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DLN: 93493125017536

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A F	or the 20	14 cal	endar year, or tax year begi	nning 07-01-2014 , and endin	g 06-30-201	5	_		
B Ch	eck if appl	licable	C Name of organization Southwestern University				D Empl	oyer ideı	ntification number
☐ Ad	dress chan	ige	% BRENDA THOMPSON				74-1	233796	5
∏ Na	me change	e	Doing business as				1		
┌ In	tıal return						F Telent	none num	her
⊢ Fir	nal :urn/termin	nated	Number and street (or P O bo PO Box 770	x if mail is not delivered to street add	ress) Room/su	ute)863-1	
┌ An	nended reti	um		, country, and ZIP or foreign postal co	de		1		
Гар	plication pe	endıng	Georgetown, TX 786270770				G Gross	receipts \$	5 178,279,741
			F Name and address o Dr Edward Burger 1001 E University Ave	f principal officer		H(a) Is t	his a grou ordinates?		for
			Georgetown,TX 78626			H(b) Are	all subord uded?	lınates	┌ Yes ┌ No
I Ta	ıx-exempt	status	▽ 501(c)(3) □ 501(c) () ◀ (Insert no)	527	If"	No," attac	h a lıst	(see instructions)
J W	ebsite: Þ	► ww	w southwestern edu			H(c) Gro	oup exemp	tion nur	mber ►
K For	m of orgar	nızatıon	Corporation Trust Asso	ociation Cother 🕨		L Year of t	formation 1	875 M	State of legal domicile TX
Pa	rt I	Sum	mary						
Governance	Fo: <u>hu</u> 1	sterin manity	g a liberal arts educational o	ussion or most significant active community whose values and a community whose values are a community whose values and a community whose values and a community whose values are a community w	ctions encou				•
	2 (11	ieck ti	is box 🖣 if the organization	on discontinued its operations (or disposed (or more than	25% 0110		sets
Activities &				verning body (Part VI, line 1a)				3	40
Ě				pers of the governing body (Par				5	1 296
إ				d in calendar year 2014 (Part \ e if necessary)				6	1,386 1,184
٠.			·	om Part VIII, column (C), line 1			•	7a	306,740
				me from Form 990-T, line 34			: :	7b	0
				<u>, </u>			ior Year		Current Year
	8 (Contri	butions and grants (Part VI)	II, line 1h)			5,833	,781	11,019,832
ПE	9 1							,322	65,128,768
Rayenue	10	Invest	tment income (Part VIII, co	lumn (A), lines 3, 4, and 7d)			15,863	,617	11,719,268
ш	1		, ,	(A), lines 5, 6d, 8c, 9c, 10c, a	•		2,464	,713	1,639,597
				h 11 (must equal Part VIII, co		e	88,395	,433	89,507,465
				Part IX, column (A), lines 1–3			28,127		29,501,139
	14	Benefi	ts paid to or for members (P	art IX, column (A), line 4)			•	0	0
				ployee benefits (Part IX, colum	n (A), lines		34,365	.353	32,528,413
Expenses		5–10) Profes		t IX, column (A), line 11e).			0		0
æ⊕ X			ndraising expenses (Part IX, colum						
ш	17 (Other	expenses (Part IX, column	(A), lines 11a-11d, 11f-24e)			21,204	,879	21,286,156
				(must equal Part IX, column (A			83,697		83,315,708
	19 F	Reven	ue less expenses Subtract	line 18 from line 12			4,698	,197	6,191,757
Net Assets or Fund Bafances							ng of Curro Year	ent	End of Year
SS. Baka	1						395,241		390,628,492
38						•	35,212		34,275,889
			ssets or fund balances Subt ature Block	ract line 21 from line 20			360,029	,695	356,352,603
Unde my k	er penalti nowledge arer has	e and lany kr	perjury, I declare that I have belief, it is true, correct, and nowledge	e examined this return, includir i complete Declaration of prep included the preparation of prep		han officer) is			
			or print name and title	Preparer's signature	Ιr	Date Cr		PTIN	
Pai	d	s	Shannon A Rudisell	Shannon A Rudisell		se	neck ıf lf-employed	1 504 455	5967
	parer	F	rim's name 🕨 GRANT THORNTO	DN LLP		Fii	m's EIN 🟲		
	Only	F	irm's address ► 8300 THORN DRI	VE SUITE 300		Ph	one no (31	6) 265-32	231

WICHITA, KS 672262708

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

✓ Yes ☐ No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Νo
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 1	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
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
l1	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		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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		No
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	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L 6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
L7	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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
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 or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes	
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	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
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		No
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	Yes	
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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
4-	Estantla number respected in Day 2 of Farms 1000 Faton 0 of materialists.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 2,615 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a	Yes	
D	were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 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	
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI														. \to
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Se	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	40			
	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	1b	39			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management con	3		No		
4				4	Yes	
5	Did the organization become aware during the year of a significant diversion of the or	aanız	ration'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 more members of the governing body?		• •	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?	l by) ı	members, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written action 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	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, v organization's mailing address? If "Yes," provide the names and addresses in Schedule	who c	annot be reached at the			No
	organization's mailing aggress? It lifes, provide the hames and aggresses in Schedule			9		140
Se				_	ue Cod	
Se	ection B. Policies (This Section B requests information about policies not r			_	ue Cod Yes	
		requi		_		e.)
10a	ection B. Policies (This Section B requests information about policies not r	requi	ired by the Internal R s of such chapters,	Revenu		e.) No
10a b	Did the organization have local chapters, branches, or affiliates?	requi	ired by the Internal R s of such chapters, exempt purposes?	10a 10b		e.) No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	requi	ired by the Internal R s of such chapters, exempt purposes? erning body before filing	10a 10b	Yes	e.) No
10a b 11a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activa affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	requi	ired by the Internal R	10a 10b	Yes	e.) No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	requi	ired by the Internal R	10a 10b	Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activa affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a	Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activa affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes Yes	e.) No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes Yes	e.) No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activation affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisit independent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization follows.	requi	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes Yes	e.) No No

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)
 - 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, address, and telephone number of the person who possesses the organization's books and records ►BRENDA THOMPSON

1001 E UNIVERSITY AVE

Georgetown, TX 78626 (512)863-1956

Form 990 (2014)	
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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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
--	-----------------------	---------------------------------------	--	---	-----	------------------

Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more t perso and a	han d n ıs l	ne l both	box, an d	fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations	Individual trustee or director	Institutional Trustee	. ~	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	▶			
d	Total (add lines 1b and 1c)	►	1,820,505	0	422,046
u	Total (add lines 10 and 10)		1,020,303	Ŭ	122,0

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►26

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

Section B. Independent Contractors

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

· · · · · · · · · · · · · · · · · · ·	, -	•
(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO SERVICES TEXAS LLP, 1001 E UNIVERSITY AVE GEORGETOWN, TX 78626	FOOD SERVICES	2,372,331
BARTLETT COCKE GENERAL CONTRACTORS, 7901 E RIVERSIDE DR BLDG 2 STE 1 AUSTIN, TX 78744	CONSTRUCTION	964,736
FORE CONSTRUCTION, 150 TEXAS AVE SUITE 100 ROUND ROCK, TX 78664	CONSTRUCTION	812,589
GROUP TWO ARCHITECTURE Inc, 1801 S MOPAC EXPY SUITE 350 AUSTIN, TX 78746	ARCH & DESIGN SVCS	594,869
IES, 33 W MONROE ST SUITE 2300 CHICAGO, IL 60603	STUDY ABROAD PROGRAM	529,124
2 Total number of independent contractors (including but not limited to thos	se listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►16

		Check if Schedu	f Revenue ile O contains a respor	nse or note to any lin	e in this Part VIII			
	1a	Federated camp			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts				2 700				
Contributions, Giffs, Grants and Other Similar Amounts	Ь	Membership du						
s, G Am	С	Fundraising eve	ents 1c	38,735				
itts ar	d	Related organiz	ations 1d					
s, C mil	e	Government grants	(contributions) 1e	530,833				
itions er Si	f	All other contribution	ns, gifts, grants, and 1f t included above	10,447,564				
itribu I Oth	g	Noncash contribution	ons included in lines	1,468,247	İ		i	
Cont and	h	Total. Add lines	1a-1f	🙀	11,019,832			
				Business Code				
nue	2a	TUITION & FEES		611310	53,825,511	53,825,511		
e, ke	ь	AUXILIARY ENTERP	RISES	713910	11,303,257	10,816,363	486,894	
èВ	c			,13310	11,555,257	10,010,303	100,007	
rwc	d							
8	e e							
Iran	f	All other progra	m service revenue					
Program Service Revenue	g		2a-2f	<u> </u>	65,128,768			
	3		ome (including dividen		03,120,700			
		and other simila	aramounts)	•	7,617,778		-183,840	7,801,618
	4	Income from invest	tment of tax-exempt bond	proceeds	0			
	5	Royalties		🏲	0			
	_		(ı) Real	(II) Personal				
	_	Gross rents Less rental	17,342 21,861					
	Ь	expenses	·					
	С	Rental income or (loss)	-4,519	0				
	d	Net rental incor	me or (loss)		-4,519			-4,519
		[(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	92,836,260	0				
	ь	than inventory Less cost or other basis and	88,708,437	26,333				
		sales expenses		,				
	C	Gain or (loss)	4,127,823	-26,333				
	d	Net gain or (los		· · · · •	4,101,490			4,101,490
Other Kevenue	8a	T	uding 735 reported on line 1c) e 18					
- U	Ь	Lace direct over	oenses b	13,004				
Ę	C		loss) from fundraising	15,645 events .	-2,641			-2,641
J	9a		om gaming activities		, -			,
	ь	Less direct exp	penses b					
			ا loss) from gamıng actı	vities	0			
	10a	Gross sales of I						
			a					
		Less cost of go						
	С		loss) from sales of inve		0			
	<u> </u>	Miscellaneous		Business Code	253,500	353 500		
	11a b	MCCOMBS KIT	CHEN	611710 811310	253,500	253,500 250,000		
		EQUIPMENT						
	C	CAR REGISTRA	ATION FEES	812930	235,500	235,500		
	d	All other revenu			907,757	904,071	3,686	
	e	Total. Add lines	11a-11d		1,646,757			
			See Instructions .	_				

Part IX Statement of Functional Expenses

section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colur
--

<u>Jecti</u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
	Check if Schedule O contains a response or note to any line in this	Part IX	(B)		<u> </u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	29,361,441	29,361,441		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	139,698	139,698		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,555,216	587,724	897,137	70,355
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	25,443,526	20,061,800	4,670,294	711,432
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,520,131	1,203,329	267,685	49,117
9	Other employee benefits	2,114,151	4,264,962	-2,224,867	74,056
10	Payroll taxes	1,895,389	1,449,189	396,675	49,525
11	Fees for services (non-employees)				<u> </u>
а	Management	0			
ь	Legal	178,729		178,729	
c	Accounting	168,774		168,774	
d	Lobbying	0		·	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	3,747,432		3,747,432	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,662,145	2,352,772	308,402	971
12	Advertising and promotion	8,678	8,678		
13	Office expenses	883,402	566,756	279,477	37,169
14	Information technology	1,035,110	190,315	842,103	2,692
15	Royalties	0	,	·	·
16	Occupancy	2,506,177	2,284,943	210,328	10,906
17	Travel	1,137,336	1,006,948	92,691	37,697
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2,000,510	52,031	3,,03,
19	Conferences, conventions, and meetings	218,395	65,863	148,829	3,703
20	Interest	324,129	282,932	38,975	2,222
21	Payments to affiliates	0	,	,	,
22	Depreciation, depletion, and amortization	3,017,858	2,657,274	339,719	20,865
23	Insurance	682,679	338,494	342,285	1,900
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	LIBRARY SUPPORT	726,455	726,455		
b	MAINTENANCE & FACILITIES	534,564	438,852	92,279	3,433
С	ATHLETICS	480,450	478,312	2,138	
d	RESEARCH/SPONSORED PROJECTS	440,038	408,355	31,683	
e	All other expenses	2,533,805	1,362,351	1,038,472	132,982
25	Total functional expenses. Add lines 1 through 24e	83,315,708	70,237,443	11,869,240	1,209,025
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)	, =-,,	,,	, 00 , 00 0	, ,,,,,

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in	this	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			689,676	1	980,041
	2	Savings and temporary cash investments			26,786,043	2	33,280,807
	3	Pledges and grants receivable, net			6,210,340	3	3,048,560
	4	Accounts receivable, net			5,294,610	4	5,046,017
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete F Schedule L	0	5	0		
ŧs	6	Loans and other receivables from other disqualified persons (4958(f)(1)), persons described in section 4958(c)(3)(B), and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	conti emplo	ibuting employers		6	0
Assets	7	Notes and loans receivable, net			659,966		541,534
Ą	8	Inventories for sale or use			192,168	8	198,373
	9	Prepaid expenses and deferred charges			937,952	9	683,210
	10a	Land, buildings, and equipment cost or other basis		 I	957,952	9	000,210
		Complete Part VI of Schedule D	10a	195,629,701			
	b	Less accumulated depreciation	10b		100,233,773	10c	98,898,082
	11	Investments—publicly traded securities			248,093,294	11	234,772,421
	12	Investments—other securities See Part IV, line 11			5,043,051	12	4,931,452
	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			1,100,998	15	8,247,995
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			395,241,871	16	390,628,492
	17	Accounts payable and accrued expenses			5,885,731	17	7,258,755
	18	Grants payable			3,279,360		3,317,292
	19	Deferred revenue			1,717,840	19	1,625,713
	20	Tax-exempt bond liabilities			4,065,000	20	3,905,000
S	21	Escrow or custodial account liability Complete Part IV of Sch			0	21	0
Liabiliti∈	22	Loans and other payables to current and former officers, directively employees, highest compensated employees, and disqua		trustees,			
<u> </u>		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parti	es .	•	10,000,000	23	9,836,637
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete P	art X	of Schedule			
		D			10,264,245	25	8,332,492
	26	Total liabilities. Add lines 17 through 25			35,212,176	26	34,275,889
ě		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	▼ aı	nd complete			
an	27	Unrestricted net assets			102,296,310	27	116,375,373
	28	Temporarily restricted net assets			177,412,017	28	153,432,847
Ξ	29	Permanently restricted net assets			80,321,368	29	86,544,383
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here 🕨	+ ┌ and			
ō	30	Capital stock or trust principal, or current funds	_			30	
G	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Assets or	32	Retained earnings, endowment, accumulated income, or other				32	
7 ₩	33	Total net assets or fund balances			360,029,695	33	356,352,603
Net		Total liabilities and net assets/fund balances			, ,		
	34	i otal navinties and net assets/fund balances			395,241,871	34	390,628,492

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				্. ৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		89,!	507,465
2	Total expenses (must equal Part IX, column (A), line 25)	2			315,708
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			91,757
5	Net unrealized gains (losses) on investments	4			29,695
6	Donated services and use of facilities	5		-8,2	234,854
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1 6	33,995
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			352,603
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ┌
				Yes	No
1	Accounting method used to prepare the Form 990				
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 revi a separate basis, consolidated basis, or both	ewed o	n		
	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 Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne 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 t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 74-1233796

Name: Southwestern University

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

(Code) (Expenses \$	7,017,081	including grants of \$) (Revenue \$	11,303,257)
Auxiliary Enterprises					

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	(B) Average ours per eek (list ny hours and a direction			ox, ι an o ⁄trus	ınless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/2033 112007	2,1033 1130)	related organizations
(1) Daryl M Allen	1 7	x						0	0	0
Trustee	0 0	^						Ů		
(1) Richard H Bachmann	1 7	×						0	0	0
Trustee (2) Mary Delmore Balagia	0 0						_			
		х						0	0	0
Trustee, Term September 2014 (3) L James Bankston	0 0									
Trustee	0 0	X						0	0	0
(4) Suzanne Blake	1 4									
Trustee	0 0	Х						0	0	0
(5) W Earl Bledsoe	1 4	х						0	0	0
Trustee	0 0							Ů	Ů	
(6) Tim Bruster	1 4	X						0	0	0
Trustee (7) Pam Slaughter Bush	0 0									
		×						0	0	0
Trustee (8) John S Curry	0 0									
Trustee	0 0	×						0	0	0
(9) James E Dorff	1 4									
Trustee	0 0	×						0	0	0
(10) Robert W Dupuy Trustee	1 4	х						0	0	0
(11) Jack Garey	1 4	х						0	0	0
Trustee (12) Roberto L Gomez	0 0									
Trustee	0 0	X						0	0	0
(13) Robert H Graham	17	х						0	0	0
Trustee	0 0	_ ^						Ů		
(14) Kay Granger	1 4	l x						0	0	0
Trustee (15) Lorry 1 Houses	0 0									
(15) Larry J Haynes	1 4	×						0	0	0
Trustee (16) Ronald D Henderson	0 0									
Trustee	0 0	х						0	0	0
(17) Janice Riggle Huie	1 4									
Trustee	0 0	×						0	0	0
(18) Jean Janssen	1 4	х						0	0	0
Trustee	0 0	_ ^						0	0	0
(19) Henry C Joyner	1 7	l x		X				0	0	0
Trustee & Vice Chair (20) Robert W Karr	0 0									
Trustee & Chair	0 0	х		х				0	0	0
(21) R Griffin Lord	1 7	x		х				0	0	0
Trustee & Sec/Treas (22) J Michael Lowry	0 0			_			_			
		х						0	0	0
Trustee (23) Red McCombs	0 0									
Trustee	0 0	х						0	0	0
(24) Michael McKee	1 4									_
Trustee	0 0	Х						0	0	0

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and				
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-14130)	2/1099-11130)	related organizations
(26) Mary Medley	1 4	x						0	0	0
Trustee (1) Laura A Merrill	0 0									
		x						0	0	0
Trustee (2) Merriman Morton	0 0									
Trustee	0 0	X						0	0	0
(3) Ernesto Nieto	1 4	х						0	0	0
Trustee	0 0							Ů		
(4) Austin Painchaud	1 4	x						0	0	0
Trustee (5) Steven A Raben	0 0									
Trustee	0 0	X						0	0	0
(6) Robert T Rork Trustee	1 7	х						0	0	0
(7) Pete Sessions	1 4	x						0	0	0
Trustee (8) Thomas V Shockley III	0 0							_	_	
Trustee	0 0	x						0	0	0
(9) H Blake Stanford	1 4									
Trustee	0 0	Х						0	0	0
(10) Dan R Stultz Trustee	1 4	х						0	0	0
(11) Stephen G Tipps Trustee	1 4	х						0	0	0
(12) Donald W Underwood	1 4	х						0	0	0
Trustee (13) James V Walzel	0 0									
Trustee	0 0	X						0	0	0
(14) Kathryn Yeager Trustee	1 4	x						0	0	0
(15) Edward Burger	40 0	x		х				298,898	0	229,537
Trustee & President (16) Richard L Anderson	0 0 40 0									
VP of Fiscal Affairs	0 0			х				222,488	0	25,857
(17) Craig Erwin	40 0							151 110		
Associate VP of Finance	0 0			X				151,440	0	20,331
(18) James W Hunt Provost/Dean of Faculty	40 0				×			219,816	0	23,335
(19) Gerald D Brody	40 0				х			164 102	0	25 270
VP of Student Life	0 0							164,103	0	25,370
(20) Pamela A McQuesten VP of Info Services & CIO	40 0					х		210,406	0	26,046
(21) Paul J Gaffney Dean Sarofim School Fine Arts	40 0					х		147,431	0	19,708
(22) C Richard McKelvey	40 0					х		143,105	0	14,601
VP Institutional Advancement (23) Kent Huntsman	40 0									
Interim VP for Univ Relations (24) Glada Munt	0 0					Х		134,878	0	20,912
AVP/Dir Intercoll Athletics	0 0					х		127,940	0	16,349
, Sir andressi ramedes		<u> </u>					1	l	<u> </u>	<u> </u>

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DLN: 93493125017536

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		ne organization 1 University			Employer Identification number								
South	Westerr	Tomversity					74-1233796						
Pa	rt I	Reason for Publi	ic Charity S	Status (All organiza	itions must co	mplete this p		ons.					
The	organı	zation is not a private f	oundation bec	ause it is (For lines 1	through 11, ch	eck only one b	ox)						
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	o)(1)(A)(i).						
2	<u>~</u>	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)								
3	\sqcap	A hospital or a coopei	ratıve hospıtal	service organization	described in sec	tion 170(b)(1)	(A)(iii).						
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state											
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by a	a governmental unit d	escribed in					
	•	section 170(b)(1)(A)			,	,							
6	Г			t or governmental unit	described in s e	ection 170(b)(1	I)(A)(v).						
7	Ţ.	An organization that r	_	_				ieneral public					
-	'	_	•	vi). (Complete Part II	• •	om a goronina	incar anne or morn and g	,0					
8	Γ	A community trust de	scribed in sec	tion 170(b)(1)(A)(vi)	(Complete Par	tII)							
9	Γ	An organization that r	ormally receiv	ves (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross					
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions, a	ind (2) no more than 3	331/3% of					
		its support from gross	ınvestment ır	ncome and unrelated b	usiness taxable	e income (less	section 511 tax) from	businesses					
		acquired by the organ	ızatıon after Jı	une 30, 1975 See sec	tion 509(a)(2).	(Complete Pai	rt III)						
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ety See sectio i	า 509(a)(4).						
11	Γ	An organization organ	ized and opera	ated exclusively for th	e benefit of, to p	erform the fund	ctions of, or to carry o	ut the purposes of					
				nızatıons described in	•								
_	_	the box in lines 11a th											
а	ı			perated, supervised, o to regularly appoint o									
			• • •	rt IV, Sections A and	-	cy or the uncer	ors or crustees or the	Supporting					
b	Γ	Type II. A supporting	organization s	supervised or controlle	d in connection	• • •							
		=		nization vested in the	same persons t	hat control or r	nanage the supported	organization(s) You					
_	_	must complete Part I	•	ons A and C. ted. A supporting organization operated in connection with, and functionally integrated with, its									
С	ı							grated with, its					
d	Γ		nization(s) (see instructions). You must complete Part IV, Sections A, D, and E. nctionally integrated. A supporting organization operated in connection with its supported organization(s) that										
				anızatıon generally mu			ement and an attentiv	eness requirement					
	_			ete Part IV, Sections A			T I T II T						
е	,			eceived a written deter ially integrated suppor			s a rype r, rype rr, r	ype III functionally					
f		- , ,		nizations									
g				out the supported orga									
_				3	. ,								
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of					
		organızatıon		organization	listed in your		monetary support	other support (see					
	(described on lines document?					ent?	(see instructions)	instructions)					
	1- 9 above or IRC section (see instructions))												
					Yes	No							
								_					
		· · · · · · · · · · · · · · · · · · ·											

supported organization

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 10,747,779 13,188,700 14,192,031 5,833,781 5,908,932 49,871,223 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 10,747,779 13,188,700 14,192,031 5,833,781 5,908,932 49,871,223 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 16,624,883 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 33,246,340 from line 4 Section B. Total Support Calendar year (or fiscal year (e) 2014 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (f) Total beginning in) 🟲 10,747,779 13,188,700 14,192,031 5,833,781 Amounts from line 4 5,908,932 49,871,223 Gross income from interest, dividends, payments received on securities loans, rents, royalties 9,185,639 6,458,148 7,011,468 9,537,736 7,818,960 40,011,951 and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 20,069 6,121 5.724 20,290 13,004 65,208 capital assets (Explain in Part VI) 11 Total support Add lines 7 89,948,382 through 10 12 Gross receipts from related activities, etc (see instructions) 299,026,078 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 36 962 % Public support percentage for 2013 Schedule A, Part II, line 14 15 36 524 % 16a 33 1/3% support test-2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2014 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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 31 and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493125017536

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

me of the organization		Employer identification number
uthwestern University		74-1233796
	or Advised Funds or Other Similar	
organization answered "Yes" to For		(h) Funda and ather accounts
Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
Aggregate value of contributions to (during yea	5)	+
Aggregate value of contributions to (during year) Aggregate value of grants from (during year)	1)	
Aggregate value at end of year		
Did the organization inform all donors and dono funds are the organization's property, subject t	to the organization's exclusive legal control?	☐ Yes ☐ No
Did the organization inform all grantees, donors used only for charitable purposes and not for the conferring impermissible private benefit?	ne benefit of the donor or donor advisor, or for	r any other purpose Yes No
rt II Conservation Easements. Com	plete if the organization answered "Yes	" to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e g , red Protection of natural habitat Preservation of open space	creation or education) Preservation of	an historically important land area a certified historic structure
Complete lines 2a through 2d if the organization	up hald a qualified concentration contribution	in the form of a concentration
easement on the last day of the tax year	m neid a quaimed conservation contribution i	iii the form of a conservation
		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation ease	ments	2b
Number of conservation easements on a certifi	ed historic structure included in (a)	2c
Number of conservation easements included in historic structure listed in the National Registe		2d
Number of conservation easements modified, t	ransferred, released, extinguished, or termina	ated by the organization during
the tax year ►		
Number of states where property subject to co	nservation easement is located 🕨	
Does the organization have a written policy reg enforcement of the conservation easements it	parding the periodic monitoring, inspection, h	andling of violations, and
Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation eas	sements during the year
*		
Amount of expenses incurred in monitoring, ins	specting, and enforcing conservation easeme	ents during the year
▶ \$		
Does each conservation easement reported on and section 170(h)(4)(B)(II)?	line 2(d) above satisfy the requirements of s	Section 170(h)(4)(B)(i) Yes No
In Part XIII, describe how the organization rep balance sheet, and include, if applicable, the te the organization's accounting for conservation	ext of the footnote to the organization's financ	
Tt III Organizations Maintaining Collection Complete if the organization answer	ections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8.	
If the organization elected, as permitted under works of art, historical treasures, or other simil service, provide, in Part XIII, the text of the fo	lar assets held for public exhibition, educatio	on, or research in furtherance of public
If the organization elected, as permitted under works of art, historical treasures, or other simil service, provide the following amounts relating	SFAS 116 (ASC 958), to report in its revenular assets held for public exhibition, educatio	ue statement and balance sheet
(i) Revenue included in Form 990, Part VIII, li	ine 1	► \$
(ii) Assets included in Form 990, Part X		3,801,950
If the organization received or held works of art following amounts required to be reported unde		s for financial gain, provide the
Revenue included in Form 990, Part VIII, line	•	▶ \$
Assets included in Form 990. Part X		▶ ¢

Part	Organizations Maintaining Co	llections of Art	t, Hist	torica	l Treas	ures, or Oth	er Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	ds, ch		•	_	-	e of its
а	Public exhibition		d	Г	oan or exc	change prograr	ns	
b	Scholarly research		е	Γ	ther			
c	Preservation for future generations							
4	Provide a description of the organization's c Part XIII	ollections and expla	ain how	they f	urther the	organızatıon's	exempt purpose	ın
5	During the year, did the organization solicit						ımılar	F., F.,
Door	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrange						"Vas" to Farm (Yes V No
Pell	Part IV, line 9, or reported an air					ni aliswereu	res to rollin	990,
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					or other asset	s not	┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ıng tab	le		•	
								nount
с	Beginning balance					10		
d	Additions during the year					10	-	
e •	Distributions during the year					16		
f	Ending balance	000 0 000	. 54			11		
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21, t	or esci	ow or cus	todial account	liability?	☐ Yes ☐ No
ь	If "Yes," explain the arrangement in Part XI							<u>'</u>
Pa	rt V Endowment Funds. Complete	(a)Current year		wered rior yeai			art IV, line 10. d)Three years back	(e)Four years back
1a	Beginning of year balance	265,590,566	(5)	252,949		250,622,946	268,982,899	241,783,693
ь	Contributions	6,251,460		603	,835	2,165,441	745,477	3,579,072
С	Net investment earnings, gains, and losses	-1,257,862		32,668	376	18,954,236	-6,611,292	36,381,338
d	Grants or scholarships	14,703,758		15,115	 	11,494,038	12,176,057	13,711,328
e	Other expenditures for facilities and programs	-75,000		5,515	,642	7,298,948	318,081	-950,124
f	Administrative expenses							
g	End of year balance	255,955,406		265,590	,566	252,949,637	250,622,946	268,982,899
2	Provide the estimated percentage of the cur	·	ce (line	e 1g, c	olumn (a))	held as		
а	Board designated or quasi-endowment 🕨	10 710 %						
b	Permanent endowment ► 33 637 %							
C	Temporarily restricted endowment ► 55 The percentages in lines 2a, 2b, and 2c sho	653 % uld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiz	ation t	hat are	held and	admınıstered f	or the	
	organization by (i) unrelated organizations						3a	Yes No (i) Yes
	(ii) related organizations						3a(
b	If "Yes" to 3a(II), are the related organization		d on S	chedul	e R? .		3	
4	Describe in Part XIII the intended uses of t	he organızatıon's en	dowme	ent fund	ds			
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		the or	ganız	ation ans	wered 'Yes' t	o Form 990, Pa	art IV, line
	Description of property	10.			st or other nvestment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	d (d) Book value
1a					6,455,893	111,5	09	6,567,402
	Buildings				2, .00,000	139,108,8		
	Leasehold improvements					427,0	 	
d	Equipment					32,214,9	41 27,220,19	4,994,744
	Other	<u> </u>	•			17,311,3	78 13,349,75	3,961,619
Tota	I. Add lines 1a through 1e <i>(Column (d) must o</i>	equal Form 990, Part	X, colui	mn (B),	line 10(c).	.)		98,898,082
							Schedule I	O (Form 990) 2014

Part VII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to Form 990), Part IV, line 11b.
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	t value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	+		
Part VIII Investments—Program Related. C	Complete if the organization	n answered 'Yes' to Form 99	90, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation	 n
	(-,	Cost or end-of-year market	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organization			
(a) Desc	ription	(1	b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line			
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	janization answered 'Yes'	to Form 990, Part IV, line 11	le or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
ACCRUED POST RETIREMENT BENEFITS	8,117,746		
DEFERRED COMPENSATION	214,746		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	8 ,332,492		
2 Liability for uncortain tay positions. In Bart VIII. provi	d - 41 - 4	.h	

Part X		Revenue per Audited Financial Statements With Revenue p wered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete if
1 7		er support per audited financial statements	1	
		ut not on Form 990, Part VIII, line 12		
a l	Net unrealized gains (losses)	on investments		
b [Donated services and use of	facilities		
c F	Recoveries of prior year gran	ts 2c		
)		
e /	Add lines 2a through 2d		2e	
3 9	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line 1		
a I	nvestment expenses not inc	luded on Form 990, Part VIII, line 7b . 4a		
b (Other (Describe in Part XIII)		
c A	Add lines 4a and 4b .	· 	4c	
5 7	Fotal revenue Add lines 3 ar	d 4c. (This must equal Form 990, Part I, line 12)	5	
Part X		Expenses per Audited Financial Statements With Expenses nswered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1 T		er audited financial statements	1	
2 /	Amounts included on line 1 b	ut not on Form 990, Part IX, line 25		
a [Donated services and use of	facilities		
b F	Prior year adjustments	2b		
c (Otherlosses	2c		
d (Other (Describe in Part XIII)		
e A	Add lines 2a through 2d .		2e	
3 9	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 99	90, Part IX, line 25, but not on line 1:		
a I	nvestment expenses not inc	luded on Form 990, Part VIII, line 7b 4a		
b (Other (Describe in Part XIII)		
c A	Add lines 4a and 4b		4c	
		and 4c. (This must equal Form 990, Part I, line 18)	5	
Part X	Supplemental In	formation		
	line 4, Part X, line 2, Part X	r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
Schedule	e D, Part III, Line 4	Description of Organization's Collections Southwestern University has 19 Special Collections of the A Frank Smith, Jr Library Center that contain papers, maps, and manuscripts that are maintained for historical purpose student educational research	a varie	ety of books, records,
Schedule D, Part V, Line 4		Intended Uses of Endowment Funds Southwestern University endowment endowment funds and board-designated funds functioning as endowment endowments are used only as the donors intended per the donor restriction funds support general program services of the University	funds	All donor restricted
Schedule D, Part X, Line 2		Liability for Uncertain Tax Positions (ASC 740) The University claims ex tax under Section 501(c)(3) of the Internal Revenue Code The University income tax and other information returns as required by government auth concluded that it does not have any unrecognized tax benefits resulting from tax positions Accordingly, no additional disclosures have been made on statements regarding uncertain tax provisions	y files orities om cu	unrelated business The University has urrent or prior period

Jenedale 2 (1 31111 33 3) 23 13		1 age 3		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493125017536

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

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

Open to Public Inspection

outh	western University	0.6		
Pa	rt I 74-12337		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, other governing instrument, or in a resolution of its governing body?	bylaws,	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media the period of solicitation for students, or during the registration period if it has no solicitation program, in a that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "I please explain If you need more space use Part II	way	Yes	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?		Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscrin basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealin with student admissions, programs, and scholarships?	g 4c	Yes	
C	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
5	If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		Νo
Ŀ	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	<u>5d</u>		Νo
€	e Educational policies?	5e		Νo
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
ŀ	Other extracurricular activities?	5h_		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	_
	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	1405		No
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Part II	7	ا مما	i

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

Return Reference	Explanation
Schedule E, Part I, Line 3	Publication of Racially Nondiscriminatory Policy An annual notice is published in the following newspapers. Williamson County Sun, Austin American Statesman, Houston Chronicle, and Dallas Morning News. Policies are included in all student, faculty, and staff handbooks.
Schedule E, Part I, Line 6a	Government Assistance The University receives financial aid from both the federal government and the State of Texas, which is awarded to students using the Department of Education methodology. The main federal financial assistance programs for students include. Federal Direct Loans, Federal Perkins Loans, Federal Pell Grants, Federal Work-Study, and Federal SEOG. The main state financial assistance grant is the Tuition Equalization Grant. The University also receives federal financial assistance for academic grants and research.

Schedule E (Form 990 or 990-EZ) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493125017536

OMB No 1545-0047

2014

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. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

(5)

3a Sub-total

to Part I

b Total from continuation sheets

c Totals (add lines 3a and 3b)

Name of the organization

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection Employer identification number**

Sou	thwestern University					
Pa	General Informati "Yes" to Form 990, P			ne United States. Co	74-1233796 omplete if the organiz	ation answered
1	For grantmakers. Does the and other assistance, the gused to award the grants or	rantees' eligibil	ity for the grar	nts or assistance, and	the selection criteria	✓ Yes
2	For grantmakers. Describe assistance outside the Unit		ganızatıon's p	rocedures for monitori	ng the use of its grant	s and other
3	Activites per Region (The follo	owing Part I, line 3	3 table can be d	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
(1) See Add'l Data			,		
(2	2)					
(3	3)					
(4	!)					

6

260,332

260,332

Schedule F (Form 990) 2014

Pa				i zations or Entitie ived more than \$5,0		•	9		to Form 990,
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are ro or counsel has pro					
3	Enter total num	nber of other or	ganizations or ent	ities					

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)
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
		1		1	ı	Sched	ule F (Form 990) 2014

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	₽	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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; do not file with Form 990)	Γ	Yes	্ব	Νo
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)	দ	Yes	Γ	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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	্ব	Yes	Γ	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)	্ব	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: do not file with Form 990)	Г	Yes	٦	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2	Procedure for Monitoring Use of Grant Funds Outside U.S. All students at Southwestern University are required to apply for the study abroad program at The Office of Intercultural Learning Students then meet with the Director of Intercultural Learning to discuss their major, eligibility, best options and goals, and to identify the appropriate study abroad program Both the Office of Financial Aid and the Office of Intercultural learning meet to review all the students accepted in the study abroad program and to determine financial aid eligibility. Scholarships are awarded to the students based on financial need and particilipation in approved programs. The Office of Financial Aid and its operations are subject to internal control review by the University's external auditors as part of the financial statement audit. Funds are also monitored by the review and oversight of Senior Management, Senior Staff, the Vice President of Enrollment Services, and the Business Office, all of which are under the purview of the Audit Committee and the Fiscal Affairs Committee of the Board of Trustees. Payments for certain scholarships are made directly to the institutions sponsoring the study abroad program. Payments related to the Paideia program are made to the students on a reimbursement basis. Students are required to complete a request for reimbursement that includes the approval/signature from an assigned faculty mentor and attach proof of prior payment of study abroad expenses. The forms are then reviewed by the Assistant Dean of Faculty Development and Sponsored Projects and the Assistant Controller before processed for payment. Payments for faculty members' room and board related to study abroad programs were made by the Controller via wire transfer directly to the owner of the reintal property. Southwestern University's method of accounting for these expenditures includes using different account numbers to track some of the different study abroad programs, scholarships expenses, and all foreign travel.

Additional Data

Software ID: Software Version:

EIN: 74-1233796

Name: Southwestern 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			Grantmakıng		4,378
East Asia and the Pacific			Grantmakıng		1,000
Europe (Including Iceland and Greenland)			Grantmaking		45,820

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ties Outside T</u>	he 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
North America			Grantmakıng		856
South America			Grantmakıng		7,120
South Asia			Grantmaking		1,190

Form 990 Schedule F	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						
Europe (Including Iceland and Greenland)		6	Program Services	Study Abroad Program	120,634						
East Asia and the Pacific			Program Services	Research	3,807						
Europe (Including Iceland and Greenland)			Program Services	Research	24,063						

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he 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
North America			Program Services	Research	4,903
South America			Program Services	Research	27,236
South Asia			Program Services	Research	14,855

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					
Sub-Saharan Africa			Program Services	Research	4,470					

form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S	
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Form 990 Schedule F F	<u> art III - Grants al</u>	<u>nu Assistance</u>	e to individuals o	utside The U.S			_
(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)
KAHLER STUDY ABROAD SCHOLARSHIP	Central America and the Caribbean	1	3,000	CHECK			
KAHLER STUDY ABROAD SCHOLARSHIP	Europe (Including Iceland and Greenland)	8	18,750	CHECK			
LOKEY SCH FOR STUDY ABROAD	Central America and the Caribbean	1	388	CHECK			
LOKEY SCH FOR STUDY ABROAD	Europe (Including Iceland and Greenland)	11	6,082	CHECK			
LOKEY SCH FOR STUDY ABROAD	South America	6	3,530	CHECK			
JAKE AND JANE SCHRUM PAIDEIA SCHOLARSHIP	Central America and the Caribbean	1	990	CHECK			
JAKE AND JANE SCHRUM PAIDEIA SCHOLARSHIP	East Asia and the Pacific	1	1,000	CHECK			
JAKE AND JANE SCHRUM PAIDEIA SCHOLARSHIP	Europe (Including Iceland and Greenland)	15	12,230	CHECK			
JAKE AND JANE SCHRUM PAIDEIA SCHOLARSHIP	South America	3	2,590	CHECK			
JAKE AND JANE SCHRUM PAIDEIA SCHOLARSHIP	South Asia	1	1,190	CHECK			

Form 990 Schedule F P	art III - Grants ar	nd Assistance	e to Individuals	Outside The U S	

<u> Form 990 Schedule F F</u>	<u> Part III - Grants a</u>	<u>nd Assistance</u>	e to Individuals C	utside The U.S			
(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)
PAIDEIA SCHOLARSHIP	Europe (Including Iceland and Greenland)	7	6,481	CHECK			
PAIDEIA SCHOLARSHIP	North America	1	856	CHECK			
PAIDEIA SCHOLARSHIP	South America	3	1,000	CHECK			
STUDY ABROAD SCHOLARSHIP	Europe (Including Iceland and Greenland)	2	2,277	CHECK			
FACULTY/STAFF DEVELOPMENT AND RESEARCH	East Asia and the Pacific	2	3,807	CHECK OR CC			
FACULTY/STAFF DEVELOPMENT AND RESEARCH	Europe (Including Iceland and Greenland)	10	24,063	CHECK OR CC			
FACULTY/STAFF DEVELOPMENT AND RESEARCH	North America	4	4,903	CHECK OR CC			
FACULTY/STAFF DEVELOPMENT AND RESEARCH	South America	2	3,343	CHECK OR CC			
FACULTY/STAFF DEVELOPMENT AND RESEARCH	South Asia	1	776	CHECK OR CC			
FACULTY/STAFF DEVELOPMENT AND RESEARCH	Sub-Saharan Africa	1	4,470	CHECK OR CC			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(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)
FACULTY/STAFF PRIVATE GRANTS	South America	1	1,224	CHECK OR CC			
FACULTY/STAFF PRIVATE GRANTS	South Asia	1	14,079	CHECK OR CC			
FACULTY/STAFF FEDERAL GRANTS	South America	1	22,669	CHECK OR CC			

DLN: 93493125017536

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

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

Supplemental Information Regarding

Attach to Form 990 or Form 990-EZ. ► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

					74-1233796	
rt I Fundraising Activ filers are not requir			ganızatıo	n answered "Yes" to	Form 990, Part IV,	line 17. Form 990-E
Indicate whether the organ	ızatıon raısed funds	through a	ny of the f	following activities Che	eck all that apply	
Mail solicitations			e	Solicitation of non	-government grants	
Internet and email soli	citations		f	☐ Solicitation of gov	ernment grants	
Phone solicitations			g	Special fundraisin	g events	
In-person solicitations						
Did the organization have a or key employees listed in						Г _{Yes} Г
If "Yes," list the ten highes to be compensated at least			fundraisei	rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundraı cust con	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No No			
al			<u> </u>			
List all states in which the cregistration or licensing	organization is regis	tered or li	censed to	solicit contributions o	r has been notified it is	exempt from

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi							
			(a) Event #1 Jameson 5K (event type)	(b) Event #2 Pirate Golf (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))				
⊈	1	Gross receipts	21,295		,	51,739				
Revenue	2	Less Contributions	19,576							
 	3	Gross income (line 1 minus line 2)	1,719							
	4	Cash prizes								
	5	Noncash prizes	469	9	79	548				
nse.	6	Rent/facility costs		3,500	2,560	6,060				
Expenses	7	Food and beverages .		2,160	1,416	3,576				
Direct B	8	Entertainment								
Ĕ	9	Other direct expenses .	4,331	292	838	5,461				
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(15,645)				
	11	Net income summary Subtract lii				-2,641				
Par	t III			"Yes" to Form 990, Pa	rt IV, line 19, or repo					
Revenue		\$15,000 on Form 990-EZ, lir	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
		Cash prizes								
Expenses	3	Non-cash prizes								
	4	Rent/facility costs								
Direct	5	Other direct expenses								
	6	Volunteer labor	┌ Yes <u>%</u>	┌ Yes%	Yes %					
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)	•					
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)						
9 a b										
10a b	Nere any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes									

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3				
11	Does the organization conduct gaming	activities with nonm	nembers?	┌ _{Yes}	Γ _{No}				
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity						
	formed to administer charitable gaming	,,		┌ Yes	Γ _{No}				
13	Indicate the percentage of gaming acti	vities conducted in							
а	The organization's facility				%				
b	An outside facility				%				
14	Enter the name and address of the pers	on who prepares the	e organization's gaming/special events books and records						
	Name 🕨								
	Address ►								
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming						
134				┌ _{Yes}	┌ No				
b	If "Yes," enter the amount of gaming revenue received by the organization 🟲 \$ and the amount of gaming revenue retained by the third party 🟲 \$								
С	If "Yes," enter name and address of th	e third party							
	Name 🟲								
	Address ►								
16	Gaming manager information								
	Name 🟲								
	Gaming manager compensation 🟲 \$								
	Description of services provided								
	Director/officer	_ Employee	☐ Independent contractor						
17	Mandatory distributions								
а	Is the organization required under stat	e law to make charıt	table distributions from the gaming proceeds to						
	retain the state gaming license? $$. $$.			Γ_{Yes}	┌ No				
b	Enter the amount of distributions requi	red under state law o	distributed to other exempt organizations or spent						
	ın the organization's own exempt activ								
Pa			xplanations required by Part I, line 2b, columns (iii) 7b, as applicable. Also provide any additional inform						
	Return Reference		Explanation						
		<u> </u>							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493125017536 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Southwestern University 74-1233796 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. 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. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other)

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

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

Part III Grants and Other Assistance to Domestic Individuals. 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
See Addıtıonal Data Table					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Explanation								
Schedule I, Part I, Line 2	Procedure for Monitoring Use of Grant Funds Inside U S The University made need-based and merit-based grants and scholarships to 1,525 students in fiscal 2014, totaling \$29,191,733 Additionally, the University awards various federal, state, and private scholarship, loan, and student work programs as part of its overall financial aid program. The University uses the Department of Education methodology to determine family need for awarding need-based awards. Merit-based awards are determined based on various academic (GPA, rank in class, etc.) as well as other qualitative measures. It is the responsibility of the Financial Aid office to ensure compliance with federal and state regulations on financial aid, and the University policy and internal control objectives. The financial aid office and its operations are subject to internal control review by the University's external auditors as part of the annual financial statement audit. Additional monitoring is also provided through the review and oversight of Senior Management, Senior Staff, the Vice-President of Enrollment Services, and the Business Office, all of which are under the purview of the Audit Committee and the Board of Trustees' Fiscal Affairs Committee. Additionally, the University's awarding and management of financial aid awards is subject to an annual Single Audit (Circular A-133) and State of Texas audits (for various state financial aid programs). Results of these audits are reported to the University Senior Staff, the Board of Trustees' Audit Committee, and the Board of Trustees Fiscal Affairs Committee.								

Software ID: **Software Version:**

EIN: 74-1233796

Name: Southwestern University

Form 990 Schedule I Part III Grants and Other Assistance to Domestic Individuals

(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
MOOD SCHOLAR AWARD	432	7,594,809			
RUTER SCHOLAR AWARD	449	6,773,631			
CODY SCHOLAR AWARD	123	2,618,024			
PIRATE AWARD	206	2,376,821			
FEDERAL PELL GRANT	417	1,815,689			
BARCUS SCHOLARSHIP	69	896,964			
FINCH SCHOLARSHIP	51	840,041			
SOUTHWESTERN GRANT	396	735,011			
EQUALIZATION GRANT	196	620,874			
DISTINCTION AWARD	253	618,366			
FACULTY/STAFF SCHOLARSHIP	20	517,770			
WILLIAM & ABBIE ALLEN SCHOLARSHIP	51	433,241			
HYER SCHOLARSHIP	34	349,500			
BROWN SCHOLARSHIP	11	345,329			
DISTINCTION BONUS AWARD	178	320,949			

(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
PRESIDENT'S ACHIEVEMENT SCHOLARSHIP	28	295,260			
TUITION EXCHANGE SCHOLARSHIP	8	244,575			
AP/IB RECOGNITION AWARD	168	227,286			
ROCKWELL SCHOLARSHIP	45	218,022			
SAROFIM SCHOLAR AWARD-MUSIC	8	185,000			
JONES SCHOLARSHIP FOR MEN & WOMEN	30	178,467			
UPWARD BOUND SCHOLARSHIP	5	162,540			
FEDERAL SUPPLEMENTAL GRANT	185	138,945			
FINE ARTS DISTINCTION AWARD-MUSIC	21	109,000			
OUT OF STATE EQUALIZATION GRANT	31	104,400			
CULLEN ENDOWED SCHOLARSHIP	20	100,046			
SAROFIM SCHOLAR AWARD-ART	5	97,000			
PHI THETA KAPPA RECOGNITION AWARD	31	84,050			
SU SCHOLARSHIP (NEED BASED)	49	82,714			
HATTON SUMNERS SCHOLARSHIP	8	75,000			

(a)Type of grant or assistance	(b)Number of	(c)A mount of	(d)A mount of	(e)Method of valuation (book,	(f)Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	1
					<u> </u>
SU SCHOLARSHIP	10	72,904			
BILATERAL TUITION EXCHANGE SCHOLARSHIP	2	72,240			
JOHN SMITH CAIN ENDOWED SCHOLARSHIP	9	71,325			
FINE ARTS DISTINCTION AWARD- THEATRE	13	63,750			
TL NORA DOUGLAS END SCHOLARSHIP	10	61,548			
BISHOP ERNEST T DIXON SCHOLARSHIP	34	60,559			
JENNIE TAPP PRE-MINISTERIAL SCHOLARSHIP	4	59,356			
JNR SCORE, II ESTATE SCHOLARSHIP	5	58,021			
SAROFIM SCHOLAR AWARD-THEATRE	3	58,000			
GOODRICH SCHOLARSHIP	8	55,921			
PRESIDENT'S ACHIEVEMENT AWARD	10	55,529			
SU MUSIC PERFORMANCE GRANT	32	54,850			
PARTNERSHIP GRANT	39	45,500			
GEORGE SALLADAY SCHOLARSHIP	9	41,297			
TUMCA-RUTER SCHOLAR AWARD	3	41,139			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(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		
SUPPLEMENTAL GRANT	76	38,574					
FINE ARTS DISTINCTION AWARD-ART	8	37,000		1			
FRANCES LOVE-RUTER	3	36,055					
BENEFICIARY GRANT	8	36,000		1			
MD ANDERSON PRE-MED SCHOLARSHIP	11	33,585		1			
SU MUSIC SCHOLARSHIP	7	32,000					
JUDGE MARVIN JONES SCHOLARSHIP	6	31,808		1			
BROTHER & SISTER GREEN SCHOLARSHIP	4	31,516					
LUCILLE L FOWLER-MOOD SCHOLAR AWARD	2	30,835					
C HOWARD/E CRAWFORD SCHOLARSHIP	4	30,447					
WILLIAM GROGAN LORD SCHOLARSHIP	6	27,679					
BISHOP JOE & ZOE WILSON SCHOLARSHIP	2	27,440					
OP HAIRGROVE-CODY SCHOLARSHIP	1	26,000					
DAVID W CARTER JR SCHOLARSHIP	9	25,295					
WILL MANN RICHARDSON SCHOLARSHIP	4	25,148					
			•				

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(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		
SU YELLOW RIBBON SCHOLARSHIP	10	23,844					
OP HAIRGROVE EDU TRUST SCHOLARSHIP	1	23,000					
JRA CARROLL END SCHOLARSHIP	6	22,754					
DAVIDSON FAMILY SCHOLARSHIP	6	22,586					
SOUTHLAND PAPER SCHOLARSHIP	5	21,502					
PAULA PEARCE SCHOLARSHIP	7	20,609					
HOWARD SIDES-MOOD SCHOLARSHIP	2	20,500					
JENNIE TAPP-RUTER SCHOLARSHIP	2	20,315					
KEMPER FOUNDATION SCHOLARSHIP	4	20,100					
NATIONAL MERIT COMMENDED SCHOLAR RECOGNITION AWARD	23	19,915					
VERA M BARRETT BRITT MUSIC SCHOLARSHIP	3	19,013					
GEORGE FOUNDATION-MOOD SCHOLARSHIP	1	19,000					
NATIONAL MERIT SCHOLARSHIP	10	19,000					
HURST MEMORIAL/SCIENCE SCHOLARSHIP	8	17,849					
JOHN SCORE ENDOWED SCHOLARSHIP	1	17,352					
	I I		1	I I			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(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		
SW SCOTT ENDOWED SCHOLARSHIP	4	17,214					
JEAN SHOLARS HALL SCHOLARSHIP	2	17,118					
L FITZGERALD SHAW SCHOLARSHIP	5	17,112					
PAULINE LEWIS STILES-CODY SCHOLARSHIP	1	17,005					
HYMAN ENDOWED SCHOLARSHIP	3	16,957					
LARRY HANKS SCHOLARSHIP	2	16,924					
HERMAN BROWN SCHOLARSHIP	3	16,501					
LUCILE L FOWLER-CODY SCHOLARSHIP	1	16,374					
EMILY BELL GIBSON-BARCUS SCHOLARSHIP	1	16,000					
WILLIAM RANDOLPH HEARST SCHOLARSHIP	8	15,337					
FRANCES LOVE SCHOLARSHIP	5	15,026					
LATIMER & KATHRYN MURFEE E SCHOLARSHIP	5	14,840					
ALICE PRATT BROWN SCHOLARSHIP	3	13,587					
FEAGIN SCHOLARSHIP	1	13,008					
JENNIE TAPP-MOOD SCHOLAR AWARD	1	13,000					
		'	'	'			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(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		
BRYAN HANKS SCHOLARSHIP	4	12,928					
WILLIAM STAMPS FARISH SCHOLARSHIP	2	12,279					
ALLEN G & JANE D ROE-RUTER SCHOLARSHIP	1	11,842					
HOWARD SIDES SCHOLARSHIP	8	11,506					
JOHN D RICHARDS SCHOLARSHIP	9	11,456					
RALPH E WHITMORE SCHOLARSHIP	3	11,275					
NATIONAL HISPANIC SCHOLAR RECOGNITION AWARD	6	11,000					
CHANCE-KREUGER FAMILY ENDOWED SCHOLARSHIP	7	10,911					
LUCY BEDINGER FINCH SCHOLARSHIP	3	10,895					
GEORGE FOUNDATION SCHOLARSHIP	3	10,680					
JANICE G ONSTOTT SCHOLARSHIP	4	10,433					
MARY SHIPP & SAMUEL C SANDERS SCHOLARSHIP	5	10,421					
ERNEST ROPER PRE-MINISTERIAL MOOD SCHOLARSHIP	1	10,368					
KAHLER STUDY ABROAD SCHOLARSHIP	2	10,250					
INTERNATIONAL DISTINCTION AWARD	2	10,000					
	'		•				

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. (a) Type of grant or assistance (b) Number of (c) A mount of (d) A mount of (e) Method of valuation (book, (f) Description of non-cash assistance								
(a)Type of grant or assistance	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	(T)Description of non-cash assistance			
PAULINE L STILES PRE-MINISTERIAL SCHOLARSHIP	1	10,000						
TUMCA - PIRATE AWARD	1	10,000						
EMILY BELL BIBSON FUND-RUTER SCHOLARSHIP	1	9,678						
JOHN L & GAYL BRADFIELD SCHOLARSHIP	4	9,673						
ORGAIN MEMORIAL SCHOLARSHIP	3	9,659						
CLASS OF 1942 SCHOLARSHIP	1	9,432						
KAPPA SIGMA IOTA SCHOLARSHIP	1	9,397						
ORGAIN MEMORIAL-MOOD SCHOLARSHIP	1	9,320						
TUMCA-SOUTHWESTERN GRANT	1	9,109						
ROE FAMILY ENDOWED SCHOLARSHIP	1	9,096						
HOWARD SIDES-RUTER SCHOLARSHIP	1	9,000						
MARION MALLARD/LANGUAGES SCHOLARSHIP	1	8,713						
DOUG AND NELL BENOLD SCHOLARSHIP	2	8,488						
TOUCHSTONE-JORDAN SCHOLARSHIP	2	8,282						
JOHN & GEORGIA WHEELER SCHOLARSHIP	2	8,016						

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(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		
HISPANIC LEADERSHIP & SERVICE AWARD	3	7,914					
DAN RATHER SCHOLARSHIP	2	7,781					
HOWARD SIDES-BARCUS SCHOLARSHIP	1	7,500					
HOWARD SIDES-PIRATE AWARD	1	7,500					
FAIRY C ROPER SCHOLARSHIP	1	7,167					
KEITH & MARY DAVIS SCHOLARSHIP	2	7,014					
W CLYDE BLUNDELL SCHOLARSHIP	2	7,000					
GEORGE W PIRTLE SCHOLARSHIP	3	6,793					
WA & NB CRAVEN SCHOLARSHIP	3	6,734					
MILDRED & WALTER CUMMINGS ENDOWED SCHOLARSHIP	3	6,710					
ENRON FOUNDATION SCHOLARSHIP	3	6,533					
JUDGE RICHARD CRITZ SCHOLARSHIP	1	6,339					
NATIONAL HISPANIC INSTITUTE SCHOLARSHIP	4	6,330					
CHINQUAPIN SCHOOL SCHOLARSHIP	1	6,316					
CONSOLIDATED SCHOLARSHIP	2	6,231					
	•		1				

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.							
(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		
MINNIE HOWELL SCHOLARSHIP	1	6,200					
LUCY KING BROWN SCHOLARSHIP	2	6,170					
GODBEY MEMORIAL-PIRATE AWARD	1	6,079					
MARY MERLE HILL-PIRATE AWARD	1	6,016					
HOWARD SIDES-DISTINCTION AWARD	2	6,000					
TUMCA - BENEFICARY GRANT	1	6,000					
READER'S DIGEST SCHOLARSHIP	1	5,958					
MARY MANN RICHARDSON SCHOLARSHIP	1	5,924					
CARL BURKHART JR-MOOD SCHOLARSHIP	1	5,866					
PRES JNR & RS SCORE SCHOLARSHIP	1	5,837					
GEORGE R BROWN SCHOLARSHIP	2	5,815					
WILL E ORGAIN SCHOLARSHIP	2	5,775					
M & SV DONIGAN SCHOLARSHIP	3	5,766					
GEORGE FOUNDATION-RUTER SCHOLARSHIP	1	5,763					
MCPHAIL MEMORIAL SCHOLARSHIP	1	5,657					
	1		1	1			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.								
(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			
JENNIE TAPP-CODY SCHOLARSHIP AWARD	1	5,622						
DARE MEMORIAL PRE-MINISTERIAL SCHOLARSHIP	1	5,533						
JOSEPH B BRAMLETTE SCHOLARSHIP	4	5,505						
LOYAL & NEXA ELMS SCHOLARSHIP	1	5,492						
WALTER E WEAVER-PIRATE SCHOLARSHIP	1	5,420						
ATKINS MATH SCHOLARSHIP	4	5,388						
MARTHA AND HENRY MCMICHAEL SCHOLARSHIP	2	5,207						
JAYSN JAMESON SCHOLARSHIP	3	5,114						
ALMA THOMAS FOUNDATION SCHOLARSHIP	1	5,000						
SU ART SCHOLARSHIP	1	5,000						
UNITED METHODIST DOLLARS FOR SCHOLARS AWARD	2	5,000						
OTHER SCHOLARSHIPS	268	412,712						
	I I		1	'				

DLN: 93493125017536

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. Department of the Treasury

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Compensation Information

Open to Public Inspection

Name of the organization Southwestern University

Employer identification number

74-1233796

			174-1233790			
Pa	rt I Questions Regarding Compensatio	n			Т	
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	고	Health or social club dues or initiation fees			
	Discretionary spending account	굣	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	hat apply				
	✓ Compensation committee	Γ	Written employment contract			
	☐ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	it?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		No
ь	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described i					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	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	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	incentive reportable		benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 Edward Burger, Trustee & President	(i) (ii)	273,254 0	0	25,644 0	109,333 0	131,417 0	539,648 0	0 0
2 Richard L Anderson, VP of Fiscal Affairs	(i) (ii)	222,488	0	0	15,749 0	10,436 0	248,673 0	0 0
3 Craig Erwin, Associate VP of Finance	(i) (ii)	151,440 0	0	0	10,832	9,936	172,208	0
4 James W Hunt, Provost/Dean of Faculty	(i) (ii)	219,816	0	0	15,435 0	8,336 0	243,587	0 0
5 Gerald D Brody, VP of Student Life	(i) (ii)	164,103	0	0	11,745 0	14,062 0	189,910 0	0 0
6 Pamela A McQuesten, VP of Info Services & CIO	(i) (ii)	210,406	0 0	0 0	14,921 0	11,562 0	236,889	0
7 Paul J Gaffney, Dean Sarofim School Fine Arts	(i) (ii)	147,431 0	0	0	9,800	10,344 0	167,575	0
8 C Richard McKelvey, VP Institutional Advancement	(i) (ii)	113,105 0	0	30,000	7,880 0	6,943	157,928 0	0
9 Kent Huntsman, Interim VP for Univ Relations	(i) (ii)	134,878 0	0	0	9,786 0	11,454 0	156,118	0

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

7 130 complete this part for any date	
Return Reference	Explanation
Schedule J, Part I, Line 1a	Housing Allowance or Residence For Personal Use The University requires the President to reside in the Turner Fleming House, located on campus, for the convenience of the University, as part of his employment contract with the University The Turner Fleming House is used by the President for personal residence, hosting various meetings and business-related social events and other University functions. The University provides housekeeping, grounds keeping, and maintenance service consistent with other University buildings. The valuation for personal usage of the Turner Fleming House, as reported in housing allowance on Schedule J, Part II, Column (d), nontaxable benefits, includes the estimated fair market rental value, utilities, housekeeping, and grounds keeping services. Tax Indemnification And Gross-Up Payments. The University reimburses certain officers and key employees for income tax obligations related to university social and club dues. These gross-up payments are treated as taxable compensation and reported on IRS Form W-2. Health or Social Club Dues Or Initiation Fees. The University provides a country club membership and other social club memberships for the President of the University. These memberships are used primarily for hosting guests during fundraising meetings and other business related meetings. University-provided memberships are treated as taxable compensation and reported on IRS Form W-2. Personal Services. The University provides housekeeping and ground sevices for the President's home. The value of these services is included in the President's housing allowance on Schedule J, Part II, Column (d), nontaxable benefits.
Schedule J, Part I, Line 4a	Voluntary Separation Agreement Rick McKelvey received an additional amount of \$30,000 on his final payment in June 2014
Schedule J, Part I, Line 4b	Supplemental Nonqualified Retirement Plan President Burger participated in a 457(f) plan - For calendar year 2014, University Contributions were \$32,259 and personal contributions were \$58,883

Schedule J (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 74-1233796

Name: Southwestern University

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		(i) Base Compensation	(ii) Bonus & (iii) Other other deferred bene		benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990		
Edward Burger, Trustee & President	(I) (II)	273,254	0	25,644 0	109,333 0	131,417 0	539,648 0	0	
Richard L Anderson, VP of Fiscal Affairs	(I) (II)	222,488	0	0	15,749 0	10,436 0	248,673 0	0	
Craig Erwin, Associate VP of Finance	(I) (II)	151,440	0	0	10,832	9,936 0	172,208 0	0	
James W Hunt, Provost/Dean of Faculty	(I) (II)	219,816	0 0	0 0	15,435 0	8,336 0	243,587 0	0	
Gerald D Brody, VP of Student Life	(I) (II)	164,103 0	0 0	0 0	11,745 0	14,062 0	189,910 0	0	
Pamela A McQuesten, VP of Info Services & CIO	(I) (II)	210,406	0 0	0 0	14,921 0	11,562 0	236,889 0	0 0	
Paul J Gaffney, Dean Sarofim School Fine Arts	(I) (II)	147,431 0	0 0	0 0	9,800 0	10,344 0	167,575 0	0	
C Richard McKelvey, VP Institutional Advancement	(I) (II)	113,105 0	0	30,000 0	7,880 0	6,943 0	157,928 0	0	
Kent Huntsman, Interim VP for Univ Relations	(I) (II)	1	0 0	0 0	9,786 0	11,454 0	156,118 0	0	

(Form 990)

Department of the Treasury

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.

►Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

DLN: 93493125017536

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** Southwestern University 74-1233796 Part I Bond Issues (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No Riesel Education Facilities 08-11-2006 Х Х 20-5312407 5,000,000 Construct on-campus housing Corporation **Proceeds** Part II C Α В D Amount of bonds retired 0 Amount of bonds legally defeased 2 0 Total proceeds of issue 3 5.000.000 Gross proceeds in reserve funds 4 5 Capitalized interest from proceeds 0 Proceeds in refunding escrows 6 Issuance costs from proceeds 53,150 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 4,946,850 Other spent proceeds 11 Other unspent proceeds 12 0 Year of substantial completion 13 2008 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Χ 15 Has the final allocation of proceeds been made? Χ 16 Does the organization maintain adequate books and records to support the final Χ allocation of proceeds? **Private Business Use** Part III Α В C D Yes No No No No Yes Yes Yes Was the organization a partner in a partnership, or a member of an LLC, which owned Χ property financed by tax-exempt bonds?

financed property?

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

Χ

Par	Private Business Use (Continuea)						_			
				١	В			c		D
		J	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private bus of bond-financed property?			X						
b	b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?									
С	Are there any research agreements that may result in private business use of financed property?	bond-		×						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or oth outside counsel to review any research agreements relating to the financed pr									
4	other than a section 501(c)(3) organization or a state or local government			0 %		•		'		,
5	Enter the percentage of financed property used in a private business use as a unrelated trade or business activity carried on by your organization, another s 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disp	posed of						•		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?			Х						
9	Has the organization established written procedures to ensure that all nonqual bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?			х						
Par	t IV Arbitrage									
		Α			В		С		D	
		Yes	No	Yes	No		⁄es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		×							
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?		Х							
b	Exception to rebate?	Х								
С	No rebate due?		Х							
	If "Yes" to 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									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									

Pai	rt IV Arbitrage (Continued)								
	<u> </u>	Δ.	\	В		C	С		
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
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?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?	х							
Pa	rt V Procedures To Undertake Corrective Action	•							
		Δ	1	В	3	C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	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	х							

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Schedule K (Form 990) 2014

DLN: 93493125017536

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Open to Public Inspection

Name of the organization Southwestern University									Employer identification number				
	,									33796			
						section 501(c						4.01	
	plete if the o ne of disquali				on Form 990, hip between c	Part IV, line	25a or 25b, o (c) Desc					<u>40b</u> (d) Cor	rostod?
1 (a) Nam	ie oi uisquaii	illed per	5011 (0)		and organiza		(c) Desi	Tiption	UI LI a	iisactio	" -	Yes	No
				•								163	140
4958 .	amount of ta nd/or Fro ne organization	x, if any m Int on answ m 990,	on line 2, erested F vered "Yes"	Persons on Form 9 5, 6, or 2	mbursed by to	squalified per the organizati V, line 38a, o	on	 	, line :	▶ \$	f the organical of the	anızatıoı (i)Wrı agreen	tten
pe.55			10411	or gamza						commi			
				То	From			Yes	No	Yes	No	Yes	No
			L	l								ı	ı
Total			▶ \$										
					nterested			7					
(a) Name of i	nterested	(b) Re	elationship l sted person organizatio	between and the		orm 990, Pa			ıstano	:e (e	e) Purpos	se of ass	sistance
(1)		Studen	ts	_		12,04	0 Tuition Rei	mis		Ed	ucation		_
(2)		Studen	ts			58,00	58,000 Scholarships E		Ed	Education			

Part IV	Business Transactions Involving Interested Persons.
	Complete if the organization answered "Ves" on Form 990 B

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.								
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	: :ation's			
				Yes	No			
(1) Lisa Anderson	Shouse of Officer	40 537	Employment		No			

Part V	Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
	Schedule I (Form 990 or 990-E7) 2014

DLN: 93493125017536

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Southwestern University

Employer identification number

74-1233796 Part T Types of Property

	TET Types of Property				
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures .				
3	Art—Fractional Interests				
4	Books and publications	X		27	\$1 or value stated
	Clothing and household				-
	goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded .	Х		1,452,020	high-low avg
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential .				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies .				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
	Other► (Х	5	2,294	Value stated
	l Donations)				
	Other►(pment)	X	3	489	\$1 or value stated
	Other►(X	22	13417	\$1 or value stated
2, Othe	•	_ ^		15,417	prorvatue stated
28	Other ► ()				
29	Number of Forms 8283 received by th	e organızat	ion during the tax year for		
	for which the organization completed F	orm 8283,	Part IV, Donee Acknowled	dgement 29	0
					Yes No
30a	During the year, did the organization i				
	it must hold for at least three years fr		·	, and which is not required	I to be used
	for exempt purposes for the entire hol	ding period	[?]		· · · · 30a No
b	If "Yes," describe the arrangement in	Part II			
31	Does the organization have a gift acc				
32a	Does the organization hire or use thir contributions?	d parties or	related organizations to s	olicit, process, or sell noi	ncash • • • 32a Yes
ь 33	If "Yes," describe in Part II If the organization did not report an a describe in Part II	mount in co	lumn (c) for a type of prop	erty for which column (a)	

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.					
Return Reference Explanation					
Schedule M, Line 32B	Third Party Assistance of Noncash Contributions Regions Bank is the custodial bank of Southwestern University Gifts of securities are transferred by the donor to various brokers hired by the University The brokers then contact the controller at Southwestern University to inform her of the gift receipt Southwestern then instructs the brokers to sell the securities at current market value. The proceeds from the sale are transferred to the University's operating, restricted, or endowment accounts for use				

in accordance with the donor's restriction, if any

Schedule M (Form 990) (2014)

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As Filed Data -

DLN: 93493125017536

OMB No 1545-0047

2014

Open to Public Inspection

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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

Name of the organization
Southwestern University

Employer identification number
74-1233796

Return Reference	Explanation
Form 990, Part III, Line 4d	Other Program Services Other program services include auxiliary enterprises, including student residential center operations and food service operations. Approximately 75% of the student body lives on campus in residential centers. Residential centers include living/learning centers which integrate classroom and other experiences into the residential environment. Food service is provided primarily for residential and non-residential student usage, faculty, staff, and guests of the university. Auxiliary enterprise expenses include depreciation, interest, and physical plant expense allocations. Other program services include various student, faculty, and staff campus services, such as the post office, information technology, help desk, network support, and other similar services, as well as various other essential program services in support of the primary academic mission of the university. Total auxiliary enterprise revenue and expenses are \$11,303,257 and \$7,017,081, respectively. Form 990, Part VI, Line 1a Delegation of Authority All trustees elected to the Board of Trustees have the same voting rights. In between scheduled meetings of the trustees, the University's Bylaw's empower the Executive Committee of the Board of Trustees, have authority to Exercise supervision and control over the investment of endowment funds, Exercise supervision and control over erection of buildings, Negotiate and procure loans, Designate those employees and officers for whom dishonesty insurance is required, Have the right to sell, lease, convey, or transfer both real and personal property belonging to the University, except that the Executive Committee shall not sell any of the property used for the University purposes proper, and Perform other duties and exercise such other powers as the Board of Trustees may delegate. All actions of the Executive Committee are recorded in official record meeting minutes which are reported at the next meeting of the Board of Trustees.

Return Reference	Explanation
Form 990, Part VI, Line 4	Changes to Governing Documents On January 30, 2015, the Board of Trustees voted to amend the University's Bylaws by changing the structure and composition of the Board of Trustees First, the total number of trustees was reduced from 50 to 45 Additionally, certain requirements for Trustees relating to their affiliation with the United Methodist Church were amended or lifted Finally, the Supplemental Trustee category was eliminated and folded into the At Large Trustee category

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

Return Reference	Explanation
Form 990, Part VI, Line 12c	Conflict of Interest Policy Monitoring & Enforcement The Board of Trustees has delegated ongoing oversight of the University's Conflict of Interest Policy to the Board of Trustees Audit Committee as a permanent duty of the Audit Committee's Charter The Audit Committee is responsible for proposing changes in the University Conflict of Interest Policy to the full Board of Trustees, and for monitoring compliance with the policy approved by the Board of Trustees All members of the Board of Trustees, and for monitoring compliance with the policy approved by the Board of Trustees All members of the Board of Trustees, and for monitoring compliance with the policy approved by the Board of Trustees All members of the Board of Trustees, Board committee members, Officers, key employees, members of the Financial Aid office and all professional financial accounting staff annually complete and submit a questionnaire on possible conflicts of interest and independence Employees of the University other than the President submit conflict of interest information to the President The President determines if an actual conflict of interest exists and determines the appropriate mitigating action. The President reports to the Audit Committee, on an annual basis, all identified possible conflicts of interest and mitigating actions taken. The President and the members of the Board of Trustees submit conflict of interest and independence questionnaires to the Board of Trustees Audit Committee. The Audit Committee is responsible for reviewing the situation and recommending to the Board of Trustees Audit Committee. The Audit Committee is responsible for reviewing the situation and recommending to the Board of Trustees Audit Committee to investigate alternatives to the proposed transaction or arrangement. After exercising due diligence, the Board of Trustees or committee shall determine whether the University can obtain a more advantageous transaction or arrangement is not reasonably attainable under circumstances that would not give rise t

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

Return Reference	Explanation
	How Documents are Made Available to the Public The University publishes its Articles of Incorporation and/or Certificate of Formation, Bylaws, Conflict of Interest Policy, Independence Policy, the most current three years of audited financial statements, and IRS Forms 990 and 990-T on the University website. The information may be accessed at http://www.southwestern.edu/businessoffice/budget.php

Return Reference	Explanation
Form 990, Part XI, Line 9	Other Changes in net assets Change in value of split-interest agreements \$96,313 Post-Retirement Related Changes \$(1,730,308) Total \$(1,633,995)

DLN: 93493125017536

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** Southwestern University 74-1233796

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.								
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b (13) controlled entity?	
						Yes	No
(1) Southwestern Foundation 1001 East University Avenue	Property	TX	501(c)(3)	11-I	SU	Yes	
Georgetown, TX 78626 74-2736740							

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	ation ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				·		1	Yes	No		Yes	No	

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

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

No

che	edule R (Form 990) 2014		Pa	ige 3
Pa	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
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
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	n 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)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10	Yes	
		_	14	ـــــ
•	· · · · · · · · · · · · · · · · · · ·	1p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1q		No
_	O ther transfer of cash or property to related organization(s)	1r	Yes	
	O their transfer of cash of property to related organization(5)			1

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Southwestern Foundation	0	781,171	gross wages

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

Schedule R (Form 990) 2014

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

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