, line 34, t	Decause it had one	or more i	related tax-exer	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) et controlling entity	conti	g) 512(b)(13) rolled :ity?
Ç		Toroigh country)		501(c)(3))		•	Yes	No
AUBURN UNIVERSITY REAL ESTATE FOUNDATION, INC 56-2535892, 317 s. COLLEGE STREET,	SUPPORT AUBURN UNIVERSITY			170(B)(1)(A)	AUBURN	UNIVERSITY		
AUBURN, AL 36849	FOUNDATION	ALABAMA	501(C)(3)	(VI)	FOUNDAT	rion		Х
			+		+		-	-

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

		,	ı	•			_				
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	1	ortionate	Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		itions?	amount in box 20 of Schedule K-1 (Form 1065)	partner	ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
	1										
	1										
	1										
	1										
	1										
	1										
	1										
		l .					l				

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	ent	(i) etion b)(13) rolled tity?
		country)						Yes	No
HERBERT C. RYDING PHYSICS FELLOWSHIP -			AUBURN						
63-6019732, 317 S. COLLEGE STREET, AUBURN,			UNIVERSITY						
AL 36849	PHYSICS FELLOWSHIP	AL	FOUNDATION	TRUST	2,776.	55,318.	100%		Х

Schedule R (Form 990) 2019

Page 3

Yes No

1a

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	X				
С	Gift, grant, or capital contribution from related organization(s)				1c	Х				
					1d		X			
е	Loans or loan guarantees by related organization(s)				1e		X			
f	Dividends from related organization(s)				1f		X			
g	Sale of assets to related organization(s)				1g		X			
h	Purchase of assets from related organization(s)				1h		X			
i	Exchange of assets with related organization(s)				1i		X			
j	Lease of facilities, equipment, or other assets to related organization(s)				1 j		X			
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X			
ı	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11	X				
n	m Performance of services or membership or fundraising solicitations by related organization(s)									
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n	X				
0	Sharing of paid employees with related organization(s)									
р	Reimbursement paid to related organization(s) for expenses				1p		X			
q	Reimbursement paid by related organization(s) for expenses				1q	X				
	Other transfer of cash or property to related organization(s)				1r		X			
S	Other transfer of cash or property from related organization(s)				1s		X			
2	If the answer to any of the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on which it is the above in the above	ho must complete th	is line, including covered rela	tionships and transaction thresholds.						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved					
-	AUBURN UNIVERSITY REAL ESTATE FOUNDATION,									
1)	INC.	В	132,000.C	OST						
2)										
3)										
4)										
5)										
6)										
3216	3 09-10-19			Schedule	R (Forr	n 990	2019			

Page 4

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 sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
	_								000) 0040