



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Doing Business As

KU ENDOWMENT

Number and street (or P O box if mail is not delivered to street address)

PO BOX 928

Room/suite

City or town, state or country, and ZIP + 4

LAWRENCE, KS 660440928

F Name and address of principal officer

DALE SEUFERLING

PO BOX 928

LAWRENCE,KS 660440928

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW KUENDOWMENT ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1891

M State of legal domicile

KS

Part I	Summary		
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>UNIVERSITY SUPPORT</div></div>		
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>		
	<div><div><div>3</div><div>Number of voting members of the governing body (Part VI, line 1a)</div><div>3</div><div>10</div></div></div>		
	<div><div><div>4</div><div>Number of independent voting members of the governing body (Part VI, line 1b)</div><div>4</div><div>8</div></div></div>		
	<div><div><div>5</div><div>Total number of individuals employed in calendar year 2011 (Part V, line 2a)</div><div>5</div><div>300</div></div></div>		
	<div><div><div>6</div><div>Total number of volunteers (estimate if necessary)</div><div>6</div><div>71</div></div></div>		
	<div><div><div>7a</div><div>Total unrelated business revenue from Part VIII, column (C), line 12</div><div>7a</div><div>-136,436</div></div><div><div><div>7b</div><div>Net unrelated business taxable income from Form 990-T, line 34</div><div>7b</div><div>-164,977</div></div></div></div>		
Revenue	<div><div><div>8</div><div>Contributions and grants (Part VIII, line 1h)</div><div>109,911,593</div><div>118,770,141</div></div><div><div><div>9</div><div>Program service revenue (Part VIII, line 2g)</div><div>1,793,498</div><div>2,085,529</div></div><div><div><div>10</div><div>Investment income (Part VIII, column (A), lines 3, 4, and 7 d)</div><div>34,269,420</div><div>5,665,879</div></div><div><div><div>11</div><div>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</div><div>13,455,116</div><div>8,970,531</div></div><div><div><div>12</div><div>Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</div><div>159,429,627</div><div>135,492,080</div></div></div></div></div></div></div>		
	Expenses	<div><div><div>13</div><div>Grants and similar amounts paid (Part IX, column (A), lines 1–3)</div><div>28,065,778</div><div>30,776,549</div></div><div><div><div>14</div><div>Benefits paid to or for members (Part IX, column (A), line 4)</div><div>0</div><div>0</div></div><div><div><div>15</div><div>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</div><div>42,821,100</div><div>43,551,815</div></div><div><div><div>16a</div><div>Professional fundraising fees (Part IX, column (A), line 11e)</div><div>193,375</div><div>113,794</div></div><div><div><div>b</div><div>Total fundraising expenses (Part IX, column (D), line 25)</div><div>11,340,763</div><div></div></div><div><div><div>17</div><div>Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</div><div>62,055,389</div><div>68,463,944</div></div><div><div><div>18</div><div>Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</div><div>133,135,642</div><div>142,906,102</div></div><div><div><div>19</div><div>Revenue less expenses Subtract line 18 from line 12</div><div>26,293,985</div><div>-7,414,022</div></div></div></div></div></div></div></div></div></div>	
		Net Assets or Fund Balances	<div><div><div><div>20</div><div>Total assets (Part X, line 16)</div><div>1,478,771,447</div><div>1,443,442,782</div></div><div><div><div>21</div><div>Total liabilities (Part X, line 26)</div><div>102,179,307</div><div>106,063,300</div></div><div><div><div>22</div><div>Net assets or fund balances Subtract line 21 from line 20</div><div>1,376,592,140</div><div>1,337,379,482</div></div></div></div></div></div>

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

JEFFREY W DAVIS TREASURER

2013-02-14

Date

Preparer's signature

ERNST & YOUNG US LLP

111 MONUMENT CIRCLE SUITE 2600

INDIANAPOLIS, IN 46204

Preparer's taxpayer identification number (see instructions)

P00032493

EIN

34-6565596

Phone no

(317) 681-7000

Paid Preparer's Use Only

Preparer's signature

Date

Check if self-employed

Preparer's taxpayer identification number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

ERNST & YOUNG US LLP

111 MONUMENT CIRCLE SUITE 2600

INDIANAPOLIS, IN 46204

EIN

34-6565596

Phone no

(317) 681-7000

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization's mission

KU ENDOWMENT PARTNERS WITH DONORS IN PROVIDING PHILANTHROPIC SUPPORT TO BUILD A GREATER UNIVERSITY OF KANSAS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

checked

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

checked

No

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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code) (Expenses \$ 30,253,291 including grants of \$ 30,253,291) (Revenue \$)

STUDENT SUPPORT--VIRTUALLY ALL SCHOLARSHIPS, AWARDS AND FELLOWSHIPS AWARDED BY KU COME FROM PRIVATE CONTRIBUTIONS TO KU ENDOWMENT THIS YEAR, ABOUT 6,900 STUDENTS RECEIVED FINANCIAL ASSISTANCE FROM KU ENDOWMENT FUNDS

4b

(Code) (Expenses \$ 35,314,403 including grants of \$ 523,258) (Revenue \$)

FACULTY SUPPORT INCREASED BY 4 PERCENT OVER THE PREVIOUS YEAR. IN ADDITION TO FACULTY DEVELOPMENT AND AWARDS, SUPPORT BY DONORS THROUGH KU ENDOWMENT PROVIDED MORE THAN 88 PERCENT OF TOTAL FUNDING FOR KU'S DISTINGUISHED PROFESSORS. THIS SUPPORT IS INVALUABLE IN CREATING THE VIBRANT TEACHING AND RESEARCH ENVIRONMENT THAT ONE EXPECTS AT AN INTERNATIONAL RESEARCH UNIVERSITY.

4c

(Code) (Expenses \$ 40,029,684 including grants of \$) (Revenue \$ 2,943,901)

SUPPORT FROM PRIVATE DONORS STRENGTHENS ACADEMIC PROGRAMS AND BRINGS RENOWNED SCHOLARS, ARTISTS AND PERFORMERS TO KU. IT ALSO EXPANDS THE HOLDINGS OF KU'S LIBRARIES AND MUSEUMS.

(Code) (Expenses \$ 14,660,550 including grants of \$) (Revenue \$ 499,544)

FACILITIES SUPPORT--CONSTRUCTION, EQUIPMENT, SUPPLIES AND FURNISHINGS FUNDED BY PRIVATE GIVING. THIS AMOUNT FLUCTUATES FROM YEAR TO YEAR, DEPENDING ON THE TIMELINE OF CONSTRUCTION PROJECTS. MORE THAN TWO-THIRDS OF KANSAS UNIVERSITY BUILDINGS AND ABOUT 85% OF THE LAND AVAILABLE FOR CAMPUS EXPANSION WERE MADE POSSIBLE BY PRIVATE GIFTS.

4d

Other program services (Describe in Schedule O)

(Expenses \$ 14,660,550 including grants of \$) (Revenue \$ 499,544)

4e

Total program service expenses

\$ 120,257,928

Form 990 (2011)

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.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
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.		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	Yes	
9	Did the organization report an amount in Part X, line 21, 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.	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	Yes	
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.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	1,066			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	300			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a				No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes			
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	1			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
15c	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK , CA , KY , MD , MA , MI , MN , NH , NJ , OH , MO , SC , UT , WA , WV , OK
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	JEFFREY W DAVIS TREASURER 1891 CONSTANT AVENUE LAWRENCE, KS 660473743 (785) 832-7400

Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DALE W SEUFERLING PRESIDENT	40 00	X		X				322,108	0	58,883
(2) D JEROME DAVIES SECRETARY/SRVP DEVELOPMENT	40 00	X		X				200,896	0	43,997
(3) JEFFREY W DAVIS TREASURER/SR VP FINANCE	40 00	X		X				189,273	0	87,415
(4) WILLIAM R DOCKING EXEC COMMITTEE-VOLUNTEER	4 00	X						0	0	0
(5) RA EDWARDS EXEC COMMITTEE-VOLUNTEER	3 00	X						0	0	0
(6) CHARLES E HEATH EXEC COMMITTEE-VOLUNTEER	4 00	X						0	0	0
(7) A DRUE JENNINGS CHAIR, EXEC COMMITTEE-VOLU	4 00	X						0	0	0
(8) MD MICHAELIS EXEC COMMITTEE-VOLUNTEER	4 00	X						0	0	0
(9) LINDA ELLIS SIMS EXEC COMMITTEE-VOLUNTEER	4 00	X						0	0	0
(10) TODD L SUTHERLAND EXEC COMMITTEE-VOLUNTEER	3 00	X						0	0	0
(11) DEANELL REECE TACHA VICE CHAIR, EXEC COMMITTEE	3 00	X						0	0	0
(12) ROBERT D TAYLOR EXEC COMMITTEE-VOLUNTEER	4 00	X						0	0	0
(13) KURT D WATSON EXEC COMMITTEE-VOLUNTEER	4 00	X						0	0	0
(14) STEPHANIE GRINAGE VP MEDICAL DEVELOPMENT	40 00				X			164,161	0	31,934
(15) JAMES MECHLER VP DEVELOPMENT	40 00					X		146,594	0	34,117
(16) WILLIAM GREEN SVP INFORMATION SYSTEMS	40 00					X		147,219	0	43,388
(17) CLARK CROPP SVP ADMINISTRATION	40 00					X		145,928	0	51,566

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	1,572,481	0	396,769

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 15

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
MAR LAN CONSTRUCTION LLC 1008 NEW HAMPSHIRE STE 200 LAWRENCE, KS 66044	CONSTRUCTION	1,885,579
CAMBRIDGE ASSOCIATES LLC 125 HIGH STREET BOSTON, MA 02110	INVESTMENT CONSULTING	1,058,190
ARR ROOFING LLC 1060 W SANTA FE OLATHE, KS 66061	CONSTRUCTION	621,257
COMMERCIAL INSTALLATION & CONSTRUCTION C 14720 W 105TH ST LENEXA, KS 66215	CONSTRUCTION	577,076
ASTRO TURF LLC 2680 ABUTMENT RD DALTON, GA 30720	CONSTRUCTION	525,252

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►19

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	15,575,783			
	d	Related organizations	1d	219,285			
	e	Government grants (contributions)	1e	16,978,724			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	85,996,349			
	g	Noncash contributions included in lines 1a-1f \$ 2,938,092					
	h	Total. Add lines 1a-1f		118,770,141			
Program Service Revenue			Business Code				
	2a	LOAN INTEREST	522200	1,585,985	1,585,985		
	b	BUILDING LEASE	531120	306,350	306,350		
	c	APARTMENT RENTALS	531110	175,609	175,609		
	d	OTHER REAL ESTATE	531390	17,585	17,585		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		2,085,529			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		19,727,421	1,357,916	-179,104	18,548,609
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties		1,733,125			1,733,125
	6a	(i) Real					
		(ii) Personal					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	(i) Securities					
		(ii) Other					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		-14,061,542			-14,061,542
	8a	Gross income from fundraising events (not including \$ 15,575,783 of contributions reported on line 1c) See Part IV, line 18					
		a	4,193,499				
		b	835,532				
	c	Net income or (loss) from fundraising events . .		3,357,967			3,357,967
	9a	Gross income from gaming activities See Part IV, line 19					
a							
b							
c	Net income or (loss) from gaming activities . .						
10a	Gross sales of inventory, less returns and allowances						
	a						
	b						
c	Net income or (loss) from sales of inventory . .						
Miscellaneous Revenue		Business Code					
11a	OTHER RECEIPTS	900099	2,671,166			2,671,166	
b	AGRICULTURE	110000	1,165,605			1,165,605	
c	OIL & GAS EXTRACTION	211110	42,668		42,668		
d	All other revenue						
e	Total. Add lines 11a-11d		3,879,439				
12	Total revenue. See Instructions		135,492,080	3,443,445	-136,436	13,414,930	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	30,776,549	30,776,549		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,142,133		690,159	451,974
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	39,730,332	30,312,095	3,352,411	6,065,826
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,132,227		376,662	755,565
9	Other employee benefits	830,268		336,798	493,470
10	Payroll taxes	716,855		302,363	414,492
11	Fees for services (non-employees)				
a	Management				
b	Legal	208,795	75,251	113,789	19,755
c	Accounting	159,112		159,112	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	113,794			113,794
f	Investment management fees	5,422,311	620,451	4,801,860	
g	Other	5,616,558	4,479,051	64,030	1,073,477
12	Advertising and promotion	1,269,316	605,810	63,177	600,329
13	Office expenses	3,515,336	2,764,142	208,876	542,318
14	Information technology	1,100,094	1,017,607	82,487	
15	Royalties	1,262,833	1,111,936	128,155	22,742
16	Occupancy	282,340	138,384	116,525	27,431
17	Travel	3,511,909	2,831,345	77,455	603,109
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	454,779	339,808	44,932	70,039
20	Interest	85,672	85,672		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,381,616	1,142,045	179,314	60,257
23	Insurance	210,505	98,827	104,131	7,547
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	UNRELATED BUSINESS TAX	-767		-767	
b	TRANSFERS TO UNIVERSITY	25,854,028	25,854,028		
c	CONSTRUCTION	6,930,569	6,930,569		
d	EQUIPMENT & FURNISHINGS	5,287,318	5,275,319	6,699	5,300
e					
f	All other expenses	5,911,620	5,799,039	99,243	13,338
25	Total functional expenses. Add lines 1 through 24f	142,906,102	120,257,928	11,307,411	11,340,763
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			4,915,010	1	6,807,684
	2	Savings and temporary cash investments			53,708,184	2	114,126,340
	3	Pledges and grants receivable, net			59,099,049	3	65,137,924
	4	Accounts receivable, net			4,678,795	4	12,072,273
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	46,533,288			
	b	Less: accumulated depreciation	10b	7,779,617	36,625,990	10c	38,753,671
	11	Investments—publicly traded securities			881,861,535	11	719,049,232
	12	Investments—other securities. See Part IV, line 11			372,309,259	12	425,620,263
	13	Investments—program-related. See Part IV, line 11			22,085,419	13	21,268,537
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			43,488,206	15	40,606,858
	16	Total assets. Add lines 1 through 15 (must equal line 34)			1,478,771,447	16	1,443,442,782
Liabilities	17	Accounts payable and accrued expenses			32,197,456	17	44,440,486
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			69,981,851	21	61,622,814
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			102,179,307	26	106,063,300
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			165,500,927	27	154,810,822
	28	Temporarily restricted net assets			807,991,773	28	775,717,672
	29	Permanently restricted net assets			403,099,440	29	406,850,988
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			1,376,592,140	33	1,337,379,482
	34	Total liabilities and net assets/fund balances			1,478,771,447	34	1,443,442,782

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	135,492,080
2	Total expenses (must equal Part IX, column (A), line 25)	2	142,906,102
3	Revenue less expenses Subtract line 2 from line 1	3	-7,414,022
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,376,592,140
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-31,798,636
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,337,379,482

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other 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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	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?		No
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 in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 48-0547734
Name: THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services
(Code) (Expenses \$ 14,660,550 including grants of \$) (Revenue \$ 499,544) FACILITIES SUPPORT--CONSTRUCTION, EQUIPMENT, SUPPLIES AND FURNISHINGS FUNDED BY PRIVATE GIVING THIS AMOUNT FLUCTUATES FROM YEAR TO YEAR, DEPENDING ON THE TIMELINE OF CONSTRUCTION PROJECTS MORE THAN TWO- THIRDS OF KANSAS UNIVERSITY BUILDINGS AND ABOUT 85% OF THE LAND AVAILABLE FOR CAMPUS EXPANSION WERE MADE POSSIBLE BY PRIVATE GIFTS

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION	Employer identification number 48-0547734
---	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☒

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	87,578,360	102,470,771	107,274,043	109,911,593	118,770,141	526,004,908
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	87,578,360	102,470,771	107,274,043	109,911,593	118,770,141	526,004,908
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						10,188,766
6 Public Support. Subtract line 5 from line 4						515,816,142

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	87,578,360	102,470,771	107,274,043	109,911,593	118,770,141	526,004,908
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	55,295,296	41,192,246	28,896,790	32,853,347	28,312,004	186,549,683
9 Net income from unrelated business activities, whether or not the business is regularly carried on	92,132	33,895	-11,291	-10,648	-164,977	-60,889
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						712,493,702
12 Gross receipts from related activities, etc (See instructions)					12	36,898,335
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	72 400 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	70 140 %
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 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 IV.)						
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, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION	Employer identification number 48-0547734
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1

Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2

Political expenditures

▶ \$

3

Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1

Enter the amount of any excise tax incurred by the organization under section 4955

▶ \$

2

Enter the amount of any excise tax incurred by organization managers under section 4955

▶ \$

3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes ☐ No

4a

Was a correction made?

☐ Yes ☐ No

b

If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1

Enter the amount directly expended by the filing organization for section 527 exempt function activities

▶ \$

2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities

▶ \$

3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

▶ \$

4

Did the filing organization file Form 1120-POL for this year?

☐ Yes ☐ No

5

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		0													
c Total lobbying expenditures (add lines 1a and 1b)		0													
d Other exempt purpose expenditures		120,257,928													
e Total exempt purpose expenditures (add lines 1c and 1d)		120,257,928													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	52,000	0	0	0	52,000
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

Part II-B

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

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year		
b	Carryover from last year		
c	Total		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION	Employer identification number 48-0547734
---	--

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>Yes</div> <div>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>Yes</div> <div>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)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Year
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?

Yes

No

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)?

Yes

No

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	▶ \$	686,280

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	▶ \$	
b	Assets included in Form 990, Part X	▶ \$	

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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

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	822,485,264	683,222,760	573,344,085	753,554,225
b	Contributions	31,575,638	28,231,498	23,213,567	21,731,857
c	Investment earnings or losses	-31,381,920	134,790,574	117,037,613	-167,933,094
d	Grants or scholarships	11,694,829	10,034,480	10,574,040	20,809,436
e	Other expenditures for facilities and programs	22,659,829	13,725,088	19,798,465	13,199,467
f	Administrative expenses				
g	End of year balance	788,414,325	822,485,264	683,222,760	573,344,085

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 0 360 %

b

Permanent endowment ▶ 53 730 %

c

Term endowment ▶ 45 910 %

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)

☐ Yes☐ No

b

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

3b

☐ Yes☐ No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	12,752,228	8,647,362		21,399,590
b Buildings		22,064,431	6,019,582	16,044,849
c Leasehold improvements				
d Equipment		3,047,039	1,760,035	1,287,004
e Other	22,228			22,228
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				38,753,671

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1135,492,080
2	Total expenses (Form 990, Part IX, column (A), line 25)	2142,906,102
3	Excess or (deficit) for the year Subtract line 2 from line 1	3-7,414,022
4	Net unrealized gains (losses) on investments	4-25,979,980
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8-5,818,656
9	Total adjustments (net) Add lines 4 - 8	9-31,798,636
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-39,212,658

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1104,361,679
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments	2a-25,979,980
b	Donated services and use of facilities	2b
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV)	2d-392,839
e	Add lines 2a through 2d	2e-26,372,819
3	Subtract line 2e from line 1	3130,734,498
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
b	Other (Describe in Part XIV)	4b4,757,582
c	Add lines 4a and 4b	4c4,757,582
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5135,492,080

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	1143,574,335
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities	2a
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIV)	2d5,425,815
e	Add lines 2a through 2d	2e5,425,815
3	Subtract line 2e from line 1	3138,148,520
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
b	Other (Describe in Part XIV)	4b4,757,582
c	Add lines 4a and 4b	4c4,757,582
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5142,906,102

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
	PART III, LINE 4	OVER THE YEARS, DONORS HAVE GIVEN IN-KIND GIFTS OF ART AND LIBRARY COLLECTIONS, OR HAVE ESTABLISHED FUNDS FOR THE PURPOSE OF PURCHASING SUCH ITEMS FOR THE MUSEUMS, LIBRARIES AND TEACHING FACILITIES OF THE UNIVERSITY OF KANSAS. SUCH GIFTS ARE ADMINISTERED BY KU ENDOWMENT IN ACCORDANCE WITH ANY APPROPRIATE DONOR RESTRICTIONS THAT MAY BE PLACED UPON THE GIFT.
	PART IV, LINE 2B	KU ENDOWMENT HOLDS CERTAIN ENDOWMENT AND OTHER FUNDS ON BEHALF OF AFFILIATES OF THE UNIVERSITY AND OTHER THIRD PARTIES.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ENDOWMENT FUNDS CONSIST OF APPROXIMATELY 2,745 INDIVIDUAL FUND ACCOUNTS ESTABLISHED TO PROVIDE SUPPORT FOR A VARIETY OF UNIVERSITY PROGRAMS ACROSS GENERATIONS.
PART XI, LINE 8 - OTHER ADJUSTMENTS		AMORTIZATION OF PENSION ADJUSTMENTS -4,590,283 CHANGE IN NET INTEREST IN KU ENDOWMENT CHARITABLE GIFT FUND -68,214 CHANGE IN VALUE OF LIFE INCOME GIFTS -733,202 CHANGE IN VALUE OF LIFE INSURANCE -426,957 TOTAL TO SCHEDULE D, PART XI, LINE 8 -5,818,656
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF LIFE INCOME GIFTS -733,201 CHANGE IN NET INTEREST IN KU ENDOWMENT CHARITABLE GIFT FUND -68,214 FUNDRAISING EVENT DIRECT EXPENSES (SEE PART VIII, LINE 8B) 835,532 CHANGE IN VALUE OF LIFE INSURANCE CASH VALUE -426,956
PART XII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT INCOME (REDUCED BY INVESTMENT EXPENSES) 4,757,582
PART XIII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EVENT DIRECT EXPENSES (SEE PART VIII, LINE 8B) 835,532 AMORTIZATION OF PENSION ADJUSTMENTS 4,590,283
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT EXPENSES 4,757,582

OMB No 1545-0047

Open to Public Inspection

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

Name of the organization THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION	Employer identification number 48-0547734
---	---

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 grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
CENTRAL AMERICA AND THE CARIBBEAN -	0	0	INVESTMENTS		168,913,000
EAST ASIA AND THE PACIFIC -	0	0	FUNDRAISING		2,400
EUROPE (INCLUDING ICELAND & GREENLAND) -	0	0	FUNDRAISING		3,900
NORTH AMERICA	0	0	FUNDRAISING		1,600
3a Sub-total	0	0			168,920,900
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			168,920,900

[illegible]

3 Enter total number of other organizations or entities ►

Part III

[illegible]

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 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐ Yes ☒ 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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes ☒ 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 ☐ 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 file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

Part V **Supplemental Information**

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

Identifier	Return Reference	Explanation
		SCHEDULE F, PART I, LINE 3 THE AMOUNT FOR "INVESTMENTS" REPRESENTS THE TOTAL BOOK VALUE OF ALL INVESTMENTS IN THE REGION AS OF JUNE 30, 2012 SUCH INVESTMENTS BY THE ORGANIZATION ARE PASSIVE AND DO NOT CONSTITUTE ANY ACTIVITY RELATED TO THE ORGANIZATION'S PROGRAM SERVICES INCOME FROM THESE HOLDINGS ARE REPORTED NET OF RELATED INVESTMENT EXPENSES, WHICH ARE DISCLOSED AS A NOTE TO THE AUDITED FINANCIAL STATEMENT

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

2011

Open to Public
Inspection

Name of the organization
THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Employer identification number
48-0547734

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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 services?

☒ 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 and address 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			
GRENZEBACH GLIER AND ASSOCIATES INC 401 N MICHIGAN AVE CHICAGO, IL 60611	CAMPAIGN PLANNING, FEASIBILITY ANALYSIS		No	0	113,794	-113,794
Total ▶					113,794	-113,794

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.

AK, AZ, AR, CA, CO, CT, HI, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NY, NC, OH, OK, OR, SC, VA, WA, WV, UT, KY

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
		20% OF RIGHT TO PURCHASE TICKETS (event type)	CANCER CENTER BENEFIT DINNER (event type)	17 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	17,188,034	1,208,381	1,372,867
	2	Less Charitable contributions	13,750,427	870,075	955,281
	3	Gross income (line 1 minus line 2)	3,437,607	338,306	417,586
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs	137,746	81,104	218,850
	7	Food and beverages	79,955	161,400	241,355
	8	Entertainment	165,000	24,779	189,779
	9	Other direct expenses	71,582	113,966	185,548
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d) ▶			

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			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<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 and 7 in column (d) ▶					

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? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide 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?

☐ Yes ☐ No

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

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

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

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

48-0547734

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?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

[illegible]

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

3 Enter total number of other organizations listed in the line 1 table **0**

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(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

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 MANY DISBURSEMENTS IN FURTHERANCE OF THE INSTITUTION'S EXEMPT PROGRAMS ARE MADE FOR STUDENT SCHOLARSHIPS OR FOR UNIVERSITY EMPLOYEE SALARIES AND SIMILAR EXPENSES WHICH ARE DISBURSED DIRECTLY TO THE STATE OF KANSAS, UNIVERSITY OF KANSAS, AND WHICH ARE INCURRED DIRECTLY IN THE ACTIVE CONDUCT OF ACTIVITIES CONSTITUTING THE EXEMPT PURPOSE OR FUNCTION FOR WHICH THE INSTITUTION IS ORGANIZED AND OPERATED OTHERWISE, DISBURSEMENTS IN FURTHERANCE OF THE INSTITUTION'S EXEMPT PROGRAMS ARE MADE IN ACCORDANCE WITH ACCOUNTABLE PLAN PROCEDURES AND ARE SUBJECT TO CONDITIONS ESTABLISHED BY THE INSTITUTION'S GOVERNING BOARD DESIGNED TO ENSURE THAT INDIVIDUALS AND ORGANIZATIONS RECEIVING DISBURSEMENTS FROM THE ORGANIZATION IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE ADEQUATELY INVESTIGATED TO ENSURE THAT THEY ARE QUALIFYING RECIPIENTS STUDENTS RECEIVING SCHOLARSHIPS AND FELLOWSHIPS ARE JUDGED WORTHY BY THE UNIVERSITY'S ASSESSMENT ON THE BASIS OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND SIMILAR STANDARDS, IN ACCORDANCE WITH APPLICABLE GIFT INSTRUMENTS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

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
THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Employer identification number
48-0547734

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 type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input 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"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</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	Yes
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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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				
(1) DALE W SEUFERLING	(i)	322,108	0	0	48,148	10,735	380,991	0
	(ii)	0	0	0	0	0	0	0
(2) D JEROME DAVIES	(i)	200,896	0	0	33,489	10,508	244,893	0
	(ii)	0	0	0	0	0	0	0
(3) JEFFREY W DAVIS	(i)	189,273	0	0	79,164	8,251	276,688	0
	(ii)	0	0	0	0	0	0	0
(4) STEPHANIE GRINAGE	(i)	164,161	0	0	26,706	5,228	196,095	0
	(ii)	0	0	0	0	0	0	0
(5) JAMES MECHLER	(i)	146,594	0	0	23,796	10,321	180,711	0
	(ii)	0	0	0	0	0	0	0
(6) WILLIAM GREEN	(i)	147,219	0	0	35,569	7,819	190,607	0
	(ii)	0	0	0	0	0	0	0
(7) CLARK CROPP	(i)	145,928	0	0	41,218	10,348	197,494	0
	(ii)	0	0	0	0	0	0	0
(8) MARK P WILSON	(i)	135,061	0	0	15,960	1,084	152,105	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	REGARDING TRAVEL FOR COMPANIONS, KU ENDOWMENT'S WRITTEN GUIDELINES ARE AS FOLLOWS "FOR SPOUSE EXPENSES TO BE REIMBURSABLE, THE EXPENSE MUST BE REQUIRED BY YOUR SUPERVISOR AND IT IS EXPECTED THAT THE EVENT IN WHICH YOUR SPOUSE IS INCLUDED WILL INCLUDE SPOUSES OF GUESTS, AND BOTH REQUIREMENTS SHOULD BE STATED ON THE REIMBURSEMENT REQUEST " IN KEEPING WITH THIS POLICY, TRAVEL EXPENSES WERE REIMBURSED, AND NOT TREATED AS COMPENSATION, FOR A SPOUSE TO ACCOMPANY AN OFFICER TO ASSIST IN A VOLUNTEER CAPACITY WITH DONOR DEVELOPMENT AT SEVERAL EVENTS, WHICH ALSO REQUIRED ATTENDANCE BY THE OFFICER. COUNTRY CLUB DUES WERE PAID ON BEHALF OF TWO OFFICERS AND TWO HIGHLY COMPENSATED EMPLOYEES TO PROMOTE FUNDRAISING EFFORTS. THESE AMOUNTS ARE TREATED AS COMPENSATION TO THESE EMPLOYEES.
	PART I, LINE 4B	ONE OFFICER MEETS THE CRITERIA TO PARTICIPATE IN THE NONQUALIFIED RETIREMENT PLAN AS OF THE PARTICIPANT'S NORMAL RETIREMENT DATE, SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE. THE AMOUNT INCLUDED IN COLUMN (C) AS DEFERRED COMPENSATION FOR DALE W SEUFERLING ATTRIBUTABLE TO THE NONQUALIFIED RETIREMENT PLAN IS \$16,205.

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

2011

Open to Public Inspection

Name of the organization THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION	Employer identification number 48-0547734
---	--

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
Total ▶ \$ _____										

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

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
(1) RA EDWARDS	EXECUTIVE COMMITTEE OF KU ENDOWMENT	218,906	SEE PART V - R A EDWARDS IS PRESIDENT OF FIRST NATIONAL BANK OF HUTCHINSON, WHICH MANAGES INCOME-PRODUCING FARM PROPERTIES HELD BY KU ENDOWMENT		No
(2) KURT D WATSON	EXECUTIVE COMMITTEE OF KU ENDOWMENT	288,620	SEE PART V - KURT WATSON IS PRESIDENT OF THE IMA FINANCIAL GROUP, WHICH RECEIVES FEES AS AN INSURANCE CONSULTANT AND BROKER		No
(3)					No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
------------	------------------	-------------

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

2011

Open to Public Inspection

Name of the organization
THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Employer identification number
48-0547734

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
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	X	207	2,748,827	COST
10 Securities—Closely held stock	X	1	34,265	COST (SAME AS PROCEEDS)
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	X	3	155,000	MARKET COMPARABLES
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 ► ()				
26 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

293

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?	Yes	No
b	If "Yes," describe the arrangement in Part II		No
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
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 III

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	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION	Employer identification number 48-0547734
---	--

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	A DRUE JENNINGS AND TODD SUTHERLAND HAVE A BUSINESS RELATIONSHIP M D MICHAELIS, R A EDWARDS, TODD SUTHERLAND, ROBERT TAYLOR, AND KURT WATSON HAVE A BUISNESS RELATIONSHIP

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	THE BYLAWS OF THE ORGANIZATION PROVIDE FOR A BOARD OF TRUSTEES TO BE COMPRISED OF 50 TO 75 MEMBERS THE BOARD OF TRUSTEES ARE RESERVED A LIMITED NUMBER OF POWERS WHICH INCLUDE 1) ELECTION OR REMOVAL OR TO FILL VACANCIES IN THE EXECUTIVE COMMITTEE, AND 2) ELECTION OF THE CHAIR OF THE EXECUTIVE COMMITTEE. THE OTHER POWERS PROVIDED TO THE MEMBERS OF THE BOARD OF TRUSTEES ARE OUTLINED IN THE EXPLANATION TO QUESTION 7B BELOW

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	THE LIMITED POWERS OF THE MEMBERS OF THE BOARD OF TRUSTEES OF THE ORGANIZATION ALSO INCLUDE 1) ELECTION OR REMOVAL OR TO FILL VACANCIES OF THE MEMBERS OF THE BOARD OF TRUSTEES, 2) CHANGE IN THE NUMBER OF MEMBERS OF THE BOARD OF TRUSTEES, 3) A MENDMENT OF THE ARTICLES OF INCORPORATION, AND 4) LIQUIDATION OR DISSOLUTION OF KU ENDOWMENT, OR DISPOSITION OF ALL, OR SUBSTANTIALLY ALL, OF THE ASSETS OF KU ENDOWMENT, OR ANY MERGER OF KU ENDOWMENT INTO OR WITH ANOTHER CORPORATION THE BYLAWS DO NOT GRANT THE MEMBERS OF THE BOARD OF TRUSTEES ANY OTHER POWERS OTHER THAN THOSE INDICATED ABOVE A FULL LIST OF THE MEMBERS OF THE BOARD OF TRUSTEES CAN BE FOUND ON THE ORGANIZATION'S WEBSITE WWW.KUENDOWMENT.ORG

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS PREPARED INTERNALLY BY THE TAX AND COMPLIANCE REPORTING OFFICER. AN INTERNAL REVIEW OF THE RETURN IS COMPLETED BY APPROPRIATE KU ENDOWMENT PERSONNEL. AN EXTERNAL TAX PREPARER THEN COMPLETES A REVIEW OF THE RETURN. A DRAFT COPY OF FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE TO REVIEW AND RECOMMEND REVISIONS. ANY SUCH RECOMMENDATIONS ARE PROVIDED IN A TIMELY MANNER TO INCORPORATE THEM IN THE RETURN BEFORE TRANSMITTAL TO THE IRS. THE AUDIT COMMITTEE REVIEWS THE 990 ON BEHALF OF THE GOVERNING BODY (THE EXECUTIVE COMMITTEE) AND RECOMMENDS APPROVAL OF THE 990 BY THE EXECUTIVE COMMITTEE. THE FINAL VERSION OF THE 990 IS PLACED ON THE TRUSTEE INTRANET FOR THE EXECUTIVE COMMITTEE TO REVIEW PRIOR TO FILING. AFTER TRANSMITTAL OF THE FINAL RETURN TO THE IRS, A COPY OF THE RETURN IS PLACED ON THE ORGANIZATION'S PUBLIC WEBSITE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	TO MONITOR AND ENFORCE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY , UPON DISCLOSURE OF A CONFLICT OF INTEREST, THE CHAIR OF THE EXECUTIVE COMMITTEE OR COMMITTEE SHALL, IF APPROPRIATE APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT AFTER EXERCISING DUE DILIGENCE, THE EXECUTIVE COMMITTEE OR COMMITTEE SHALL DETERMINE WHETHER KU ENDOWMENT CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE EXECUTIVE COMMITTEE OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED MEMBERS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN KU ENDOWMENT'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO KU ENDOWMENT AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION IF THE EXECUTIVE COMMITTEE OR A STANDING COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A TRUSTEE HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE TRUSTEE OF THE BASIS FOR SUCH BELIEF AND AFFORD THE TRUSTEE AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE IF, AFTER HEARING THE RESPONSE OF THE TRUSTEE AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE EXECUTIVE COMMITTEE OR A STANDING COMMITTEE DETERMINES THAT THE TRUSTEE HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION OF OFFICERS AND SUCH OTHER PERSONS AS DESIGNATED BY THE EXECUTIVE COMMITTEE SHALL BE DETERMINED BY THE COMPENSATION COMMITTEE AND BE CONFIRMED BY THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE MAY ADJUST COMPENSATION DETERMINED BY THE COMPENSATION COMMITTEE WHENEVER, IN ITS JUDGMENT, THE BEST INTERESTS OF KU ENDOWMENT WOULD BE SERVED THEREBY. A COMPENSATION COMMITTEE OF NOT LESS THAN FIVE NOR MORE THAN SEVEN TRUSTEES SHALL BE APPOINTED ANNUALLY BY THE CHAIR OF THE EXECUTIVE COMMITTEE. THE CHAIR OF THE EXECUTIVE COMMITTEE SHALL DESIGNATE ONE COMPENSATION COMMITTEE MEMBER AS CHAIR. A MAJORITY IN NUMBER OF THE COMMITTEE SHALL CONSTITUTE A QUORUM. THE COMPENSATION COMMITTEE MUST CONSIST OF INDIVIDUALS WHO (I) DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO COMPENSATION ARRANGEMENTS OR TRANSACTIONS, (II) HAVE OBTAINED AND RELIED UPON APPROPRIATE DATA AS TO COMPARABILITY PRIOR TO MAKING ANY DETERMINATION, AND (III) ADEQUATELY DOCUMENT THE BASIS FOR COMMITTEE DECISIONS CONCURRENTLY WITH MAKING DETERMINATIONS. THE COMMITTEE IS DIRECTED TO ACT IN A MANNER THAT WILL AVOID THE INTERMEDIATE SANCTIONS PROVISIONS OF THE INTERNAL REVENUE CODE. ITS DUTIES SHALL BE THE REVIEW, STUDY AND RECOMMENDATION OF REASONABLE AND NECESSARY COMPENSATION FOR OFFICERS AND EMPLOYEES OF KU ENDOWMENT AND ANY AND ALL SUCH ADDITIONAL FUNCTIONS AS MAY FROM TIME TO TIME BE DESIGNATED BY THE EXECUTIVE COMMITTEE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	KU ENDOWMENT WAS GRANTED AN EXEMPTION FROM FEDERAL INCOME TAX IN 1934, AND RECEIVED ADDITIONAL CONFIRMATION OF THIS EXEMPTION ON JUNE 1, 2000, AND MOST RECENTLY ON OCTOBER 18, 2010 A COPY OF THE LATTER IS AVAILABLE ON THE ORGANIZATION'S WEBSITE UNDER THE TAB, "ACCOUNTABILITY," "FINANCIALS AND FORMS," "IRS DETERMINATION LETTER "

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	KU ENDOWMENT'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE UNDER THE TAB "ACCOUNTABILITY," "FINANCIALS AND FORMS," "2012 AUDIT REPORT " A COPY OF THE ORGANIZATION'S GOVERNING DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST POLICY , ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE UNDER THE TAB "ABOUT US," "LEADERSHIP,"BOARD OF TRUSTEES "

Identifier	Return Reference	Explanation
AVERAGE HOURS PER WEEK DEVOTED TO A RELATED ORGANIZATION	FORM 990, PART VII, SECTION A, COLUMN (B)	THE FOLLOWING PERSONS LISTED IN SECTION A EACH DEVOTED AN ADDITIONAL 10 HOURS PER WEEK TO THE KU ENDOWMENT CHARITABLE GIFT FUND, A RELATED ORGANIZATION CHARLES HEATH, KURT D WATSON, LINDA ELLIS SIMS, DALE W SEUFERLING, D JEROME DAVIES, JEFFREY W DAVIS

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -25,979,980 AMORTIZATION OF PENSION ADJUSTMENTS -4,590,283 CHANGE IN NET INTEREST IN KU ENDOWMENT CHARITABLE GIFT FUND -68,214 CHANGE IN VALUE OF LIFE INCOME GIFTS -733,202 CHANGE IN VALUE OF LIFE INSURANCE -426,957 TOTAL TO FORM 990, PART XI, LINE 5 -31,798,636

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

2011

Open to Public Inspection

Name of the organization
THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Employer identification number
48-0547734

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
(1) FOBW LLC PO BOX 928 LAWRENCE, KS 660440928 26-2224227	INACTIVE	KS	0	0	THE KANSAS UNIVERSITY ENOWMENT ASSOCIATION
(2) CWAPTS LLC PO BOX 928 LAWRENCE, KS 660440928 45-3170274	RENTAL REAL ESTATE	KS	-64,493	2,702,217	THE KANSAS UNIVERSITY ENOWMENT ASSOCIATION

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	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) THE KU ENDOWMENT CHARITABLE GIFT FUND PO BOX 928 LAWRENCE, KS 660440928 20-0317170	SUPPORT FOR KU ENDOWMENT AND 501(C) (3)'S NAMED IN GOVERNING DOCUMENT	KS	501(C)(3)	11A, TYPE I	N/A		No
(2) LEON KARELITZ CHARITABLE TRUST PO BOX 928 LAWRENCE, KS 660440928 61-6400249	SUPPORT FOR KU ENDOWMENT PURSUANT TO GOVERNING DOCUMENT	KS	501(C)(3)	11A, TYPE I	N/A		No

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?		(k) Percentage ownership
							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
See Additional Data Table							

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, 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 related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

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

j

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

k

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

l

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

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

Yes

No

No

No

No

No

No

No

No

No

No

No

No

No

No

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	(d) Method of determining amount involved
(1) THE KU ENDOWMENT CHARITABLE GIFT FUND	C	219,285	CASH
(2) LORRAINE M LOVE CHARITABLE REMAINDER UNITRUST	C	8,308	CASH
(3) AGNES LAURETTA MCCLAIR TEST TRUST	C	49,150	CASH
(4) MARY SELLARS FUND	C	17,553	CASH
(5)			
(6)			

Schedule R (Form 990) 2011

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]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation	
------------	------------------	-------------	--

Software ID:

Software Version:

EIN: 48-0547734

Name: THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(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
CHARITABLE REMAINDER TRUSTS (60)	SPLIT INTEREST TRUSTS PROVIDING SUPPORT TO KU ENDOWMENT ASSOCIATION	KS	N/A	T			
CHARITABLE REMAINDER TRUST (1)	SPLIT INTEREST TRUST PROVIDING SUPPORT TO KU ENDOWMENT ASSOCIATION	IL	N/A	T			
CHARITABLE REMAINDER TRUST (1)	SPLIT INTEREST TRUST PROVIDING SUPPORT TO KU ENDOWMENT ASSOCIATION	CO	N/A	T			
CHARITABLE REMAINDER TRUSTS (3)	SPLIT INTEREST TRUSTS PROVIDING SUPPORT TO KU ENDOWMENT ASSOCIATION	MO	N/A	T			
CHARITABLE LEAD TRUSTS (2)	SPLIT INTEREST TRUSTS PROVIDING SUPPORT TO KU ENDOWMENT ASSOCIATION	OH	N/A	T			
LORRAINE M LOVE CHARITABLE REMAINDER UNITRUST PO BOX 700 JUNCTION CITY, KS 66441 48-1247473	SEC 4947(A) (1) NONEXEMPT CHARITABLE TRUST SUPPORTING KU ENDOWMENT	KS	N/A	T	3,685	130,745	100 000 %
AGNES LAURETTA MCCLAIR TEST TRUST C/O BNK OF AMERICA PO BOX 831041 DALLAS, TX 75283 48-6126736	SEC 4947(A) (1) NONEXEMPT CHARITABLE TRUST SUPPORTING KU ENDOWMENT	KS	N/A	T	107,212	857,966	100 000 %
MARY SELLARS FUND C/O BNK OF AMERICA PO BOX 831041 DALLAS, TX 75283 48-6203686	SEC 4947(A) (1) NONEXEMPT CHARITABLE TRUST SUPPORTING KU ENDOWMENT	KS	N/A	T	18,731	282,465	100 000 %