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SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply)											
	<div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)</div> <div><input type="checkbox"/> Protection of natural habitat</div> <div><input type="checkbox"/> Preservation of open space</div>	<div><input type="checkbox"/> Preservation of an historically importantly land area</div> <div><input type="checkbox"/> Preservation of a certified historic structure</div>										
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></table>		Held at the End of the Year	2a		2b		2c		2d	
	Held at the End of the Year											
2a												
2b												
2c												
2d												
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____											
4	Number of states where property subject to conservation easement is located ▶ _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?											
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>											
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?											
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____ 0
	(ii) Assets included in Form 990, Part X	▶ \$ _____ 3,801,950
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____ 0
b	Assets included in Form 990, Part X	▶ \$ _____ 0

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

d

☐

Loan or exchange programs

b

☒

Scholarly research

e

☐

Other

c

☒

Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	226,857,411	280,638,212			
b Contributions	2,452,201	759,845			
c Investment earnings or losses	25,619,694	-41,956,258			
d Grants or scholarships	14,087,256	2,702,276			
e Other expenditures for facilities and programs	-941,447	9,882,112			
f Administrative expenses	0	0			
g End of year balance	241,783,497	226,857,411			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 17.26 %

b

Permanent endowment ▶ 28.56 %

c

Term endowment ▶ 54.18 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

Yes

No

(ii)

related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	6,419,666	111,509		6,531,175
b Buildings	0	129,129,561	44,592,091	84,537,470
c Leasehold improvements	0	0	0	0
d Equipment	0	32,445,524	26,261,066	6,184,458
e Other	0	13,842,411	12,437,749	1,404,662
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				98,657,765

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	62,654,892
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	76,931,097
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-14,276,205
4	Net unrealized gains (losses) on investments	4	22,853,070
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	-3,541,007
9	Total adjustments (net) Add lines 4 - 8	9	19,312,063
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	5,035,858

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	67,803,514
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	22,853,070
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV)	2d	339,415
e	Add lines 2a through 2d	2e	23,192,485
3	Subtract line 2e from line 1	3	44,611,029
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,045,320
b	Other (Describe in Part XIV)	4b	15,998,543
c	Add lines 4a and 4b	4c	18,043,863
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	62,654,892

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	62,767,656
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV)	2d	3,880,422
e	Add lines 2a through 2d	2e	3,880,422
3	Subtract line 2e from line 1	3	58,887,234
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,045,320
b	Other (Describe in Part XIV)	4b	15,998,543
c	Add lines 4a and 4b	4c	18,043,863
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	76,931,097

Part XIVSupplemental Information

Complete this part to provide 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	Southwestern University has 19 collections within the Special Collections of the A Frank Smith Library Center that contain a variety of books, records, papers, maps and manuscripts that are maintained for historical purposes, public exhibition and student educational research.
SchD_P05_S00_L04	Schedule D, Part V, Line 4	Southwestern University endowments include \$200,060,616 (83%) of donor restricted endowment funds and \$41,722,881 (17%) of Board-designated funds functioning as endowment funds. All donor restricted endowments are used only as the donors intended per the donor restrictions. The Board-designated funds support general program services of the University.
SchD_P10_S00_L00	Schedule D, Part X	Tax positions taken related to the University's tax exempt status, unrelated business activities taxable income and the deductibility of expenses and other miscellaneous tax positions have been reviewed, and management is of the opinion that material positions taken by the University would more likely than not be sustained by examination. Accordingly, the University has not recorded an income tax liability for uncertain tax benefits.
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	\$277,422 Change in Split Interest Agreement + \$2,203,753 is gain due to change in nature of promises receivable + (\$6,084,175) is loss due to post-retirement related changes other than net periodic pension costs + \$14,504 Special Events Expenses + \$47,489 Rental Activity Expenses = (\$3,541,007) is the net of these three numbers above.
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	\$47,489 Rental Activity Expenses + \$14,504 Special Events Expenses + \$277,422 Split Interest Agreement = \$339,415
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	\$15,998,543 is amount spent on scholarships and grants that is netted against tuition and fees on the financial statements.
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	(\$6,084,175) is post-retirement related changes other than net periodic pension costs + \$2,203,753 is gain due to change in nature of promises receivable = (\$3,880,422)
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	\$15,998,543 is amount spent on scholarships and grants that is netted against tuition and fees on the financial statements.

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13,
or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number

74-1233796

		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain An annual notice is published in the following newspapers Williamson County Sun, Austin American Statesman, Houston Chronicle, and the Dallas Morning News Policies are included in all student, faculty and staff handbooks	Yes	
4	Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)	Yes	
5	Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)		No
			No
			No
			No
			No
			No
			No
			No
6a	Does the organization receive any financial aid or assistance from a governmental agency?	Yes	
6b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)		No
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	Yes	

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States
- 3

Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (including Iceland and Greenland)	0	0	Grantmaking		62,336
South Asia	0	0	Grantmaking		5,700
East Asia and the Pacific	0	0	Grantmaking		14,566
South America	0	0	Grantmaking		6,000
Central America and the Caribbean	0	0	Grantmaking		8,615
North America (including Canada and Mexico, but not the United States)	0	0	Grantmaking		12,455
Sub-Saharan Africa	0	0	Grantmaking		2,685
Europe (including Iceland and Greenland)	0	4	Program Services	Study Abroad Program	116,463
Central America and the Caribbean	0	1	Program Services	Study Abroad Program	20,382
North America (including Canada and Mexico, but not the United States)	0	1	Program Services	Study Abroad Program	8,266
Totals ►	0	6			257,468

[illegible]**Schedule F (Form 990) 2009**

Part II

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Schedule F-1 (Form 990) 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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Scholarships	Europe (including Iceland and Greenland)	39	54,250	Check			
Scholarships	South Asia	1	3,000	Check			
Scholarships	East Asia and the Pacific	5	7,000	Check			
Scholarships	South America	6	6,000	Check			
Scholarships	Central America and the Caribbean	10	8,615	Check			
Scholarships	North America (including Canada and Mexico, but not the United States)	13	11,200	Check			
Scholarships	Sub-Saharan Africa	3	2,685	Check			
Housing	Europe (including Iceland and Greenland)	3	20,826	Wire			
Federal Faculty Research Grant	East Asia and the Pacific	1	3,644	Check			
Faculty Development/Research	Europe (including Iceland and Greenland)	5	8,086	Check			
Faculty Development/Research	East Asia and the Pacific	2	3,922	Check			
Faculty Development/Research	North America (including Canada and Mexico, but not the United States)	1	1,255	Check			
Faculty Development/Research	South Asia	1	2,700	Check			

Complete this part to provide the information required in Part I, line 2, and any additional information.

Schedule F (Form 990) 2009

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and e-mail solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>Pirate Golf</u> (event type)	<u>Jameson 5K</u> (event type)	<u>1</u> (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	29,650	10,888	6,086
	2	Less Charitable contributions	19,616	7,495	3,729
	3	Gross income (line 1 minus line 2)	10,034	3,393	2,357
Direct Expenses	4	Cash prizes	0	0	0
	5	Non-cash prizes	689	319	0
	6	Rent/facility costs	5,225	0	0
	7	Food and beverages	2,734	0	0
	8	Entertainment	0	0	0
	9	Other direct expenses	0	2,649	2,888
	10	Direct expense summary Add lines 4 through 9 in column (d)			14,504
	11	Net income summary Combine lines 3, column d, and line 10.			1,280

Part III Gaming.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
Direct Expenses	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d)			
	8	Net gaming income summary Combine lines 1, column d, and line 7			

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain _____ _____			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain _____ _____			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► _____			
Address ► _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ► _____			
Address ► _____			
16	Gaming manager information		
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHWESTERN UNIVERSITY

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

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

OMB No 1545-0047

2009

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Employer identification number
74-1233796

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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

2 Enter total number of section 501(c)(3) and government organizations ▶

3 Enter total number of other organizations ▶

Software ID: 09000073

Software Version: v1.00

EIN: 74-1233796

Name: SOUTHWESTERN UNIVERSITY

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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 non-cash assistance
Pre Med Scholarship	14	43,000	0		
Music, Art, Theatre Scholarship	106	389,770	0		
National Merit Scholarship	13	22,580	0		
Star Loan Interest Subsidy	435	279,687	0		
Beneficiary Scholarship	14	6,600	0		
Brown Scholars	14	545,380	0		
Supplemental Education Opportunity Grants	168	132,880	0		
Academic Competitiveness Grant	132	90,787	0		
Smart Grant	11	24,000	0		
BEI Scholarship	1	30,220	0		
James S Kemper Foundation Scholarship	4	19,000	0		
United Methodist Higher Education Foundation-Dollars for Scholars	4	8,000	0		
Hatton W Sumners Foundation	8	80,000	0		
Kappa Sigma Scholarship	1	7,250	0		
SU Scholarship	19	107,691	0		
SU Scholarship (Need-based)	485	3,965,914	0		
Upward Bound Scholarship	6	148,401	0		
TUMCA Scholarship	2	23,797	0		
Cain Scholarship	8	31,643	0		
Feagin Scholarship	1	16,900	0		
Martin Esteban Aleman Scholarship	1	6,000	0		
Rockwell Scholarship	30	123,162	0		
Tuition Waiver	2	49,605	0		
National Hispanic Scholar Recognition Award	8	15,000	0		
Ruter Scholar Award	145	802,720	0		
Mood Scholar Award	498	5,232,247	0		
Cody Scholar Award	183	2,883,411	0		
President's Achievement Scholarship	43	183,000	0		
National Hispanic Institute	12	22,000	0		
National Merit Commended	30	28,500	0		
AP/IB Recognition Award	268	408,100	0		
John N Score Scholarship	1	36,400	0		
SU Excellence Scholarship	8	15,750	0		
Wilson Scholarship	1	30,220	0		
Brackenridge Scholarship	10	13,000	0		
SU Grant (Need-based)	1	15,110	0		
Other Scholarships < \$5,000	39	52,418	0		

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I

Questions Regarding Compensation

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

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Jack B Schrum	(i)	344,824	0	45,482	24,500	172,752	587,558	0
	(ii)	0	0	0	0	0	0	0
Richard L Anderson	(i)	217,656	0	13,496	22,036	12,981	266,169	0
	(ii)	0	0	0	0	0	0	0
James W Hunt	(i)	215,052	0	10,333	21,594	29,781	276,760	0
	(ii)	0	0	0	0	0	0	0
C Richard McKelvey	(i)	220,338	0	11,401	22,052	12,356	266,147	0
	(ii)	0	0	0	0	0	0	0
Gerald D Brody	(i)	148,591	0	1,747	16,400	25,376	192,114	0
	(ii)	0	0	0	0	0	0	0
W Joseph King	(i)	162,597	0	960	14,583	7,702	185,842	0
	(ii)	0	0	0	0	0	0	0
Thomas J Oliver	(i)	139,476	0	1,440	14,494	11,505	166,915	0
	(ii)	0	0	0	0	0	0	0
Paul J Gaffney	(i)	142,194	0	1,228	14,351	7,485	165,258	0
	(ii)	0	0	0	0	0	0	0
J Michael Leese	(i)	133,686	0	3,115	13,777	10,257	160,835	0
	(ii)	0	0	0	0	0	0	0
Andrew J Senchack	(i)	132,238	0	2,913	13,902	12,956	162,009	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	TRAVEL FOR COMPANIONS - On occasion the President's wife attends business meeting in conjunction with the President in representing the University. All University-funded travel-related expenses for the President's wife are treated as taxable compensation and reported on IRS Form W-2. RESIDENCE & PERSONAL SERVICES - The University requires the President to reside in the Turner Fleming House, located on campus, for the convenience of the University, as part of his employment contract with the University. The Turner Fleming House is used by the President for personal residence, hosting various meetings and business-related social events and other University functions. The University provides housekeeping, grounds keeping and maintenance service consistent with other University buildings. The valuation for personal usage of the Turner Fleming House, as reported in Part II, includes the estimated fair market rental value, utilities, housekeeping and grounds keeping services. HEALTH OR SOCIAL CLUB DUES - The University provides country club memberships and other social club memberships for certain key employees of the University. These memberships are used primarily for hosting guests during fund-raising meetings and other business-related meetings. The University includes the cost of these memberships as taxable compensation on the employee's IRS Form W-2. TAX GROSS-UP PAYMENTS - The University reimburses certain officers and key employees for income tax obligations related to university-reimburses travel for companions, social and club dues, personal use of University automobile and University-funded home internet service.
SchJ_P01_S00_L03	Schedule J, Part I, Line 3	The Board of Trustees Compensation Committee is responsible for setting compensation for the Senior Staff of the University. Senior Staff includes the President and all vice president-level staff. Additionally, each year any employees listed in IRS Form 990 Part VII, officer, key employee and highly paid employee, not already within the scope of the Compensation Committee, are added to the Committee's scope of oversight. The Compensation Committee includes only independent Board of Trustees members as voting members, plus the Associate Vice President for Human Resources, as a non-voting ex officio member. The Committee compiles industry-wide salary surveys, benchmark institutional data from peer institutions, and other external, objective data, to determine the appropriateness of compensation for employees under its review. The Associate Vice President for Human Resources is responsible for compiling a complete list of all compensation, taxable and non-taxable fringe benefits, and any other relevant data for the Committee. The Compensation Committee reports on the salary administration process to the Board of Trustees on an annual basis for approval by the Board. Full disclosure of compensation is reported on Form 990 for full Board of Trustee review.

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I

Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
							Yes	No	Yes	No
A	Crawford Education Facilities Corporation	72-1536594	225098BF8	07-13-2004	31,302,757	Refund bonds issued 10/31/84 & 5/11/94 & Construction		X		X
B	Riesel Education Facilities Corporation	20-5312407	000000000	08-11-2006	5,000,000	Construct O n-Campus Apartments		X		X

Part II

Proceeds

1	Total proceeds of issue	A		B		C		D		E	
		31,409,118		5,134,449							
2	Gross proceeds in reserve funds	0		0							
3	Proceeds in refunding or defeasance escrows	0		0							
4	Other unspent proceeds	0		0							
5	Issuance costs from proceeds	384,938		53,150							
6	Working capital expenditures from proceeds	0		0							
7	Capital expenditures from proceeds	2,502,644		5,081,299							
8	Year of substantial completion	2008		2008							
9	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		X			X						
10	Were the bonds issued as part of an advance refunding issue?		X		X						
11	Has the final allocation of proceeds been made?	X		X							
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

Part III

Private Business Use

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X						
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X						

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X		X						
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X						
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X		X						
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %							
6	Total of lines 4 and 5	0 %		0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X							

Part IV

Arbitrage

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X						
2	Is the bond issue a variable rate issue?	X			X						
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X		X						
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?		X		X						
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		X		X						
6	Did the bond issue qualify for an exception to rebate?		X		X						

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization SOUTHWESTERN UNIVERSITY	Employer identification number 74-1233796
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
James M Leese Computer Loan		X	2,000	300		No		No	Yes	
Total ► \$ 300										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance
2 People	Tuition Exchange	49,700
2 People	Tuition Remission	15,168
2 People	Merit Scholarships	13,608

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Lisa Anderson	Spouse of Officer	36,659	Employment		No

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		27	Other
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	19	1,841,343	AVG HI/LOW MV
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				
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 ► (_____) Equipment/Instrument)	X	2	2	Other
26 Other ► (Misc _____)	X	16	16	Other
27 Other ► (_____)				
28 Other ► (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

290

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanat ion
SchM_P01_S00_L32b	Schedule M, Part I, Line 32b	Regions Bank is the custodial bank of Southwestern University Gifts of securities are transferred by the donor to various brokers hired by the University The brokers then contact the Controller at Southwestern University to inform her of the gift receipt Southwestern then instructs the brokers to sell the securities at current market value The proceeds from the sale are transferred to the University's operating, restricted or endowment accounts, for use in accordance with the donor's restriction, if any

Additional Data

Software ID:

Software Version:

EIN: 74-1233796

Name: SOUTHWESTERN UNIVERSITY

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493129005291	
SCHEDULE O (Form 990)	Supplemental Information to Form 990				OMB No 1545-0047
					2009
	Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ▶ Attach to Form 990.				
Name of the organization SOUTHWESTERN UNIVERSITY				Employer identification number 74-1233796	

Identifier	Return Reference	Explanation
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	Per the Board approved resolution, the Audit Committee prepares an annual time line for the preparation, review & filing of Form 990 The University's Administration prepares the University's Form 990 The Administration and other staff complete sub-certification statements addressing their individual areas of responsibilities The University's external counsel review s the Form 990 The completed and review ed return, along w ith sub-certification statements, is review ed by the chief financial officer (Vice President for Fiscal Affairs) The Vice President for Fiscal Affairs presents the completed return to the Board of Trustees Audit Committee, w hich has oversight responsibility for the Form 990 After review by the Audit Committee, a copy of the return is made available to the full Board of Trustees for their review before filing Board Members review the return and return a confirmation of their review Any comments are submitted in w riting to the Audit Committee The return is then filed electronically with the IRS The University's external auditing firm review s the prior year return for completeness and accuracy relevant to the scope and due diligence requirements of the auditing process, and reports any significant or material w eaknesses noted to the Board of Trustee Audit Commttee The Audit Committee has oversight responsibility and authority to ensure noted weaknesses or errors are corrected The Audit Committee reports regularly to the full Board of Trustees

Identifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	The Board of Trustees has delegated ongoing oversight of the University's Conflict of Interest Policy to the Board of Trustees Audit Committee as a permanent duty of the Audit Committee's Charter The Audit Committee is responsible for proposing changes in the University Conflict of Interest Policy to the full Board of Trustees, and for monitoring compliance w ith the policy approved by the Board of Trustees All members of the Board of Trustees, Board committee members, Officers, key employees, members of the Financial Aid office, and all professional financial accounting staff annually complete and submit a questionnaire on possible conflicts of interest and independence Employees of the University other than the President submit conflict of interest information to the President The President determines if an actual conflict of interest exists and determines the appropriate mtigating action The President reports on an annual basis, to the Audit Committee, all identified possible conflicts of interest and mtigating actions taken The President and the members of the Board of Trustees submit conflict of interest and independence questionnaires to the Board of Trustees Audit Committee The Audit Committee is responsible for review ing the situation and recommending to the Board Chairman appropriate mtigating actions The University has a w histle-blow er policy and process under the oversight and authority of the Board of Trustees Audit Committee

Identifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The Board of Trustees Compensation Committee is responsible for setting compensation for the Senior Staff of the University Senior Staff includes the President and all vice president-level staff Additionally, each year any employees listed in IRS Form 990 Part VII, officer, key employee and highly paid employee, not already w ithin the scope of the Compensation Committee, are added to the Committee's scope of oversight The Compensation Committee includes only independent Board of Trustees members as voting members, plus the Associate Vice President for Human Resources, as a non-voting ex officio member The Committee compiles industry-w ide salary surveys, benchmark institutional data from peer institutions, and other external, objective data, to determine the appropriateness of compensation for employees under its review The Associate Vice President for Human Resources is responsible for compiling a complete list of all compensation, taxable and non-taxable fringe benefits, and any other relevant data for the Committee The Compensation Committee reports on the salary administration process to the Board of Trustees on an annual basis for approval by the Board Full disclosure of compensation is reported on Form 990 for full Board of Trustee review

Identifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	The University publishes its Articles of Incorporation, Bylaw s, Conflict of Interest Policy, Independence Policy, and the most current three years of audited financial statements, and IRS Form 990 and 990-T on the University w ebsite The information may be accessed at http //w w w southwestern edu/businessoffice/budget php

Identifier	Return Reference	Explanation
SchE_P00_S00_L06	Schedule E, Line 6	The University receives financial aid from both the federal government and the State of Texas, w hich is awarded to students using the Department of Education methodology The main federal financial assistance programs for students include Federal Family Education Loans, Federal Perkins Loans, Federal Pell Grants, Federal Work-Study, and Federal SEOG The main state financial assistance grant is the Tution Equalization Grant The University also receives federal financial assistance for academic grants and research

Identifier	Return Reference	Explanation
SchK_P02_S00_L03	Schedule K, Part II, Line 3	For the Craw ford Education Facilities Corporation bond issue, the proceeds in refunding is zero at the end of this reporting period How ever, in 2004, \$28,521,536 of the bond proceeds w ere used to refund the Series 1984 & Series 1994 Bonds

Identifier	Return Reference	Explanation
SchR_P05_S00_L02	Schedule R, Part V, Line 2	Amount of \$759,694, for 1n -sharing of paid employees, represents total gross w ages for fiscal year 2010 for the three employees of Southw estern University that are shared w ith Southw estern Foundation Benefits w ere not included, since Southw estern Foundation does not have any employee benefits

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SOUTHWESTERN UNIVERSITY

Employer identification number
74-1233796

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Southwestern Foundation 1001 East University Avenue Georgetown, TX 78626 74-2736740	Maintain property for SU benefit & support	TX	501(c)(3)	Type I - Line 11a	Southwestern University

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

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

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

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 (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

No

Yes

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) Southwestern Foundation	n	759,694
(1) See Additional Data Table		
(2)		
(3)		
(4)		
(5)		
(6)		

Schedule R (Form 990) 2009

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.

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 74-1233796
Name: SOUTHWESTERN UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code) (Expenses \$	7,710,478	including grants of \$ 0) (Revenue \$ 8,910,496)
Other Program Services include auxiliary enterprises, including student residential center operations and food service operations. Approximately 85% of the student body lives on-campus in residential centers. Residential centers include living/learning centers which integrate classroom and other experiences into the residential environment. Food service is provided primarily for residential and non-residential student usage, faculty, staff and guests of the University. Total auxiliary enterprise income and expenses are \$8,910,496 and \$8,292,462 respectively. Auxiliary enterprise expenses include depreciation, interest and physical plant expense allocations of \$1,708,072, \$196,984 and \$1,983,917, respectively. Other Program Services include various student, faculty and staff campus services, such as the post office, information technology help desk, network support, and other similar services, as well as various other essential program services in support of the primary academic mission of the University.			

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Martin Aleman Jr Trustee	1 4	X						0	0	0
L James Bankston Trustee	1 4	X						0	0	0
Lisa Barrentine Trustee	1 4	X						0	0	0
Douglas M Benold Trustee	1 4	X						0	0	0
W Earl Bledsoe Trustee	1 4	X						0	0	0
Ann T Cochran Trustee	1 4	X						0	0	0
Bobby Smith Cohn Trustee	1 4	X						0	0	0
W Mark Craig Trustee	1 4	X						0	0	0
John S Curry Trustee	1 4	X						0	0	0
James E Dorff Trustee	1 4	X						0	0	0
Robert W Dupuy Trustee	1 4	X						0	0	0
Thomas A Forbes Trustee	1 4	X						0	0	0
James W Foster Trustee	1 4	X						2,000	0	0
Jack Garey Trustee	1 6	X						0	0	0
Roberto L Gomez Trustee	1 4	X						0	0	0
Robert H Graham Trustee	1 6	X						0	0	0
Kay Granger Trustee	1 4	X						0	0	0
Larry J Haynes Trustee & Co-Vice Chair	1 4	X		X				0	0	0
Ronald D Henderson Trustee	1 4	X						0	0	0
C Preston Hollis Trustee	1 4	X						0	0	0
Janice Riggle Huie Trustee	1 4	X						0	0	0
Robert W Karr Trustee	1 4	X						0	0	0
Bart C Koontz Trustee	1 4	X						0	0	0
R Griffin Lord Trustee & Secretary/Treasurer	1 4	X		X				0	0	0
J Michael Lowry Trustee	1 4	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Helen E Black McAllister Trustee & Co-Vice Chair	1 4	X		X				0	0	0
Red McCombs Trustee	1 4	X						0	0	0
Michael McKee Trustee	1 4	X						0	0	0
J Eric McKinney Trustee	1 4	X						9,342	0	3,320
David J McNitzky Trustee	1 4	X						0	0	0
Laura A Merrill Trustee	1 4	X						0	0	0
Charles R Millikan Trustee	1 4	X						0	0	0
Merriman Morton Trustee & Chair	1 9	X		X				0	0	0
Barbara Prats Neely Trustee	1 4	X						0	0	0
Ernesto Nieto Trustee	1 4	X						0	0	0
Steven A Raben Trustee	1 4	X						0	0	0
Robert T Rork Trustee	1 6	X						0	0	0
Robert C Scott Trustee	1 4	X						0	0	0
Pete Sessions Trustee	1 4	X						0	0	0
Namiqa Shipman Trustee	1 4	X						0	0	0
Blake Stanford Trustee	1 4	X						0	0	0
Stephen G Tipps Trustee	1 4	X						0	0	0
Donald W Underwood Trustee	1 4	X						0	0	0
James W Walzel Trustee	1 6	X						0	0	0
D Max Whitfield Trustee	1 4	X						0	0	0
Doak M Worley IV Trustee	1 4	X						0	0	0
Robert D Wunsch Trustee	1 4	X						0	0	0
Jack B Schrum Trustee & President	40	X		X				390,306	0	187,187
Richard L Anderson VP of Fiscal Affairs	40			X				231,152	0	34,612
C Richard McKelvey VP Institutional Advancement	40				X			231,739	0	33,877

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
James W Hunt Provost/Dean of Faculty	40				X			225,385	0	50,844
Gerald D Brody VP Student Life	40				X			150,338	0	41,245
W Joseph King Exe Dir of NITLE & VP for Innovation	40					X		163,557	0	22,150
Thomas J Oliver VP Enrollment Services	40					X		140,916	0	25,594
Paul J Gaffney Dean of Fine Arts	40					X		143,422	0	21,305
J Michael Leese Assoc VP & Dean of Students	40					X		136,800	0	23,504
Andrew J Senchack Professor of Business	40					X		135,151	0	26,327

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Post Retirement Benefits	1,863,523	0	1,863,523	0
Utilities - Electric	1,059,945	0	1,059,945	0
Tax Allocation for Operations & Maintenance	1,430,561	1,430,561	0	0
Library	601,221	601,221	0	0
Equipment Rental & Maintenance	411,928	411,928	0	0