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DLN: 93493147007424

Department of the Treasury

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)

OMB No 1545-0047

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2012 calendar year, or tax year beginning 06-01-2012 , 2012, and ending 05-31-2013 D Employer identification number **B** Check if applicable Trinity University Address change 74-1109633 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Terminated (210)999-7334 Amended return City or town, state or country, and ZIP + 4 San Antonio, TX 782127200 Application pending **G** Gross receipts \$ 299,028,255 Name and address of principal officer **H(a)** Is this a group return for Dennis Ahlburg ┌ Yes 🗸 No affiliates? One Trinity Place San Antonio, TX 782127200 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **▽** 501(c)(3) **┌** 501(c) () **◄** (insert no) Tax-exempt status ☐ 4947(a)(1) or ☐ 527 H(c) Group exemption number ► Website: ► http://www.trinity.edu L Year of formation 1869 M State of legal domicile TX Part I Summary Briefly describe the organization's mission or most significant activities TRINITY UNIVERSITY IS AN INDEPENDENT CO-EDUCATIONAL UNIVERSITY WHOSE MISSION IS EXCELLENCE IN THE INTERRELATED AREAS OF TEACHING, RESEARCH, AND SERVICE Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 27 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 26 5 2,176 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -764,311 **b** Net unrelated business taxable income from Form 990-T, line 34 . **Prior Year Current Year** 13,214,585 Contributions and grants (Part VIII, line 1h) . . 21.253.236 Program service revenue (Part VIII, line 2g) 95,735,569 99,571,157 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 73,379,941 47,159,383 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 8,212,933 11,962,522 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 190,543,028 179,946,298 13 34,553,866 38,302,532 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 62,975,853 Expenses 61,841,225 5-10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 0 Total fundraising expenses (Part IX, column (D), line 25) \triangleright 2,342,237 b 47,768,247 17 50,909,707 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 148,439,426 147,912,004 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 42,103,602 32,034,294 Assets or d Balances **Beginning of Current End of Year** 20 Total assets (Part X, line 16) . . 1,200,388,142 1,309,513,126 21 Total liabilities (Part X, line 26) 60,002,213 61,613,456 Net assets or fund balances Subtract line 21 from line 20 1,140,385,929 1,247,899,670 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 Gary L Logan Vice President Finance ar	2014-05-21 Date						
Paid	<u> </u>	Type or print name and title Print/Type preparer's name	Preparer's signature	Date	Check If PTIN self-employed				
repare	r	Firm's name 🕨	Firm's name ►						
Jse Only		Fırm's address ►	Phone no						

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

TYes TNo

Form	990 (2012)					Page ∡
Par		nt of Program Serv :hedule O contains a res				
1	Briefly describe tl	he organization's missio	n			
UND STUI VALI	ERGRADUATE UNI DENTS TO NEW WA JES MULTIPLE WA	IVERSITY WITH SELEC AYS OF THINKING AND	TED PRE-PRO GROWING WING THE WORLI	FESSIONAL AND PR HILE CREATING AND D TRINITY UNIVERS	ES INSTITUTION AS A PRIM OFESSIONAL PROGRAMS, T D NURTURING A DIVERSE CO SITY TAKES PRIDE IN BEING TY	RINITY INTRODUCES DMMUNITY THAT
2		on undertake any signific O or 990-EZ?			r which were not listed on	
	If "Yes," describe	these new services on S	chedule O			
3	services?	on cease conducting, or		nt changes in how it co	onducts, any program	
4	Describe the orga expenses Section	nızatıon's program servi	ce accomplishn 4) organization:	s are required to repor	ree largest program services, t the amount of grants and allo	
4a	(Code INSTRUCTION IN TH) (Expenses \$ E LIBERAL ARTS, SCIENCES A	104,773,941 ND RELATED FIELD	including grants of \$ S SCHOLARSHIPS AND ALL	38,302,532) (Revenue \$ OWANCES TO STUDENTS TO FURTHI	78,943,945) ER THEIR EDUCATION
4b	(Code AUXILIARY SERVICES) (Expenses \$ 5 INCLUDING RESIDENCE HAL	13,832,283 LS AND FOOD SERV	Including grants of \$ VICE) (Revenue \$	20,627,212)
4c	(Code CONFERENCES AND) (Expenses \$ PUBLIC SERVICE	2,790,175	including grants of \$) (Revenue \$	2,166,643)
	(Code PROGRAM FEES) (Expenses \$	0	including grants of \$) (Revenue \$	1,367,750)
	(Code REBATES AND COMM) (Expenses \$ HISSIONS	0	including grants of \$) (Revenue \$	868,547)
	(Code COPY CENTER) (Expenses \$	0	including grants of \$) (Revenue \$	360,807)
	(Code OTHER) (Expenses \$	0	including grants of \$) (Revenue \$	709,884)
	Other program se	ervices (Describe in Sch	edule O)			
	(Expenses \$		cluding grants o	of\$) (Revenue \$	3,306,988)
4e	Total program se	rvice expenses 🗠	121,396,399	ı		

Part IV Checklist of Required Schedule
--

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	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	3		Νo
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? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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	6		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	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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	11b	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	11c		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.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part χ^{*}	11e	Yes	
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.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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, Parts I and IV	14b	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 United States? If "Yes," complete Schedule F, Parts II and IV	15		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 United States? If "Yes," complete Schedule F, Parts III and IV	16		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 (see instructions)	17		No
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	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

•	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 3,763			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
_	gaming (gambling) winnings to prize winners?	1c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	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	
		_	,	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
2	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
_	Does the ergopigation have applied gross received that are respective gross-to-other 4100,000, and did to	5c		NI -
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
:	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
ł	If "Yes," indicate the number of Forms 8282 filed during the year			
		1		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
j	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?			
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
)	Did the organization make any taxable distributions under section 4966 /	9a 9b		
	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
1	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	120		
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
:	Enter the amount of reserves on hand	[
1	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
_	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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 .															ে
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Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	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?	2	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? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			_
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- 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 own website. Another's website. Upon request. Other (explain in Schedule O)
 - **9** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►LORI LOGAN ONE TRINITY PLACE San Antonio, TX (210)999-7301

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	from related - organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 MI3C)		organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A)	(B)			(C)				(D)	(E)		(F)	
	Name and Title	A verage hours per	Posi more t				heck: unless	i	Reportable compensation	Reportable compensation		Estima nount of	
		week (list any hours	person is both an officer from and a director/trustee) organiza		from the organization (W-	from related organizations (W-	c	mpens from t					
		for related organizations				즐		F	2/1099-MISC)	2/1099-MISC)	org	anızatı relate	on and
		below dotted line)	Individual trustee or director	Institutional	Officer) em	Highest compensated employee	Former			0	rganıza	
		docted lille)	호후			employee	le con	,					
			l de	l Truste		œ œ) per						
			α·	9 e			1 15 E						
1b	Sub-Total			٠.				>					
c	Total from continuation sheet	· ·						Þ					
d	Total (add lines 1b and 1c) .				•	•	•	-	3,152,548	C			299,485
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	ian			
											T	Yes	No
3	Did the organization list any fo					key	emplo	yee,	, or highest compen	sated employee			
_	on line 1a? If "Yes," complete S					•	• •	•			3		No
4	For any individual listed on line organization and related organ												
	individual				•	•		•		· · · ·	4	Yes	
5	Did any person listed on line 1 services rendered to the organ								-		5		No
											<u> </u>		No_
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five											V VA25	

(A) (B) Name and business address Description of services								
Joeris General Contractors , 1390 E Bitters Rd SAN ANTONIO TX 78216	Construction	4,074,858						
David E Harvey Builders Inc , 218 E Ramsey SAN ANTONIO TX 78216	Construction	5,938,530						
Aramark Corporation , One Trinity Place SAN ANTONIO TX 78212	Food Service	6,174,631						
Einhorn Yaffee Prescott , PO Box 617 ALBANY NY 12201	Architecture	1,899,131						
JT Vaughn Construction LLC , 10355 Westpark Dr HOUSTON TX 77042	Construction	17,939,743						
2. Total number of independent contractors (including but not limited to the	accolleted above) who recoved more than							

Part V		Check if Schedi	ule O contains a respoi	nse to any question i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
s e	1a	Federated cam	paigns 1a					
ant Ind	b	Membership du	es 1b					
Contributions, Giffs, Grants and Other Similar Amounts	c	Fundraising eve	ents 1c					
	d	Related organiz	zations 1d					
9 ∺	e	Government grant	s (contributions) 1e	6,950,079				
utions ier Sii	f	All other contribution	ons, gifts, grants, and 1f ot included above	14,303,157				
<u>ē</u>	g	Noncash contribute	ons included in lines	172,791	İ	į		
and	h	Total. Add lines	s 1a-1f		21,253,236			
e l				Business Code				
wen	2a	TUITION AND FEES		611310	78,943,945	78,943,945		
æ	b	RESIDENCE HALLS		611310	13,306,269	13,306,269		
ž Į	c d	FOOD SERVICE		611310	7,212,332	7,212,332		
38 8	a e	BOOK STORE		611310	108,611	108,611		
Program Serwce Revenue	f	All other progra	am service revenue					
<u>*</u>	g	Total. Add lines	s 2a – 2f		99,571,157			
	3		ome (including dividen ar amounts)		27,222,804		-1,093,386	28,316,190
	4		stment of tax-exempt bond		0			
	5	Royalties	<u> </u>	▶	6,161,286		1,470	6,159,81
			(ı) Real	(II) Personal				
	6a	Gross rents Less rental	133,085 98,546					
	b	expenses	,					
	С	Rental income or (loss)	34,539	0				
	d	Net rental inco	me or (loss)		34,539		34,539	
	7a	Gross amount from sales of assets other than inventory	(1) Securities 138,919,990	(II) O ther				
	b	Less cost or other basis and sales expenses	118,983,411					
	C	Gain or (loss)	19,936,579		10.005.570			40.006.57
	d 8a	Net gain or (los	i		19,936,579			19,936,579
Other Kevenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a						
 	b C		penses b (loss) from fundraising	ovents b	0			
			rom gaming activities	events : : p				
	b c		a penses b (loss) from gaming acti	vities	0			
	10a	Gross sales of returns and allo	ınventory, less					
	b c		oods sold b (loss) from sales of inv	entory	n			
}		Miscellaneous	•	Business Code				
}	11a	CONFERENCE		611710	2,166,643	2,166,643		
	b		S AND REBATES	611710	868,547	868,547		
	c	FEES		611710	1,367,750	1,367,750		
						1 070 601	202.055	
	d	All other reven	ue		1,363,757	1,070,691	293,066	
	_	All other reven	l		1,363,757 5,766,697	1,070,691	293,066	

	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al Check if Schedule O contains a response to any question in this Pa				Г
	of include amounts reported on lines 6b, by, 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	0	,		·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	38,302,532	38,302,532		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,516,874	637,740	781,950	97,184
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	48,312,914	38,919,976	7,988,265	1,404,67
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,942,215	3,099,822	766,717	75,676
9	Other employee benefits	4,670,757	3,420,845	1,173,863	76,04
10	Payroll taxes	3,398,465	2,638,107	651,477	108,88
L1	Fees for services (non-employees)				
а	Management	0			
b	Legal	782,504		782,504	
С	Accounting	470,920		470,920	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	1,733,000		1,733,000	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,338,667	6,338,667		
12	Advertising and promotion	0,550,007	0,330,007		
13	Office expenses	10,360,532	6,359,245	3,756,803	244,48
L 4	Information technology	2,017,129	295,925		59,03
. 15	Royalties	2,017,129	293,923	1,002,171	39,03
.6	Occupancy	11,926,650	10,526,604	1,197,895	202,15
L7	Travel				
L8	Payments of travel or entertainment expenses for any federal, state, or local public officials	3,013,287	2,682,143	257,038	74,10
19	Conferences, conventions, and meetings	0			
20	Interest	854,139	186,843	667,296	
21	Payments to affiliates	0	,	, 1	
22	Depreciation, depletion, and amortization	9,200,790	7,987,950	1,212,840	
23	Insurance	1,070,629	, ,	1,070,629	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	, ,		, ,	
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	147,912,004	121,396,399	24,173,368	2,342,23
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	rt X	Check if Schedule O contains a response to any question in	n this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		122,467,042	2	119,703,757
	3	Pledges and grants receivable, net		13,090,902	3	10,592,865
	4	Accounts receivable, net		5,523,222	4	4,847,447
	5	Loans and other receivables from current and former officer key employees, and highest compensated employees. Com Schedule L	plete Part II of	0	5	0
Assets	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section 501(c)(beneficiary organizations (see instructions) Complete Part	(3)(B), and contributing (9) voluntary employees'	0		0
82	7	Notes and loans receivable, net		23,350,375	<u> </u>	22,958,255
₹	8	Inventories for sale or use		461,355		475,937
	9	Prepaid expenses and deferred charges		2,318,286		2.391.724
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 375,555,099	, ,		2,001,721
	ь	Less accumulated depreciation	10b 161,338,427	178,824,306	10c	214,216,672
	11	Investments—publicly traded securities		408,547,793	11	455,798,810
	12	Investments—other securities See Part IV, line 11		122,652,856	12	131,068,868
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		323,152,005	15	347,458,791
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,200,388,142	16	1,309,513,126
-	17	Accounts payable and accrued expenses		15,731,333	17	18,155,967
	18	Grants payable		0	18	0
	19	Deferred revenue		3,193,423	19	2,616,722
	20	Tax-exempt bond liabilities		32,035,000	20	32,035,000
ω.	21	Escrow or custodial account liability Complete Part IV of S	Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, dir key employees, highest compensated employees, and disq				
qe		persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third pa	rties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parti	es	6,567,326	24	6,179,819
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24) Complete	Part X of Schedule	2,475,131	25	2,625,948
	26	D		60,002,213	26	61,613,456
	26	Total liabilities. Add lines 17 through 25		00,002,213	26	01,013,430
ĕ	27	Unrestricted net assets		480,008,147	27	520,085,331
<u>ප</u>	28	Temporarily restricted net assets		112,196,055	28	152,198,846
<u> </u>	29	Permanently restricted net assets		548,181,727	29	575,615,493
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), checomplete lines 30 through 34.		3 13,13 1,121	25	3. 5, 5, 6, 6
ō	30	Capital stock or trust principal, or current funds			30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fur	nd		31	
45.S	32	Retained earnings, endowment, accumulated income, or oth			32	
Net 4	33	Total net assets or fund balances		1,140,385,929	33	1,247,899,670
ž	34	Total liabilities and net assets/fund balances		1,200,388,142	34	1,309,513,126
	1 7 7	Total habilities and het assets/fulla balances	· · · · ·	1,200,300,142	34	1,309,513,126

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		179,9	946,298	
2	Total expenses (must equal Part IX, column (A), line 25)	2		147,9	912,004	
3	Revenue less expenses Subtract line 2 from line 1	3		32,(34,294	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			885,929	
5	Net unrealized gains (losses) on investments	5			193,000	
6	Donated services and use of facilities	6			•	
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		22,9	86,447	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,247,8	399,670	
Par	t XII Financial Statements and Reporting				•	
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset	
				Yes	No	
1	Accounting method used to prepare the Form 990					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revious a separate basis, consolidated basis, or both	ewed or				
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate				
	▼ Separate basis					
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın				
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?	ne	3a	Yes		
b	f "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required 3b Yes udit or audits, explain why in Schedule O and describe any steps taken to undergo such audits					

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As Filed Data -

DLN: 93493147007424

Employer identification number

OMB No 1545-0047

SCHEDULE A

Name of the organization

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Trinity University

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.

2012

Open to Public Inspection

		74-1109633									
	rt I			blic Charity Sta					<u> </u>	instruction	s
The o	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	lınes 1 thro	ugh 11, chec	k only one	box)		
1		A chur	ch, convent	on of churches, or a	ssociation of	fchurches	described in s	ection 170	(b)(1)(A)(i).		
2		A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sched	dule E)				
3		A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon desc	rıbed ın sectio	on 170(b)(1)(A)(iii).		
4	Г			h organization opera	ted ın conjun	iction with a	a hospital des	cribed in s	ection 170(b)	(1)(A)(iii).	Enter the
5	_			ty, and state erated for the benefi	t of a college	or univers	ity owned or o	nerated by	/ a dovernme	ntal unit dec	cribed in
,	,	_	•	A)(iv). (Complete P	_	or univers	ity owned or t	pperated by	a governine	iitai uiiit ues	cribed iii
6	\vdash			local government o	•	tal unit dec	cribed in sect	ion 170(h)	(1)(4)(4)		
7	<u>'</u>			at normally receives						from the ger	neral nublic
•	'			on 170(b)(1)(A)(vi).			s support non	i a governi	nemear anne or	nom the gen	iciai pablic
8	\sqcap			described in sectio			mplete Part I	I)			
9	Γ	An org	anızatıon th	at normally receives	(1) more th	an 331/3%	of its support	from conti	ributions, mer	nbershıp fee	s, and gross
				ities related to its e	•	-		•			
		ıts sup	port from gr	oss investment inco	me and unre	lated busın	ess taxable ır	ncome (les	s section 511	L tax) from b	usinesses
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section	509(a)(2). (0	Complete P	art III)		
10		An org	anızatıon or	ganized and operate	d exclusively	to test for	public safety	See sect i	on 509(a)(4)	•	
11	Г	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									
										see section	509(a)(3). Cneck
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 - Non-functi					lon-function	ally integrated					
e	Γ			ox, I certify that the							
				on managers and ot	her than one	or more pu	blicly support	ted organiz	ations descri	bed in section	on 509(a)(1) or
f			1509(a)(2)	received a vertean d		from the Ti	DC +ba+ ++ +a a	Tuna I Tu	no II or Tun	a III aummar	ting organization
T			this box	received a written d	etermination	from the 1	RS that it is a	Type I, Ty	pe II, or Typ	e III Suppor	ting organization,
g				2006, has the organ	ızatıon accep	oted any gif	ft or contribut	ion from ar	y of the		,
			ng persons?			•				,	
				rectly or indirectly o	•		_	persons d	escribed in (i		Yes No
				governing body of th		_	on?				g(i)
			•	er of a person descr	• •		phoyo?				g(ii)
h				lled entity of a person ng information about						110	y(iii)
"		FIOVICE	e the followi	ng mormation about	. the support	eu organiza	tion(s)				
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	u notify	(vi) Is	the	(vii) A mount of
	uppoi			organization	organizat		the organi		organiza		monetary
or	ganiz	ation		(described on	col (i) lis		ın col (i)		col (i) or	-	support
				lines 1 - 9 above or IRC section	your gove docume	_	suppo	11.	in the l) 5 '	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	7
						-		-			
							1	1			
Total			İ		İ		1	1			

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493147007424

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Open to Public

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of open space Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Total number of conservation easements Total number of conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation, and enforcing conservation easements during the year Number of states where property subject to conservation, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Subject to the devoted to monitoring, inspecting, and enforcing conservation easements during the year Subject to the devoted to monitoring, inspecting, and enforcing conservation easements during the year Subject to Form 990, Part IV, line 7. Preservation of an historically important land area Preservation of an historically important land area Held at the End of the Y	ntema	al Revenue Service	► Attach to For	emal Revenue Service Attach to Form 990. See separate instructions. Inspection					
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Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 9 In Part XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ii) Assets included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the	7	A mount of expe	enses incurred in monitoring, inspecting	, and enforcing conservation easements	during the year				
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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. If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), 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 **	8			d) above satisfy the requirements of sec	tion 170(h)(4)(B))(ı)	No		
Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), 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 **	9	balance sheet,	and include, if applicable, the text of the	e footnote to the organization's financial					
If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), 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 **	Par				or Other Simil	lar Assets.			
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 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the	1a	If the organizat	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse	16 (ASC 958), not to report in its revents held for public exhibition, education, o	or research in furt				
(ii) Assets included in Form 990, Part X 4,264, 1f the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the	b	works of art, his	storical treasures, or other similar asse	ts held for public exhibition, education, o					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the		(i) Revenues II	ncluded in Form 990, Part VIII, line 1		► \$_				
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the		(ii) Assets incl	uded in Form 990, Part X		► \$	4,264,5	00		
	2	If the organizat	tion received or held works of art, histor		r financial gain, p	rovide the			

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art	, His	tori	<u>cal Trea</u>	sures, or O	the	<u>r Similar</u>	<u>Asse</u>	ts (cc	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck	any of the	following that a	re a	significant i	use of	ıts	
а	Public exhibition		d	Γ	Loan or e	exchange progr	ams				
b	Scholarly research		e	Γ	Other						
c	▼ Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	v the	y further th	ne organization	's ex	empt purpos	se in		
5	During the year, did the organization solicit							ıılar	_		_
	assets to be sold to raise funds rather than									Yes	✓ No
Pai	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						Y" t	es" to Forn	n 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	dian or other interme	ediary	for c	ontributior	ns or other ass	ets r	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ving t	able	_			_	_	
						_	_		Amou	ınt	
c	Beginning balance										
d	Additions during the year					-	1d				
e	Distributions during the year					-	1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21?						Г	Yes	□ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natio	n has bee	n provided in P	art >	KIII			<u> </u>
Pa	rt V Endowment Funds. Complete										
4_	Danis and control of the lands	(a)Current year 545,442,555	(b)F	rior y	ear b (c 542,399	c)Two years back 521,798,735		hree years ba 471,104,1			ears back 59,287,541
1a	Beginning of year balance	3,278,866			378,877	5,190,690		8,801,7	_	J.	4,972,211
b	Contributions	3,270,800			5/0,0//	3,190,690		0,001,7	70		4,972,211
С	Net investment earnings, gains, and losses	89,719,982		-11,	216,539	95,131,164		68,950,7	97	-7	70,272,697
d	Grants or scholarships			7,	331,358	7,936,694		8,534,9	62		7,199,400
e	Other expenditures for facilities and programs	25,123,019		23,	019,053	22,519,151		14,826,9	08	1	13,930,824
f	Administrative expenses	1,566,393			754,017	2,022,345		3,696,1			1,752,696
g	End of year balance	611,751,991		545,	142,555	589,642,399		521,798,7	35	47	71,104,135
2	Provide the estimated percentage of the cur	rent year end balan	ce (lın	e 1 g	, column (a	a)) held as					
а	Board designated or quasi-endowment 🕨	40 000 %									
b	Permanent endowment ► 37 000 %										
С	Temporarily restricted endowment ► 23	000 %									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiz	atıon t	hat a	are held an	nd administered	for	the			
	organization by							Г	2- (:)	Yes	No
	(i) unrelated organizations			•			•	—	3a(i) 3a(ii)		No No
b	(ii) related organizations						•	· · · [:	3b		NO
4	Describe in Part XIII the intended uses of the	•					•	· · · L			<u> </u>
Pai	rt VI Land, Buildings, and Equipme										
	Description of property		•	(a)	Cost or othe (investmen	er (b)Cost or ot		(c) Accumula depreciatio		(d) Bo	ok value
1a	Land					5,397,	,184				5,397,184
b	Buildings					207,642,		83,412	,944		4,229,489
c	Leasehold improvements					27,702,		11,033			6,668,836
	Equipment					36,427,		27,567	_		8,860,369
е	Other					98,385,	-	39,324	,761	5	9,060,794
	I. Add lines 1a through 1e (Column (d) must e			mn (B), line 10(21	4,216,672
	,	·		•				Schedu	le D (F		90) 2012

Part VII Investments—Other Securities. See	Form 990, Part X, line 12.	· ·	
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests (3)Other			
(A) ALTERNATIVE INVESTMENTS	130,354,260	С	
		<u>_</u>	
(B) OIL AND GAS PROPERTIES	714,608	C	
·			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Second (a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	
	+		
10 tall (-		
Part IX Other Assets. See Form 990, Part X, III		(h) Daale value	
(1) HELD IN TRUST BY OTHERS	риоп	(b) Book value 347,458,	701
(1) HELD IN TROST BY OTHERS		347,430,	7 9 1
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)	▶ 347,458,	,791
Part X Other Liabilities. See Form 990, Part X	K, line 25.		
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
ANNUITIES PAYABLE	2,625,948		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,625,948		

	dule B (Form 550) 2012		raye -
Par	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	215,488,759
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	78,052,589
3	Subtract line 2e from line 1	3	137,436,170
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,733,000		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	42,510,128
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	179,946,298
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	107,975,015
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	107,975,015
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,733,000		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	39,936,989
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	147,912,004
Par	t XIII Supplemental 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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

ınformatıon		
Identifier	Return Reference	Explanation
Art and Rare Books Collections	Schedule D, Part III, Line 4	THE MAJORITY OF THE UNIVERSITY'S ART COLLECTION IS ON PUBLIC DISPLAY ON THE GROUNDS AND IN VARIOUS BUILDINGS ON CAMPUS THE RARE BOOKS COLLECTION IS MAINTAINED IN THE RARE BOOK ROOM OF THE COATES LIBRARY AND MATERIALS ARE AVAILABLE FOR SCHOLARLY RESEARCH
Intended Uses of Endowment Funds	Schedule D, Part V, Line 4	TO SUPPORT THE GENERAL OPERATING BUDGET AND MISSION OF THE UNIVERSITY AS A WHOLE INCLUDING THE FOLLOWING SCHOLARSHIPS AND INSTITUTIONAL LOAN FUNDS, LIBRARY RESOURCES, FACULTY SALARIES, FRINGE BENEFITS, FACULTY DEVELOPMENT, FACILITY MAINTENANCE, LECTURES, AND GENERAL OPERATING NEEDS
FIN 48 (ASC 740) FOOTNOTE	SCHEDULE D, PART X, LINE 2	ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES REQUIRE MANAGEMENT TO EVALUATE UNCERTAIN TAX POSITIONS TAKEN BY THE UNIVERSITY THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION ARE RECOGNIZED WHEN THE POSITION IS MORE LIKELY THAN NOT, BASED ON THE TECHNICAL MERITS, TO BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE UNIVERSITY AND HAS CONCLUDED THAT AS OF MAY 31, 2013, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THE UNIVERSITY HAS RECOGNIZED NO INTEREST OR PENALTIES RELATED TO UNCERTAIN POSITIONS THE UNIVERSITY IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS THERE ARE CURRENTLY NO AUDITS IN PROGRESS FOR ANY TAX PERIOD MANAGNEMENT BELIEVES THE UNIVERSITY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO MAY 31, 2010
RECONCILIATION OF REVENUE PER AUDITED FINANCIAL STATEMENTS WITH 990	SCHEDULE D, PART XI, LINE 2D	NET UNREALIZED APPRECIATION OF ASSETS HELD IN TRUST BY OTHERS \$25,559,589
RECONCILIATION OF REVENUE PER AUDITED FINANCIAL STATEMENTS WITH 990	SHCEDULE D, PART XI, LINE 4b	SCHOLARSHIPS ON AUDIT AS A CONTRA REVENUE \$38,302,532 CHANGE IN SPLIT INTEREST TRUESTS 2,573,142 RENTAL EXPENSES NETTED AGAINST REVENUE ON 990 (98,546) TOTAL SCHEDULE D, PART XI, LINE 4b \$40,777,128
RECONCILIATION OF EXPENSES PER AUDITED FINANCIAL STATEMENTS WITH 990		SCHEDULE D, PART XII IINE 4b SCHOLARSHIPS ON AUDIT AS A CONTRA REVENUE \$38,302,532 RENTAL EXPENSES NETTED AGAINST REVENUE ON 990 (98,546) ROUNDING 3 TOTAL SCHEDULE D, PART XII, LINE 4b \$38,203,989

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Schools

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Trinity University

Name of the organization

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

► Attach to Form 990 or Form 990-EZ.

Employer identification number

74-1109633

1. Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 2. Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 3. Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the period of solicitation for students, or during the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 4. Does the organization maintain the following? 4. Does the organization maintain the following? 5. Records indicating the racial composition of the student body, faculty, and administrative staff? 6. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 6. Copies of all material used by the organization or on its behalf to solicit contributions? 6. If you answered "No" to any of the above, please explain If you need more space, use Part II 7. Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 7. Sol Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 7. Sol Does the organization receive any financial assistance? 8. No 8. No 9. Admissions policies? 9. Sol No 1. Yes 6. No 1. Yes	Pa	rt I		YES	NO
brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4 Copies of all material used by the organization or on its behalf to solicit contributions? 4 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization of faculty or administrative staff? 5 Does the organization of the financial assistance? 6 Does the organization of the financial assistance? 7 Does the organization of the student body, please explain If you need more space, use Part II 8 Does the organization of the student body, please explain If you need more space, use Part II 8 Does the organization of the student body of the above, please explain If you need more space, use Part II	1		1	Yes	
Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if thas no solicitation grogram, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 4 Does the organization maintain the following? 4 Describe organization maintain the following? 5 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 5 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 4 Describe organization maintain the following? 5 Does the organization discriminate by race in any way with respect to a Students' nother privileges? 5 Describe organization discriminate by race in any way with respect to a Students' nother privileges? 5 Describe organization discriminate by race in any way with respect to a Students' nother privileges? 5 Describe organization discriminate by race in any way with respect to a Students' nother privileges? 5 Describe organization discriminate by race in any way with respect to a Students' nother privileges? 5 Describe organization discriminate by race in any way with respect to a Students' nother privileges? 5 Describe organization discriminate by race in	2	brochures, catalogues, and other written communications with the public dealing with student admissions,	2	Yes	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization or privileges? 5 Does the organization or privileges? 5 Does the organization or privileges? 5 Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization of eartify that it has compiled with the applicable requirements of sections 4 0.1 through 4 0.5	3	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II. 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' right or privileges? 5 Does the organization receive any financial and or assistance from a governmental agency? 5 Does the organization receive any financial and or assistance from a governmental agency? 6 Does the organization receive any financial and or assistance from a governmental agency? 6 Does the organization receive any financial and or assistance from a governmental agency? 6 Does the organization receive any financial and or assistance from a governmental agency? 6 Does the organization certify that it has complied with the applicable requirements of sections 4 0.1 through 4 0.5		please explain If you need more space use Part II	3_	Yes	
basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? d Copies of all material used by the organization or on its behalf to solicit contributions? d Copies of all material used by the organization or on its behalf to solicit contributions? d Copies of all material used by the organization or on its behalf to solicit contributions? d Copies of all material used by the organization or on its behalf to solicit contributions? d Copies of all material used by the organization or on its behalf to solicit contributions? Sal Ves Ves Ves Ves Ves Ves Ves Ves Ves Ves			- - 4a	Yes	
with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization strative staff? 5 Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid or assistance from a governmental agency? C Does the organization receive any financial aid	b		4b	Yes	
If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 No b Admissions policies? 5 Employment of faculty or administrative staff? 5 C No d Scholarships or other financial assistance? 5 Educational policies? 5 No f Use of facilities? 5 No h Other extracurricular activities? 1 If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6 Does the organization receive any financial aid or assistance from a governmental agency? 5 Has the organization receive any financial aid or assistance from a governmental agency? 6 No If you answered "Yes" to either line 6 a or line 6 b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05		with student admissions, programs, and scholarships?	4c	Yes	
a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II foa Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? c As a Yes fob No If you answered "Yes" to either line 6 a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 0.1 through 4 0.5	d		4d_	Yes	
c Employment of faculty or administrative staff? 5c No d Scholarships or other financial assistance? 5d No e Educational policies? 5e No f Use of facilities? 5f No g Athletic programs? 5g No h Other extracurricular activities? 1f you answered "Yes" to any of the above, please explain If you need more space, use Part II 5a Does the organization receive any financial aid or assistance from a governmental agency? 5b Has the organization's right to such aid ever been revoked or suspended? 5c No No No 1f you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	_		5a		No
d Scholarships or other financial assistance? Educational policies? 5e No f Use of facilities? 5f No g Athletic programs? 5g No h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	b	Admissions policies?	5b		No
e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	c	Employment of faculty or administrative staff?	5c		No
f Use of facilities? g Athletic programs? 5g No h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05					
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05					
If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	g	Athletic programs?	5g		No
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	h		<u>5h</u>		No
If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05				Yes	No.
	_	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05		Yes	IN O

Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
NON-DISCRIMINATION POLICY	SCHEDULE E, PART I, QUESTION 3	TRINITY DOES NOT AND WILL NOT DISCRIMINATE IN ADMISSION OF STUDENTS TO STUDY AT THE UNIVERSITY, ENROLL IN CLASSES, OBTAIN ON CAMPUS HOUSING, OR USE FACILITES BECAUSE OF RACE, COLOR, RELIGION, SEX, AGE, NATIONAL ORIGIN, DISABILITY (IF OTHERWISE QUALIFIED FOR ADMISSION), MILITARY/VETERAN STATUS, SEXUAL ORIENTATION, OR ANY OTHER STATUS PROTECTED BY FEDERAL, STATE, OR LOCAL LAW THE NON-DISCRIMINATION POLICY IS LISTED IN THE COURSE CATALOG, INCLUDED IN THE STUDENT HANDBOOK, AND LISTED ON THE UNIVERSITY'S WEBSITE
FINANCIAL AID FROM A GOVERNMENTAL AGENCY	SCHEDULE E, PART I, LINE 6A	THE UNIVERSITY RECEIVES FEDERAL FINANCIAL ASSISTANCE FROM THE DEPARTMENT OF EDUCATION FOR VARIOUS STUDENT FINANCIAL AID PROGRAMS

Schedule E (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493147007424

OMB No 1545-0047

2012

Open to Public Inspection

SCHEDULE F (Form 990) **Statement of Activities Outside the United States**

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

	e of the organization v University				Employer ident	ification number
	,, 5 111 (1310)				74-1109633	
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the cassistance, the grantees' eligible the grants or assistance?	jibility for the g	grants or assis	tance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fu	nds outside
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 and investments in region
	See Add'l Data			,		
3a	Sub-total					460,086
	Total from continuation sheets to Part I					460.00
<u> </u>	Totals (add lines 3a and 3b)					460,086

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nur	mber of other or	ganizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							appraisal, other)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> ~</u>	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	Į √	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)	١✓	Yes	Г	Νo
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)	<u> </u>	Yes	Г	Νo
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)	١✓	Yes	Г	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).	Г	Yes	▽	Νo

Schedule F (Form 990) 2012

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also co	mplete this part to provide any ad	ditional information (see instructions).
Identifier	ReturnReference	Explanation
DESCRIPTION OF PROGRAM SERVICES	F	REGION - CENTRAL AMERICA/CARIBBEAN FACULTY DEVELOPMENT 1,326 RESEARCH 15,818 STUDENT RECRUITMENT 4,750 INSTRUCTION 3,820 TOTAL 25,714 REGION - EAST ASIA & THE PACIFIC FACULTY DEVELOPMENT 8,226 RESEARCH 139,776 STUDENT RECRUITMENT 22,675 INSTRUCTION 9,862 TOTAL 180,539 REGION - EUROPE FACULTY DEVELOPMENT 47,555 RESEARCH 63,233 STUDENT RECRUITMENT 17,338 INSTRUCTION 27,383 TOTAL 155,509 REGION - MIDDLE EAST AND NORTH AFRICA RESEARCH 5,619 REGION - NORTH AMERICA FACULTY DEVELOPMENT 24,221 RESEARCH 11,954 STUDENT RECRUITMENT 6,400 TOTAL 42,575 REGION - RUSSIA/INDEPENDENT STATES RESEARCH 16,417 REGION - SOUTH AMERICA RESEARCH 2,495 STUDENT RECRUITMENT 15,779 FACULTY DEVELOPMENT 2,101 TOTAL 20,375 REGION - SOUTH ASIA STUDENT RECRUITMENT 12,998 REGION - SOUTH ASIA STUDENT RECRUITMENT 12,998 REGION -
-		
		Schodulo E (Form 990) 2012

Additional Data

Software ID: Software Version:

EIN: 74-1109633

Name: Trinity University

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	SEE PART V	25,714
East Asia and the Pacific			Program Services	SEE PART V	180,539
Europe (Including Iceland and Greenland)			Program Services	SEE PART V	155,509

Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
Middle East and North Africa			Program Services	SEE PART V	5,619						
North America			Program Services	SEE PART V	42,575						
Russia and the Newly Independent States			Program Services	SEE PART V	16,417						

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
South America			Program Services	SEE PART V	20,375					
South Asia			Program Services	SEE PART V	12,998					
Sub-Saharan Africa			Program Services	SEE PART V	340					

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

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

OMB No 1545-0047

DLN: 93493147007424

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Attach to Form 990

Inspection Employer identification number Trinity University 74-1109633 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (g) Description of (h) Purpose of grant (c) IRC Code (e) A mount of nonvaluation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNDERGRADUATE SCHOLARSHIPS	2092	36,601,311			
(2) GRADUATE SCHOLARSHIPS	93	1,701,221			
				1	

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
, ,	Procedures for Monitoring the Use of Grants	THE STUDENT'S STANDING IS MONITORED BY THE OFFICE OF STUDENT FINANCIAL SERVICES TO ENSURE THAT THEY REMAIN IN GOOD STANDING AND CONTINUE TO MEET ANY SPECIFIC REQUIREMENTS OF THE SCHOLARSHIP OR GRANT THE UNIVERSITY UNDERGOES AN AUDIT UNDER CIRCULAR A-133 TO AUDIT COMPLIANCE WITH FEDERAL FINANCIAL ASSISTANCE

Schedule I (Form 990) 2012

DLN: 93493147007424

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name	of the	e org	anıza:	tion
Frinity (Jniver	sity		

Employer identification number

74-1109633

Pai	rt 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					
	First-class or charter travel Housing allowance or residence for personal use					
	☐ Travel for companions ☐ Payments for business use of personal residence					
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)					
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 of 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?					
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III					
	▼ Compensation committee					
	✓ Independent compensation consultant ✓ Compensation survey or study					
	Form 990 of other organizations Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization					
а	Receive a severance payment or change-of-control payment?					
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
c						
	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					
а	The organization?	5a		Νo		
b	Any related organization?					
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					
а	The organization?	6a		Νo		
b	Any related organization?	6b		Νo		
	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		Νo		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe					
	ın Part III	8		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 duplicate copies if additional space is 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, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Dennis Ahlburg President	(i) (ii)	460,000 0	73,600 0	2,820	132,000	1,500 0	669,920 0	0
(2)Michael Fischer Vice President	(i) (ii)		0	6,920	40,421	9,563 0	295,674 0	0
(3)Charles White Vice President	(i) (ii)		0	3,858	20,165 0	6,324 0	233,324 0	0
(4)Phillip Cooley Prassel Distinguished Prof	(i) (ii)		0 0	380,742	12,136 0	1,262 0	516,762 0	0
(5)Gerald Pitts Caruth Distinguished Prof	(i) (ii)		0	262,614	7,912 0	5,460 0	360,564 0	0
(6)Mary Ann Tetreault Cox Professorship	(i) (ii)		0	247,072	9,234 0	3,145 0	354,938 0	0
(7)Gordon Macalpine Zilker Distinguished Prof	(i) (ii)		0 0	246,882	7,951 0	0	334,344 0	0
(8)John Howland Professor	(i) (ii)		0	212,123	8,198 0	0	302,551 0	0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

The complete the part of any additional information					
Identifier	Return Reference	Explanation			
Supplemental Compensation Information	Schedule J - Part I, Question 1a	THE UNIVERSITY'S TRAVEL POLICY REQUIRES "COACH OR ECONOMY" AIRFARE, WHEN APPROPRIATE, HOWEVER, THE PRESIDENT WILL TRAVEL FIRST CLASS MEMBERSHIP IN A CLUB IS PERMITTED FOR THE PRSIDENT FOR BUSINESS USE AS A CONDITION OF EMPLOYMENT, THE UNIVERSITY PROVIDES HOUSING TO THE PRESIDENT AND CERTAIN VICE PRESIDENTS THE APPROPRIATE AMOUNT IS INCLUDED IN COMPENSATION AND REPORTED ON FORM W-2			
Supplemental Nonqualified Retirement Plan	SCHEDULE J, PART I, QUESTION 4B	TRINITY UNIVERSITY'S 457 PLAN IS OFFERED TO THE PRESIDENT AND VICE PRESIDENT LEVEL EMPLOYEES ANNUAL CONTRIBUTIONS ARE LIMITED TO THE IRS MAXIMUM CONTRIBUTION AMOUNTS FOR EACH CALANDAR YEAR DENNIS AHLBURG \$107,000 MICHAEL FISCHER 17,000 MARK DETTERICK 17,000			

Schedule J (Form 990) 2012

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DLN: 93493147007424 OMB No 1545-0047

2012

Open to Public

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury

(Form 990)

	Inspection Employer identification number															
	e of the organization									Em	oloyer id	entifica	tion nur	nber		
1 / / / /	ity University					74-1109633									!	
Pa	rt I Bond Issues															
	!		I							(a) Do	(g) Defeased be			(i)	Pool	
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	orice	(f	f) Description	n of purpose	(g) De	reaseu		behalf of issuer		ncing	
 										Yes	No	Yes	No	Yes	No	
	CITY OF SAN ANTONIO				· · · · · · · · · · · · · · · · · · ·			DEFUNDING AND CARLEAU								
	TEXAS HIGHER ED FACILITIES CO	52-1351505	796247ba1	06-29-2011	20,31	6,444	REFU	REFUNDING AND CAPITAL EXPENDITURES			X		X		X	
			<u> </u>										<u> </u>			
Par	Proceeds				1											
	A mount of bonds retired					4	200	В	3		С			D		
1						20,000	,000							 		
2	A mount of bonds legally defea Total proceeds of issue						0									
3	Gross proceeds in reserve funds					20,316	5,444								!	
4	·						0									
5	Capitalized interest from proceeds						0									
6	Proceeds in refunding escrows						0									
7	Issuance costs from proceeds					316	,168									
8	Credit enhancement from proc						0									
9	Working capital expenditures f	<u> </u>				0										
10	Capital expenditures from prod	ceeds			0											
11	Other spent proceeds				20,000,276											
12	Other unspent proceeds						0									
13	Year of substantial completion	n			19	9 5										
					Yes	No)	Yes	No	Yes	N	lo	Yes		No	
14	Were the bonds issued as part	t of a current refundı	ing issue?		Х											
15	Were the bonds issued as part	t of an advance refu	nding issue?			Х										
16	Has the final allocation of proc	ceeds been made?			Х											
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?				Х											
Par	t IIII Private Business U								•			<u> </u>				
i						\		В У/	-		C	.		D		
	Was the organization a partner in a partnership, or a member of an LLC, which owned				Yes	No		Yes	No	Yes	l N	lo	Yes	+	No	
l <u></u>	property financed by tax-exempt bonds?					Х								\bot		

financed property?

Are there any lease arrangements that may result in private business use of bond-

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)		•						,	
				A		В		<u>C</u>	<u> </u>	D
-	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
3a	of bond-financed property?	business use		Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business use financed property?	e of bond-		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use b other than a section $501(c)(3)$ organization or a state or local government			0 00000%		%		%		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government			0 00000%		%		9/6		%
6	Total of lines 4 and 5			0 00000%		%		%	,	%
7	Does the bond issue meet the private security or payment test?									
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bon issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%	,	%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations : 1 141-12 and 1 145-2?	sections		х						
9	Has the organization established written procedures to ensure that all none bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?			х						
Par	t IV Arbitrage			1				•		'
		Α			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the Issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?		Х							
b	Exception to rebate?		Х							
c	No rebate due?		Χ							
	If you checked "No rebate due" in line $2c$, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
b	Name of provider	0								
С	Term of hedge				_					
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
_										

Part IV Arbitrage (Continued)

Identifier

Return Reference

		A		В		С		D		
		Yes	No	Yes	No	Yes	No	Yes	No	
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х							
b	Name of provider	0								
С	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
6	Were any gross proceeds invested beyond an available temporary period?		x							
7	Has the organization established written procedures to monitor the requirements of section 148?	Х								
Par	rt V Procedures To Undertake Corrective Action									
		Α		В	1	С		D		
		Yes	No	Yes	No	Yes	No	Yes	No	
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X								
Pa		provide addition	 al informati	on for respo	nses to ques	tions on Sche	edule K (see	ınst	ructions)	

Schedule K (Form 990) 2012

Explanation

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As Filed Data -

DLN: 93493147007424

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(Form 990 or 990-EZ)

Schedule L

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, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the orga Trinity University	nızatıon								-1109e	r identif	fication	numbei	•
							501(c)(4) or	ganıza	tions	only).			
1 (a) Name					Form 990, F between di		5a or 25b, or l (c) Descrip					d) Corr	ected?
					nd organızatı		(-,					res	No
2 5			<u> </u>										
2 Enter the am 4958	ount of ta	x incurre	o by organiza	ition mar	agers or dis	qualified perso	ons during the	year u	inder:	section \$ -			
3 Enter the am	nount of ta	x, ıf any,	on line 2, ab	ove, reım	bursed by th	e organizatior	1		•	F \$			
Part II Loa	ns to an	d/or F	rom Inter	ested F	Persons.								
			ation answere n amount on l				ine 38a, or Fo	rm 99	0, Par	t IV, lın	e 26, o	r ıf the	
(a) Name of	(b) Rela	tıonshıp	(c) Purpose	(d) Loa	an to	(e)O riginal			(g) In (h)		(i)Wr		
ınterested person	with orga	anızatıon	of loan	or from		principal amount	due	defa	ault?	A ppro			nent?
					T_					commi	1	ļ.,	T
				То	From			Yes	No	Yes	No	Yes	No
												- -	
												_	
												_	
												_	
Total				▶ \$		_							
			ce Benefit				t IV, line 27.						
(a) Name of inte		(b) Rel	ationship bet	tween		of assistance	(d) Type o		tance	(e)	Purpos	e of ass	stance
person			ted person ar organızatıon	nd the									
							•						
							-						
							_						
							-						

(a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Share	
between interested person of person and the organization organization transaction presonand the organization organization organization personand the organization organization prevenue.	tion's
Yes	No
(1) PHYLLIS BROWNING COMPANY TRUSTEE 69,000 SEE PART V	Νo

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
BUSINESS TRANSACTION WITH TRUSTEE		DONATED PROPERTY WAS SOLD UTILIZING PHYLLIS BROWNING COMPANY PHYLLIS BROWNING, OWNER, WAS A CURRENT BOARD MEMBER AND EARNED A 6% COMMISSION IN THE AMOUNT OF \$69,000

Schedule L (Form 990 or 990-EZ) 2012

DLN: 93493147007424

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Open to Public Inspection

	ne of the organization by University				Emplo	oyer identificat	ion nu	mber	
	, offiversity				74-1	109633			
Pa	art I Types of Property								
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	1	(d) Method of de ioncash contrib	etermi	_	ts
1	Art—Works of art	Х		67,791	SEE	PART II			
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 .								
10	Securities—Closely held stock .								
11	Securities—Partnership, LLC, or trust interests								
12	Securities—Miscellaneous								
13	Qualified conservation contribution—Historic structures								
14	Q ualified conservation contribution—O ther								
15	Real estate—Residential .	Х		105,000	SEE	PART II			
16	Real estate—Commercial								
17	Real estate—Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies .								
21	Taxıdermy								
22	Historical artifacts				<u> </u>				
23	Scientific specimens				<u> </u>				
24	Archeological artifacts								
25	O ther ▶ ()				<u> </u>				
26	O ther ►()				<u> </u>				
27	O ther ►()				<u> </u>				
	O ther ► ()								
29	Number of Forms 8283 received for which the organization comple				29			Г., Т	
30-	During the year, did the organiza	tion receiv	a by contribution any prope	arty reported in Part I lines	1_28	t that it		Yes	No
JUa									
	must hold for at least three year				: a to D	e useu			NI.
,	for exempt purposes for the entire				•		30a	\vdash	No
	If "Yes," describe the arrangeme								
	Does the organization have a gif						31	Yes	
32a	Does the organization hire or use contributions?	e third parti	ies or related organizations	to solicit, process, or sell	nonca ••••	sh • •	32a	Yes	
	If "Yes," describe in Part II If the organization did not report	: an amount	: in column (c) for a type of	property for which column	(a) is (checked.			
-			. ,			.,			

describe in Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
WORKS OF ART	SCHEDULE M, PART I, LINE 1, COL	APPRAISED VALUE
	, , , , , , , , , , , , , , , , , , , ,	SALE OF COMPARABLE PROPERTIES AND/OR INDEPENDENT APPRAISAL

Schedule M (Form 990) (2012)

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

2012

Open to Public Inspection

Name of the organization
Trinity University

Employer identification number

74-1109633

ldentifier	Return Reference	Explanation
Relationship between Board Members	Form 990, Part VI, Question 2	
REVIEW OF 990	FORM 990, PART VI, QUESTION 11B	THE FINAL 990 AND 990-T WILL BE SUBMITTED TO THE AUDIT COMMITTEE FOR ACCEPTANCE ONCE ACCE PTED, THE 990 WILL BE MADE ELECTRONICALLY AVAILABLE TO THE FULL BOARD DESCRIPTION OF PROC ESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST FORM 990, PART VI, QUESTION 12C A CO NFLICT OF INTEREST QUESTIONNAIRE IS DISTRIBUTED TO ALL BOARD MEMBERS ANNUALLY THE UNIVERS ITY'S INTERNAL AUDITOR MONITORS ENFORCEMENT OF THE POLICY AND REPORTS ON THE STATUS TO THE AUDIT COMMITTEE, BOARD, AND EXTERNAL AUDITORS
Offices & Positions for Which Process was Used, & Year Process was Begun	Form 990, Part VI, Questions 15a & 15b	ALL SALARIES AND WAGES, WITH THE EXCEPTION OF THE PRESIDENT'S, ARE RECOMMENDED BY THE DIVI SION VICE PRESIDENTS AND APPROVED BY THE PRESIDENT THE PRESIDENT'S COMPENSATION IS APPROVED BY THE BOARD BASED UPON A RECOMMENDATION OF THE COMPENSATION COMMITTEE, WHICH IS COMPRISED OF SELECT BOARD MEMBERS THE COMMITTEE USES COMPARABLE DATA PROVIDED BY AN EXTERNAL IN DEPENDENT CONSULTANT ENGAGED BY THE BOARD POSITIONS OTHER THAN THE PRESIDENT ARE CONTROLL ED BY A SALARY INCREASE POLICY SET ANNUALLY AND APPROVED BY THE BOARD
Avail of Gov Docs, Conflict of Interest Policy, & Fin Stmts to Gen Public	Form 990, Part VI, Question 19	THE UNIVERSITY'S FINANCIAL STATEMENT AUDIT AND FORM 990 ARE AVAILABLE ON THE UNIVERSITY'S WEBSITE AND ARE AVAILABLE IN HARD COPY FORM UPON REQUEST
Reconciliation of Net Assets	Form 990, Part XI, Line 9	Other changes in net assets Unrealized gain on investments held in trust by others \$25,55 9,589 Loss in value of split interest agreements (2,573,142)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R**

DLN: 93493147007424

2012

Open to Public

OMB No 1545-0047

Related Organizations and Unrelated Partnerships

(Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Trinity University

▶ 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.

> Inspection Employer identification number

> > 74-1109633

Part I Identification of Disregarded Entities (Com	plete if the organization	n answered "Yes" to	o Form 990, Part	IV, line 33.)				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income En	(e) d-of-year assets	(f) Direct controlling entity			
								_
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizations (Complete if g the tax year.)	the organization a	nswered "Yes" to	Form 990, Pa	ert IV, line 34 bed	cause it had	one	
(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 st (if section 501(c	tatus Direct con	trolling Sec y (13	(g) tion 512 3) contro entity?	olle
(1) GRETCHEN C NORTHRUP FOUNDATION	SUPPORT	TX	501(C)(3)	11-TYPE 1	NA	Ye		lo Vo
ONE TRINITY PLACE								
SAN ANTONIO, TX 78212 74-6294095								
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.	Cat No 501	35Y	•	Schedule	R (Form 990) 2012	_

	entification of Related (ause it had one or more r								zatıon ar	swered "\	res" to	Forn	າ 990, Part	IV, I	ine 3	4	
	(a) Name, address, and EIN related organization	l of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direc control entit	t Iing	(e) Predomir income(rei unrelate excluded tax und sections ! 514)	nant lated, ed, from der 512-	(f) Share of total incom	(g) Share of e end-of-yea assets	Disproj alloca	prtionate	(i) Code V—UBI amount in bo 20 of Schedule K-1 (Form 1065)	Gene x man pari	(j) eral or laging tner?	(k Percei owne	
											Yes	No		Yes	No		
	entification of Related (34 because it had one or										nswere	ed "Ye	s" to Form	990,	Part	t IV,	
	(a) , address, and EIN of ated organization	(b) Primary activity	(c) Lega domic (state or f countr	ile oreign		Direct of	(d) controlling ntity	Type (C cor	(e) of entity rp, S corp, trust)	(f) Share of tota Income		(g) are of er of-year assets		ntage		(i) Section (b)(13 controll entity	512 .3) lled
(1) ARSHAM CHARII REMAINDER TRUST	FABLE	SUPPORT				NA		TRUST	ī						\top	Yes	No
ONE TRINITY PLACE SAN ANTONIO, TX 7- 74-2870133	8212		ТХ														
(2) ROBERT L COOK CHARITABLE REMAIN UNITR		SUPPORT			I	AV		TRUST									
ONE TRINITY PLACE SAN ANTONIO, TX 7- 74-6405006	8212		TX														
(3) WHEETSEL CHAP REMAINDER UNITRU	RITABLE ST	SUPPORT			1	AV		TRUST	Г								
ONE TRINITY PLACE SAN ANTONIO, TX 7- 74-2870135	8212		TX														
(4) POOLED INCOME	FUND	SUPPORT			į.	NA		TRUST							\Box		
ONE TRINITY PLACE SAN ANTONIO, TX 7 74-6178316	8212		тх														

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

Yes

1 During the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?							
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				\vdash	Yes				
b Gift, grant, or capital contribution to related organization(s)				1b		No			
c Gift, grant, or capital contribution from related organization(s)				1c	Yes				
d Loans or loan guarantees to or for related organization(s)				1d		No			
e Loans or loan guarantees by related organization(s)				1e		No			
f Dividends from related organization(s)				1f					
g Sale of assets to related organization(s)				1g		No			
h Purchase of assets from related organization(s)				1h		No			
i Exchange of assets with related organization(s)				1i		No			
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No			
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No			
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
• Sharing of paid employees with related organization(s)	o Sharing of paid employees with related organization(s)								
p Reimbursement paid to related organization(s) for expenses				1p		No			
q Reimbursement paid by related organization(s) for expenses				1q		No			
r Other transfer of cash or property to related organization(s)				1r		No			
s Other transfer of cash or property from related organization(s)				1s		No			
2 If the answer to any of the above is "Yes," see the instructions for information on who must complet			and transaction thresholds						
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount in	ivolved				
1) GRETCHEN NORTHRUP FOUNDATION	С	299,713	SPENDING POLICY						
			Schedule R (Form	990) 2	012			

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

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 74-1109633

Name: Trinity University

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

Identifier Return Reference Explanation	Complete this part to pr	<u>ovide additional information for response</u>	es to questions on Schedule R (see instructions)	
			Explanation	

Software ID: **Software Version:**

> **EIN:** 74-1109633 Name: Trinity University

Form 990, Part VII - Compensation of Compensated Employees, and Indepe	Officers, Dir ndent Contra	ectors	Tru,	ıste	ees,	Key	En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an d	than pers office ctor/	not one on i r an trust	box s bot d a tee)	, th	I	(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
	hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
Sharon J Bell Honorary Vice Chair	1 0	Х		х						
Ted Beneski Trustee	1 0	X								
Walter Brown Jr Trustee	1 0	×								
Richard W Calvert Trustee	1 0	x								
Miles C Cortez Trustee	1 0	х								
James F Dicke II Trustee	1 0	х								
Douglas D Hawthorne Vice Chairman	1 0	х		х						
Tim Hixon Trustee	1 0	х								
Walter R Huntley Jr Trustee	1 0	х								
John R Hurd Trustee	1 0	х								
E Carey Joullian IV Trustee	1 0	х								
Rev Richard R Kannwischer Trustee	1 0	х								
Rıchard M Klegerg III Trustee	1 0	х								
Dr Katherine Wood Klinger Trustee	1 0	x								
John C Korbell Chairman	1 0	х		х						
Oliver T W Lee Trustee	1 0	×								
Steven P Mach Trustee	1 0	×								
Robert S McClane Trustee	1 0	X								
Melody Boone Meyer Trustee	1 0	Х								
Forrest E Miller Trustee	1 0	Х								
Marshall B Miller Jr Secretary	1 0	x		х						
Michael F Neidorff Trustee	1 0	х								
Barbara W Pierce Trustee	1 0	х								
Thomas R Semmes Treasurer	1 0	х		х						
Paul H Smith Trustee	1 0	х								

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

40 0

John Howland

Professor

Compensated Employees, and Indeper	ndent Contra	actors						1	ı		
(A) Name and Title	(B) Average hours per week (list		than	not one on is	box s bot d a	,		(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	
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations	
L Herbert Stumberg Jr Trustee	1 0	х									
Lissa Walls Vahldiek Trustee	1 0	х									
Dennis Ahlburg President	40 0			х				536,420	0	133,500	
Michael Fischer Vice President	40 0			х				245,690	0	49,984	
Charles White Vice President	40 0			х				206,835	0	26,489	
Lisa Baronio Vice President	40 0			х				117,446	0	9,737	
Gary Logan Vice President	40 0			х				97,500	0	11,425	
David Tuttle Associate Vice President	40 0			х				134,796	0	13,052	
Phillip Cooley Prassel Distinguished Prof	40 0					х		503,364	0	13,398	
Gerald Pitts Caruth Distinguished Prof	40 0					х		347,192	0	13,372	
Mary Ann Tetreault Cox Professorship	40 0					х		342,559	0	12,379	
Gordon Macalpine Zilker Distinguished Prof	40 0					х		326,393	0	7,951	

294,353

0

8,198