

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. By law, the IRS generally cannot redact the information on the form. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2013 Open to Public Inspection
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A For the 2013 calendar year, or tax year beginning 06-01-2013 , 2013, and ending 05-31-2014									
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending		C Name of organization SOUTHERN METHODIST UNIVERSITY					D Employer identification number 75-0800689		
		Doing Business As							
		Number and street (or P O box if mail is not delivered to street address) PO BOX 750261				Room/suite		E Telephone number (214) 768-1601	
		City or town, state or province, country, and ZIP or foreign postal code DALLAS, TX 752750261							
							G Gross receipts \$ 1,022,537,970		
		F Name and address of principal officer R GERALD TURNER PO BOX 750261 DALLAS, TX 752750261				H(a) Is this a group return for subordinates? ☐ Yes ☒ No			
						H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)			
						H(c) Group exemption number ▶			
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527									
J Website: ▶ WWW.SMU.EDU									
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶						L Year of formation 1911		M State of legal domicile TX	

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE PRIMARY MISSION OF THE UNIVERSITY IS EDUCATION THROUGH RESEARCH AND TEACHING BY CREATING AND IMPARTING KNOWLEDGE THAT WILL SHAPE CITIZENS WHO CONTRIBUTE TO THEIR COMMUNITIES AND LEAD PROFESSIONS IN A GLOBAL SOCIETY		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	42
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	39
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	6,629
	6 Total number of volunteers (estimate if necessary)	6	1,780
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-6,014,334	
	b Net unrelated business taxable income from Form 990-T, line 34	7b	-6,134,595
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	109,488,300	111,212,720
	9 Program service revenue (Part VIII, line 2g)	483,384,122	514,220,500
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	72,824,929	85,037,751
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,500,224	3,718,276
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	669,197,575	714,189,247
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	142,508,490	150,960,839
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	267,901,555	286,971,080
	16a Professional fundraising fees (Part IX, column (A), line 11e)	389,823	397,615
	b Total fundraising expenses (Part IX, column (D), line 25) <u>18,001,362</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	178,893,807	184,464,346
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	589,693,675	622,793,880
	19 Revenue less expenses Subtract line 18 from line 12	79,503,900	91,395,367
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	2,494,524,378	2,575,759,014
	21 Total liabilities (Part X, line 26)	779,680,315	762,186,796
	22 Net assets or fund balances Subtract line 21 from line 20	1,714,844,063	1,813,572,218

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

Sign Here	*****				2015-04-09	
	Signature of officer				Date	
Paid Preparer Use Only	CHRISTINE REGIS VP FOR BUSINESS AND FINANCE					
	Type or print name and title					
	Print/Type preparer's name		Preparer's signature		Date 2015-04-10	Check ☐ if self-employed
	Firm's name ▶				Firm's EIN ▶	
	Firm's address ▶				Phone no	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

☒

1

Briefly describe the organization's mission

THE PRIMARY MISSION OF THE UNIVERSITY IS EDUCATION THROUGH RESEARCH AND TEACHING BY CREATING AND IMPARTING KNOWLEDGE THAT WILL SHAPE CITIZENS WHO CONTRIBUTE TO THEIR COMMUNITIES AND LEAD PROFESSIONS IN A GLOBAL SOCIETY

2

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

☐ Yes ☒ No

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

3

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

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 405,481,787 including grants of \$ 134,210,304) (Revenue \$ 418,971,330)

INSTRUCTIONAL INSTRUCTIONAL PROGRAMS INCLUDE ACADEMIC INSTRUCTION AND SERVICES FOR UNDERGRADUATE AND GRADUATE STUDENTS INCLUDING FINANCIAL AID IN THE FORM OF SCHOLARSHIPS AND FELLOWSHIPS STUDENT ENROLLMENT FOR FALL SEMESTER 2013 WAS 10,972 AND SPRING SEMESTER 2014 WAS 10,614

4b

(Code) (Expenses \$ 100,801,894 including grants of \$ 16,596,699) (Revenue \$ 49,922,299)

AUXILIARY ACTIVITIES THIS CATEGORY INCLUDES ATHLETIC EXPENDITURES AND SERVICES THAT SUPPORT EDUCATIONAL ACTIVITIES SERVICES INCLUDE BOOKSTORE, STUDENT HOUSING, VENDING AND FOOD ADMINISTRATION AND INDEPENDENT OPERATIONS

4c

(Code) (Expenses \$ 39,174,070 including grants of \$) (Revenue \$ 34,867,429)

SPONSORED RESEARCH SPONSORED RESEARCH INCLUDES EXPENDITURES FOR ALL ACTIVITIES THAT ARE PART OF THE UNIVERSITY'S RESEARCH PROGRAM, INCLUDING ACTIVITIES SPECIFICALLY ORGANIZED TO PRODUCE RESEARCH OUTCOMES, WHETHER COMMISSIONED BY AN AGENCY EXTERNAL TO THE INSTITUTION OR SEPARATELY BUDGETED BY AN ORGANIZATIONAL UNIT WITHIN THE INSTITUTION

(Code) (Expenses \$ 14,850,135 including grants of \$) (Revenue \$ 10,459,442)

ORGANIZED ACTIVITIES ORGANIZED ACTIVITIES MAKE AVAILABLE TO THE PUBLIC VARIOUS RESOURCES THAT EXIST WITHIN THE UNIVERSITY SUCH AS SEMINARS, CONFERENCES AND CAMPS

4d

Other program services (Describe in Schedule O)

(Expenses \$ 14,850,135 including grants of \$) (Revenue \$ 10,459,442)

4e

Total program service expenses

560,307,886

Form 990 (2013)

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 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6 Yes	
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 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e 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	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a 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	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	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	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part 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 government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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	Yes	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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

☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	14,802	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
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.	6,629	
2b 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).		Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		Yes	
3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		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)?		Yes	
b If "Yes," enter the name of the foreign country: UK See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			No
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			No
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			No
d If "Yes," indicate the number of Forms 8282 filed during the year.		7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	Yes
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8	
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?		9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.		11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. 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.		13b	
c Enter the amount of reserves on hand.		13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		14b	

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

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

Section B. Policies

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK, AZ, AR, CA, CT, DC, GA, IL, KS, KY, ME, MD, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	TAX DEPARTMENT 6116 N CENTRAL EXPRESSWAY STE 203 DALLAS, TX 752750261 (214) 768-1601

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

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

Form **990** (2013)

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	10,833,973		1,625,312

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 506

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
HC BECK 1807 ROSS AVENUE STE 500 DALLAS TX 75201	CONSTRUCTION	49,403,470
ROGERS O'BRIEN CONSTRUCTION COMPANY 1901 REGAL ROW DALLAS TX 75235	CONSTRUCTION	40,174,305
ARAMARK CORPORATION 24818 NETWORK PLACE CHICAGO IL 60673	FACILITY&DINING	38,229,945
HOLDER CONSTRUCTION GROUP LLC 4600 FULLER DRIVE SUITE 375 IRVING TX 75038	CONSTRUCTION	10,738,838
THE RICHARDS GROUP 8750 N CENTRAL EXPRESSWAY STE 1200 DALLAS TX 75231	ADVERTISING	4,308,265

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 107

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	1,680,057				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	23,094				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	109,509,569				
	g	Noncash contributions included in lines 1a-1f \$		9,493,613				
	h	Total. Add lines 1a-1f		111,212,720				
Program Service Revenue	2a	TUITION AND FEES	Business Code 611710	402,380,388	402,380,388			
	b	AUXILIARY ACTIVITIES	611710	48,308,663	36,579,055		11,729,608	
	c	SPONSORED RESEARCH	611710	34,466,374	34,466,374			
	d	OTHER STUDENT FEES	611710	11,872,581	11,872,581			
	e	ORGANIZED ACTIVITIES	611710	8,325,445	8,325,445			
	f	All other program service revenue		8,867,049	8,862,572	4,477		
	g	Total. Add lines 2a-2f		514,220,500				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		28,968,394		-7,423,444	36,391,838
4		Income from investment of tax-exempt bond proceeds		743,420			743,420	
5		Royalties		4,652,016			4,652,016	
6a		Gross rents	(i) Real 81,475	(ii) Personal				
		b	Less rental expenses	68,895				
		c	Rental income or (loss)	12,580				
		d	Net rental income or (loss)		12,580			12,580
7a		Gross amount from sales of assets other than inventory	(i) Securities 330,084,742	(ii) Other 30,740,643				
		b	Less cost or other basis and sales expenses	265,432,315	40,067,133			
		c	Gain or (loss)	64,652,427	-9,326,490			
		d	Net gain or (loss)		55,325,937		1,404,633	53,921,304
8a		Gross income from fundraising events (not including \$ 1,680,057 of contributions reported on line 1c) See Part IV, line 18	a	1,834,060				
		b	Less direct expenses	b	2,780,380			
		c	Net income or (loss) from fundraising events		-946,320			
9a		Gross income from gaming activities See Part IV, line 19	a					
		b	Less direct expenses	b				
		c	Net income or (loss) from gaming activities					
10a		Gross sales of inventory, less returns and allowances	a					
		b	Less cost of goods sold	b				
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions		714,189,247	502,486,415	-6,014,334	107,450,766		

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	153,836	153,836		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	150,807,003	150,807,003		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	8,043,283	1,196,328	6,346,615	500,340
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	266,223	266,223		
7	Other salaries and wages.	220,781,388	199,045,743	12,375,439	9,360,206
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	15,944,316	13,871,467	1,319,219	753,630
9	Other employee benefits.	28,158,026	24,497,327	2,329,771	1,330,928
10	Payroll taxes.	13,777,844	11,986,648	1,139,967	651,229
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	1,390,958	226,512	1,164,446	
c	Accounting.	313,700		313,700	
d	Lobbying.	205,595		205,595	
e	Professional fundraising services. See Part IV, line 17.	397,615			397,615
f	Investment management fees.	10,189,511		10,189,511	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	24,996,711	22,613,031	1,198,644	1,185,036
12	Advertising and promotion.	3,359,793	3,193,517	139,517	26,759
13	Office expenses.	17,572,097	15,809,198	412,371	1,350,528
14	Information technology.	10,155,296	9,722,700	353,102	79,494
15	Royalties.	3,074	3,074		
16	Occupancy.	24,927,162	23,744,068	976,599	206,495
17	Travel.	13,024,656	12,469,242	235,500	319,914
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	9,380	9,380		
19	Conferences, conventions, and meetings.	993,442	902,307	70,153	20,982
20	Interest.	18,416,623	18,416,623		
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	27,511,106	24,181,103	3,004,003	326,000
23	Insurance.	2,710,424	2,683,779	20,360	6,285
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).				
a	ALL OTHER EXPENSES	15,075,686	13,058,980	799,144	1,217,562
b	BOOKS AND PERIODICALS	7,922,555	7,800,959	59,877	61,719
c	PUBLIC RELATIONS	3,537,799	1,650,230	1,718,802	168,767
d	PROPERTY COSTS	2,148,778	1,998,608	112,297	37,873
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	622,793,880	560,307,886	44,484,632	18,001,362
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		15,472,814	1	57,268,599	
	2	Savings and temporary cash investments		354,380,065	2	239,373,008	
	3	Pledges and grants receivable, net		113,732,016	3	129,421,983	
	4	Accounts receivable, net		128,527,193	4	130,344,690	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6		
	7	Notes and loans receivable, net		7,944,416	7	7,563,490	
	8	Inventories for sale or use		433,907	8	442,838	
	9	Prepaid expenses and deferred charges		7,740,022	9	14,953,113	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,221,013,730			
	b	Less accumulated depreciation	10b	363,840,089	742,851,738	10c	857,173,641
	11	Investments—publicly traded securities		447,901,891	11	324,896,291	
	12	Investments—other securities See Part IV, line 11		669,993,752	12	809,689,117	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		5,546,564	15	4,632,244	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,494,524,378	16	2,575,759,014	
Liabilities	17	Accounts payable and accrued expenses		140,217,526	17	149,349,223	
	18	Grants payable			18		
	19	Deferred revenue		25,336,816	19	34,113,884	
	20	Tax-exempt bond liabilities		519,531,000	20	484,394,000	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties		352,000	23	305,000	
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		94,242,973	25	94,024,689	
	26	Total liabilities. Add lines 17 through 25		779,680,315	26	762,186,796	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		538,247,063	27	596,391,218	
	28	Temporarily restricted net assets		612,235,000	28	610,374,000	
	29	Permanently restricted net assets		564,362,000	29	606,807,000	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other funds			32		
	33	Total net assets or fund balances		1,714,844,063	33	1,813,572,218	
	34	Total liabilities and net assets/fund balances		2,494,524,378	34	2,575,759,014	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	714,189,247
2	Total expenses (must equal Part IX, column (A), line 25)	2	622,793,880
3	Revenue less expenses Subtract line 2 from line 1	3	91,395,367
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,714,844,063
5	Net unrealized gains (losses) on investments	5	7,332,788
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,813,572,218

Part 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 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	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	Yes	

Additional Data

Software ID:
Software Version:
EIN: 75-0800689
Name: SOUTHERN METHODIST UNIVERSITY

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
R GERALD TURNER PRESIDENT/TR	36 50 1 00	X		X				961,839	0	386,083
SANTANU ROY PROFESSOR/TR	1 00	X						157,109	0	46,986
GEORGE UTKOV TRUSTEE	1 00	X						2,060	0	0
RUTH S ALTSHULER TRUSTEE	1 00	X						0	0	0
WILLIAM ARMSTRONG TRUSTEE	1 00	X						0	0	0
MICHAEL M BOONE TRUSTEE	1 00	X						0	0	0
BRADLEY BROOKSHIRE TRUSTEE	1 00	X						0	0	0
LAURA WELCH BUSH TRUSTEE	1 00	X						0	0	0
RICHIE L BUTLER TRUSTEE	1 00	X						0	0	0
JEANNE TOWER COX TRUSTEE	1 00	X						0	0	0
KELLY H COMPTON TRUSTEE	1 00	X						0	0	0
MARK CRAIG TRUSTEE	1 00	X						0	0	0
GARY T CRUM TRUSTEE	1 00	X						0	0	0
KATHERINE CROW TRUSTEE	1 00	X						0	0	0
ROBERT H DEDMAN JR TRUSTEE	1 00	X						0	0	0
JAMES E DORFF TRUSTEE	1 00	X						0	0	0
ANTOINE LV DIJKSTRA TRUSTEE	1 00	X						0	0	0
LESLIE L MELSON TRUSTEE	1 00	X						0	0	0
LARRY FAULKNER TRUSTEE	1 00	X						0	0	0
GERALD J FORD TRUSTEE	1 00	X						0	0	0
ANTONIO O GARZA JR TRUSTEE	1 00	X						0	0	0
JAMES R GIBBS TRUSTEE	1 00	X						0	0	0
FREDERICK B HEGI JR TRUSTEE	1 00	X						0	0	0
CLARK K HUNT TRUSTEE	1 00	X						0	0	0
RAY L HUNT TRUSTEE	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MRS GENE C JONES TRUSTEE	1 00	X						0	0	0
SCOTT JONES TRUSTEE	1 00	X						0	0	0
FREDRICK LEACH TRUSTEE	1 00	X						0	0	0
PAUL B LOYD JR TRUSTEE	1 00	X						0	0	0
BOBBY B LYLE TRUSTEE	1 00	X						0	0	0
MICHAEL MCKEE TRUSTEE	1 00	X						0	0	0
DAVID B MILLER TRUSTEE	1 00	X						0	0	0
SHERON PATTERSON TRUSTEE	1 00	X						0	0	0
SARAH PEROT TRUSTEE	1 00	X						0	0	0
JEANNE L PHILLIPS TRUSTEE	1 00	X						0	0	0
CAREN H PROTHRO TRUSTEE	1 00	X						0	0	0
CARL SEWELL TRUSTEE	1 00	X						0	0	0
SCOTT MCLEAN TRUSTEE	1 00	X						0	0	0
RICHARD K TEMPLETON TRUSTEE	1 00	X						0	0	0
ROYCE E WILSON SR TRUSTEE	1 00	X						0	0	0
CONNIE O'NEILL TRUSTEE	1 00	X						0	0	0
RICHARD WARE TRUSTEE	1 00	X						0	0	0
MICHAEL A CONDON UNIVERSITY T	36 50 1 00			X				591,988	0	46,212
BRAD E CHEVES VP DEVELOPME	31 50 6 00			X				454,744	0	45,212
PAUL W LUDDEN PROVOST/VP A	36 50 1 00			X				438,828	0	40,537
CHRISTINE REGIS VP BUSINESS	29 50 8 00			X				378,686	0	44,422
PAUL WARD VP LEGAL AFF	29 50 8 00			X				369,789	0	66,127
THOMAS E BARRY VP EXECUTIVE	34 50 3 00			X				311,069	0	41,627
LORI S WHITE VP STUDENT A	36 50 1 00			X				292,179	0	41,837
MARY ANNE ROGERS ASSOC UNIV S	31 50 6 00			X				93,053	0	22,541

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ALBERT NIEMI JR DEAN	37 50				X			587,997	0	45,363
WILLIAM TSUTSUI DEAN					X			266,008	0	35,604
LARRY BROWN BASKETBALL C	37 50					X		2,209,594	0	532,740
JUNE JONES FOOTBALL COA						X		1,959,186	0	43,753
TIMOTHY JANKOVICH BASKETBALL C	37 50					X		547,687	0	49,330
WILLIAM DILLON SR ASSOC DEA						X		524,116	0	49,365
MIGUEL QUINONES PROFESSOR						X		500,217	0	46,068
PETER MOORE FORMER INTER							X	187,824	0	41,505

SCHEDULE A

(Form 990 or 990EZ)

Department of the
Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization SOUTHERN METHODIST UNIVERSITY	Employer identification number 75-0800689
--	---

Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

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

☐

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

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)
- | | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2013

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	54,344,662	63,635,513	97,650,318	109,488,300	111,212,720	436,331,513
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	54,344,662	63,635,513	97,650,318	109,488,300	111,212,720	436,331,513
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						22,218,279
6 Public support. Subtract line 5 from line 4						414,113,234

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	54,344,662	63,635,513	97,650,318	109,488,300	111,212,720	436,331,513
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20,573,088	30,339,620	29,796,753	34,707,951	41,870,355	157,287,767
9 Net income from unrelated business activities, whether or not the business is regularly carried on			4,319,245			4,319,245
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						597,938,525
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						▶

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	69 260 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	63 560 %
16a 33 1/3% support test—2013. 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—2012. 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—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	▶	
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	▶	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶	

Part IIISupport 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 in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Return Reference	Explanation	
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SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

Name of the organization SOUTHERN METHODIST UNIVERSITY	Employer identification number 75-0800689
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		205,595													
c Total lobbying expenditures (add lines 1a and 1b)		205,595													
d Other exempt purpose expenditures		622,588,285													
e Total exempt purpose expenditures (add lines 1c and 1d)		622,793,880													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	243,796	246,570	212,587	205,595	908,548
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

Part IV

Return Reference

Explanation

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization SOUTHERN METHODIST UNIVERSITY	Employer identification number 75-0800689
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Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	2
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	1,559,212
4	Aggregate value at end of year	34,299,448
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ 1,256,283

(ii) Assets included in Form 990, Part X

▶ \$ 49,600,676

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$

b

Assets included in Form 990, Part X

▶ \$

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

Cat No 52283D

Schedule D (Form 990) 2013

Part III

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

- 3
- Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☒ Public exhibition
- b

☒ Scholarly research
- c

☒ Preservation for future generations
- d

☒ Loan or exchange programs
- e

☒ Other EDUCATIONAL PROGRAMMING
- 4
- Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5
- During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
- ☐ Yes

☒ No

Part IV

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

- 1a
- Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
- ☐ Yes

☐ No
- b
- If "Yes," explain the arrangement in Part XIII and complete the following table
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a
- Did the organization include an amount on Form 990, Part X, line 21?
- ☐ Yes

☐ No
- b
- If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V

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

		(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back									
1a	Beginning of year balance	1,268,078,648	1,162,415,320	1,190,709,490	1,069,398,696	1,032,262,197									
b	Contributions	37,395,171	39,537,725	15,898,059	16,869,666	26,874,362									
c	Net investment earnings, gains, and losses	195,910,548	139,862,273	29,097,056	180,581,957	74,857,407									
d	Grants or scholarships	14,091,245	13,434,524	12,806,476	13,378,718	13,375,323									
e	Other expenditures for facilities and programs	42,461,880	41,913,259	42,410,350	42,903,543	44,100,799									
f	Administrative expenses	19,685,167	18,388,887	18,072,459	19,858,567	7,119,148									
g	End of year balance	1,425,146,075	1,268,078,648	1,162,415,320	1,190,709,491	1,069,398,696									
2	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as														
a	Board designated or quasi-endowment ▶	6 510 %													
b	Permanent endowment ▶	49 770 %													
c	Temporarily restricted endowment ▶	43 720 %													
	The percentages in lines 2a, 2b, and 2c should equal 100%														
3a	Are there endowment funds not in the possession of the organization that are held and administered for the organization by														
	(i) unrelated organizations					<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>3a(i)</td><td>Yes</td><td></td></tr><tr><td>3a(ii)</td><td></td><td>No</td></tr></table>		Yes	No	3a(i)	Yes		3a(ii)		No
	Yes	No													
3a(i)	Yes														
3a(ii)		No													
	(ii) related organizations					<table><tr><td>3a(ii)</td><td></td><td>No</td></tr></table>	3a(ii)		No						
3a(ii)		No													
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?					<table><tr><td>3b</td><td></td><td></td></tr></table>	3b								
3b															
4	Describe in Part XIII the intended uses of the organization's endowment funds														

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	108,177,614		108,177,614
b	Buildings	895,187,789	269,688,936	625,498,853
c	Leasehold improvements			
d	Equipment	142,293,144	65,097,364	77,195,780
e	Other	75,355,183	29,053,789	46,301,394
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				857,173,641

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
SCHEDULE D, PAGE 2, PART III, LINE 4	THE MEADOWS MUSEUM AT SOUTHERN METHODIST UNIVERSITY HOUSES ONE OF THE LARGEST AND MOST COMPREHENSIVE COLLECTIONS OF SPANISH ART OUTSIDE OF SPAIN WITH WORKS DATING FROM THE 10TH TO THE 21ST CENTURY, THE INTERNATIONALLY RENOWNED COLLECTION PRESENTS A BROAD SPECTRUM OF ART COVERING A THOUSAND YEARS OF SPANISH HERITAGE. THE MUSEUM IS A RESOURCE OF SOUTHERN METHODIST UNIVERSITY THAT SERVES A BROAD AND INTERNATIONAL AUDIENCE AS WELL AS THE UNIVERSITY COMMUNITY THROUGH MEANINGFUL EXHIBITIONS, PUBLICATIONS, WORKSHOPS AND OTHER EDUCATIONAL PROGRAMS AND ENCOURAGES PUBLIC PARTICIPATION THROUGH A BROAD-BASED MEMBERSHIP.
SCHEDULE D, PAGE 2, PART V, LINE 4	INTENDED USES OF ENDOWMENT FUNDS INCLUDE EDUCATION PROGRAM SUPPORT, CHAIRS AND FACULTY SUPPORT, SCHOLARSHIPS AND OTHER STUDENT AID, LIBRARY AND BOOKS AND MAINTENANCE.
SCHEDULE D, PAGE 3, PART X	THE UNIVERSITY COMPLIES WITH THE REQUIREMENTS OF ASC 740, INCOME TAXES, WHICH PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT REQUIREMENTS FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. IN ADDITION, ASC 740 PROVIDES GUIDANCE ON RECOGNITION, CLASSIFICATION, AND ACCOUNTING IN INTERIM PERIODS AND DISCLOSURE REQUIREMENTS FOR UNCERTAIN TAX POSITIONS. THE UNIVERSITY AND ITS CONTROLLED CORPORATIONS DO NOT HAVE ANY UNCERTAIN TAX POSITIONS AND THEREFORE HAVE RECORDED NO LIABILITY OR BENEFIT FOR SUCH POSITIONS FOR THE YEAR ENDED MAY 31, 2014 AND 2013.
SCHEDULE D, PAGE 4, PART XIII	PART V. THE ENDOWMENT MARKET VALUES REPORTED IN THIS SECTION DO NOT INCLUDE PLEDGES RECEIVABLE WHICH ARE INCLUDED FOR FINANCIAL STATEMENT PURPOSES IN COMPLIANCE WITH SFAS NO. 116. PLEDGES DO NOT GENERATE INCOME FOR SPENDING AND NORMALLY ARE NOT INCLUDED WHEN THE UNIVERSITY REPORTS ENDOWMENT FUND MARKET VALUE FOR PURPOSES OTHER THAN THE FINANCIAL STATEMENTS AND ARE NOT INCLUDED HERE. THE UNIVERSITY HAS ELECTED TO REPORT MARKETABLE SECURITIES, EQUITY METHOD INVESTMENTS, AND FUNDS HELD IN TRUST AT FAIR VALUE FOR FINANCIAL STATEMENT PURPOSES. THE UNIVERSITY HAS NOT ELECTED TO REPORT OTHER ASSETS AT FAIR VALUE FOR FINANCIAL STATEMENT PURPOSES, AND ACCORDINGLY, NEITHER THE UNREALIZED GAINS AND LOSSES IN PRIOR YEARS, NOR THE GAINS IN FISCAL YEAR 2014 ARE REPORTED FOR FINANCIAL STATEMENT PURPOSES, EXCEPT IF THOSE WITH LOSSES ARE DETERMINED TO BE PERMANENT IMPAIRMENTS. AS OF MAY 31, 2014, THE UNIVERSITY HAS APPROXIMATELY 320.83 MILLION OF UNREALIZED GAINS THAT ARE REFLECTED HERE BUT HAD NOT BEEN RECOGNIZED IN ITS FINANCIAL STATEMENTS. PART I, LINE 4 THE AMOUNT SHOWN REPRESENTS THE FAIR VALUE AT THE END OF THE YEAR. THIS VALUE IS DIFFERENT FROM THE AMOUNT REPORTED FOR FINANCIAL STATEMENT PURPOSES AND BALANCE SHEET REPORTING ON FORM 990 BECAUSE THE UNIVERSITY DOES NOT RECORD ALL POOL INVESTMENTS AT FAIR VALUE.

[illegible]

Additional Data

Software ID:

Software Version:

EIN: 75-0800689

Name: SOUTHERN METHODIST UNIVERSITY

Form 990, Schedule D, Part VII - Investments Other Securities

(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(3)Other		
(A) EQUITY FUNDS WITHOUT DAILY LIQUIDITY	272,363,927	C
(B) DIVERSIFYING STRATEGIES FUNDS	209,708,653	C
(C) PRIVATE EQUITY FUNDS	178,348,209	C
(D) PARTNERSHIP INVESTMENTS - REAL EST	59,320,126	C
(E) VENTURE CAPITAL	47,099,432	C
(F) FUNDS HELD IN TRUST BY OTHERS	21,720,683	F
(G) PARTNERSHIP INVESTMENTS - TIMBER	10,855,671	C
(H) EQUITY METHOD INVESTMENTS	9,762,064	F
(I) FIXED INCOME FUNDS WITHOUT DAILY LIQ	510,159	C
(J) MINERAL RIGHTS	185	C
(K) OTHER INVESTMENTS	8	C

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

Part I		YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
	4b	Yes	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	4c	Yes	
	4d	Yes	
	5a		No
	5b		No
	5c		No
	5d		No
	5e		No
	5f		No
	5g		No
	5h		No
6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II	6a	Yes	
	6b		No
	7	Yes	

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

Return Reference	Explanation
SCHEDULE E, LINE 3	THE SOUTHERN METHODIST UNIVERSITY NONDISCRIMINATION STATEMENT APPEARS ON THE UNIVERSITY'S WEBSITE AND IN ELECTRONIC AND PRINTED MATERIALS, SUCH AS THE STUDENT HANDBOOK, ADMISSION BROCHURES, ADVERTISEMENTS, ETC
SCHEDULE E, LINE 6	THE UNIVERSITY PARTICIPATES IN THE FEDERAL PERKINS LOAN PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK-STUDY PROGRAM, FEDERAL PELL GRANT, WILLIAM D FORD FEDERAL DIRECT LOAN PROGRAM, TEXAS TUITION EQUALIZATION GRANT, TEXAS B-ON-TIME PROGRAM, AND TEXAS COLLEGE ACCESS LOAN PROGRAM AND RECEIVED FEDERAL AND STATE FUNDING FOR RESEARCH GRANTS AND CONTRACTS. DURING THE FISCAL YEAR 2014, THE VETERANS ADMINISTRATION POSTED, WITHOUT PRIOR NOTIFICATION, A NOTICE OF DEBARMENT AND SUSPENSION OF PAYMENTS TO THE UNIVERSITY, IN RELATION TO THE LATE REPAYMENT OF EXCESS FUNDS RECEIVED FROM THE ADMINISTRATION FOR ELIGIBLE VETERANS ENROLLED AT THE UNIVERSITY. THE PAYMENTS TO THE ADMINISTRATION WERE IMMEDIATELY PROCESSED BY THE UNIVERSITY AND THE DEBARMENT AND SUSPENSION ACTION WAS PROMPTLY REMOVED.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space 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)					
(3)					
(4)					
(5)					
3a Sub-total		3			247,462,145
b Total from continuation sheets to Part I		5			70,924,694
c Totals (add lines 3a and 3b)		8			318,386,839

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶
- 3 Enter total number of other organizations or entities ▶

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) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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 ☐ 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)*

☐ Yes ☒ No
- 3

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

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☒ Yes ☐ No

Part V

Supplemental Information

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, PAGE 1, PART I, LINE 3	CENTRAL AMERICA AND THE CARIBBEAN 6,103 0 CENTRAL AMERICA AND THE CARRIBEAN 9,179 0 CENTRA L AMERICA AND THE CARRIBEAN 101,494 0 CENTRAL AMERICA AND THE CARRIBEAN 0 245,699,997 CENT RAL AMERICA AND THE CARRIBEAN 40,580 0 EAST ASIA AND THE PACIFIC 124,508 0 EAST ASIA AND T HE PACIFIC 28,495 0 EAST ASIA AND THE PACIFIC 49,200 0 EAST ASIA AND THE PACIFIC 1,026,974 0 EAST ASIA AND THE PACIFIC 4,714 0 EAST ASIA AND THE PACIFIC 21,068 0 EAST ASIA AND THE PACIFIC 2,397 0 EAST ASIA AND THE PACIFIC 8,428 0 EUROPE 307,311 0 EUROPE 14,765 0 EUROPE 3,598 0 EUROPE 13,334 0 EUROPE 3,471,832 0 EUROPE 4,044 0 EUROPE 20,711 0 EUROPE 103,062 0 EUROPE 0 63,565,174 EUROPE 56,683 0 EUROPE 86,739 0 EUROPE 3,528 0 EUROPE 3,068 0 EUROPE 37,404 0 EUROPE 4,688 0 MIDDLE EAST AND NORTH AFRICA 6,964 0 MIDDLE EAST AND NORTH AFRICA 341 0 MIDDLE EAST AND NORTH AFRICA 122,213 0 MIDDLE EAST AND NORTH AFRICA 10,590 0 MIDDLE EAST AND NORTH AFRICA 18,151 0 NORTH AMERICA 21,479 0 NORTH AMERICA 5,086 0 NORTH AMERICA 46,535 0 NORTH AMERICA 1,674 0 NORTH AMERICA 5,673 0 NORTH AMERICA 6,920 0 NORTH AMERICA 0 2,938,265 RUSSIA AND THE NEWLY INDEPENDENT STATES 2,647 0 RUSSIA AND THE NEWLY INDEPENDEN T STATES 24,106 0 RUSSIA AND THE NEWLY INDEPENDENT STATES 26,107 0 RUSSIA AND THE NEWLY IN DEPENDENT STATES 5,096 0 SOUTH AMERICA 10,779 0 SOUTH AMERICA 3,379 0 SOUTH AMERICA 8,101 0 SOUTH AMERICA 83,910 0 SOUTH AMERICA 3,921 0 SOUTH AMERICA 6,466 0 SOUTH ASIA 19,630 0 S OUTH ASIA 6,483 0 SOUTH ASIA 8,446 0 SOUTH ASIA 8,014 0 SUB-SAHARAN AFRICA 4,500 0 SUB- SAH ARAN AFRICA 19,598 0 SUB-SAHARAN AFRICA 118,511 0 SUB-SAHARAN AFRICA 19,676 0 SUB- SAHARAN AFRICA 4,500 0

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PAGE 5, PART V	PART I, LINE 3 THE UNIVERSITY ACCOUNTS FOR ALL EXPENDITURES ON AN ACCRUAL BASIS AND MAKES ALL REIMBURSEMENTS UNDER AN ACCOUNTABLE PLAN

Additional Data

Software ID:
Software Version:
EIN: 75-0800689
Name: SOUTHERN METHODIST UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	ALUMNI REL/RECRUIT	6,103
CENTRAL AMERICA AND THE CARRIBEAN			PROGRAM SERVICES	CONFERENCE	9,179
CENTRAL AMERICA AND THE CARRIBEAN			PROGRAM SERVICES	STUDY ABROAD	101,494

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 CARRIBEAN			INVESTMENTS		245,699,997
CENTRAL AMERICA AND THE CARRIBEAN			PROGRAM SERVICES	RESEARCH/CONFERENCE	40,580
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RESEARCH/CONFERENCE	124,508

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
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RECRUITING	28,495
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	CONFERENCE	49,200
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	STUDY ABROAD	1,026,974

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
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RESEARCH	4,714
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	ALUMNI REL/RECRUIT	21,068
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RECRUITING/LECTURE	2,397

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
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	LECTURES	8,428
EUROPE		3	PROGRAM SERVICES	RESEARCH/CONFERENCE	307,311
EUROPE			PROGRAM SERVICES	ART SCOUTING	14,765

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			PROGRAM SERVICES	CONFERENCE/RECRUIT	3,598
EUROPE			PROGRAM SERVICES	CURATORIAL FEE	13,334
EUROPE		5	PROGRAM SERVICES	STUDY ABROAD	3,471,832

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			PROGRAM SERVICES	RECRUITING	4,044
EUROPE			PROGRAM SERVICES	PREPARE EXHIBITION	20,711
EUROPE			PROGRAM SERVICES	CONFERENCE	103,062

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			INVESTMENTS		63,565,174
EUROPE			PROGRAM SERVICES	MEMBER TOUR	56,683
EUROPE			PROGRAM SERVICES	RESEARCH	86,739

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			PROGRAM SERVICES	ALUMNI RELATIONS	3,528
EUROPE			PROGRAM SERVICES	ALUMNI REL/RECRUIT	3,068
EUROPE			PROGRAM SERVICES	LECTURES/MEETINGS	37,404

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			PROGRAM SERVICES	FACULTY DEVELOPMENT	4,688
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	CONFERENCE	6,964
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	RECRUITING	341

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	STUDY ABROAD	122,213
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	RESEARCH	10,590
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	RESEARCH/CONFERENCE	18,151

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
NORTH AMERICA			PROGRAM SERVICES	CONFERENCE	21,479
NORTH AMERICA			PROGRAM SERVICES	ALUMNI REL/RECRUIT	5,086
NORTH AMERICA			PROGRAM SERVICES	RESEARCH/CONFERENCE	46,535

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
NORTH AMERICA			PROGRAM SERVICES	RESEARCH	1,674
NORTH AMERICA			PROGRAM SERVICES	LECTURES	5,673
NORTH AMERICA			PROGRAM SERVICES	FACULTY DEVELOPMENT	6,920

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
NORTH AMERICA			INVESTMENTS		2,938,265
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROGRAM SERVICES	CONFERENCE	2,647
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROGRAM SERVICES	RESEARCH/CONFERENCE	24,106

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
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROGRAM SERVICES	STUDY ABROAD	26,107
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROGRAM SERVICES	RESEARCH/PRESENT	5,096
SOUTH AMERICA			PROGRAM SERVICES	CONFERENCE	10,779

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA			PROGRAM SERVICES	LECTURES	3,379
SOUTH AMERICA			PROGRAM SERVICES	RESEARCH/CONFERENCE	8,101
SOUTH AMERICA			PROGRAM SERVICES	STUDY ABROAD	83,910

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA			PROGRAM SERVICES	RESEARCH	3,921
SOUTH AMERICA			PROGRAM SERVICES	RECRUITING	6,466
SOUTH ASIA			PROGRAM SERVICES	RESEARCH/CONFERENCE	19,630

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA			PROGRAM SERVICES	RECRUITING	6,483
SOUTH ASIA			PROGRAM SERVICES	CONFERENCE	8,446
SOUTH ASIA			PROGRAM SERVICES	RESEARCH	8,014

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	CONFERENCE	4,500
SUB-SAHARAN AFRICA			PROGRAM SERVICES	RESEARCH/CONFERENCE	19,598
SUB-SAHARAN AFRICA			PROGRAM SERVICES	STUDY ABROAD	118,511

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	19,676
SUB-SAHARAN AFRICA			PROGRAM SERVICES	RECRUITING	4,500

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

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

1

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

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

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

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 RUFFALOCODY LLC 65 KIRKWOOD NORTH RD SW CEDAR RAPIDS, IA 524063018	TELEMARKET		No	495,371	360,171	135,200
2 MARTS LUNDY INC 1200 WALL STREET WEST LYNDHURST, NJ 07071	CONSULTING		No		37,444	-37,444
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				495,371	397,615	97,756

3

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

AL, AR, CA, CT, FL, GA, HI, IL, KS, LA, MD, ME, MN, MO, MS, NC, ND, NJ, NM, OH, OK, OR, PA, RI, TN, UT, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>TATE LECTURE SE</u>	<u>ATHLETIC FORUM</u>	<u>11</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
1	Gross receipts	. . .	1,774,166	764,986	974,965	3,514,117	
2	Less Contributions	. .	688,549	343,860	647,648	1,680,057	
3	Gross income (line 1 minus line 2)	. . .	1,085,617	421,126	327,317	1,834,060	
Direct Expenses	4	Cash prizes	. . .		3,000	3,000	
	5	Noncash prizes	. .		24,312	24,312	
	6	Rent/facility costs	. .	131,213	2,754	80,577	214,544
	7	Food and beverages	.	82,157	297,199	175,193	554,549
	8	Entertainment	. . .	692,065	407,335	142,356	1,241,756
	9	Other direct expenses	.	494,412	25,880	221,927	742,219
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(2,780,380)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-946,320

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

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

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states?

Yes

No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Yes

No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity operated in		
a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 

Address 

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____

c If "Yes," enter name and address of the third party

Name 

Address 

16 Gaming manager information

Name 

Gaming manager compensation  \$

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART IV	DURING FISCAL YEAR 2014, MARTS & LUNDY INC PROVIDED CONSULTING SERVICES AND ASSISTANCE WITH CAMPAIGN ORGANIZATIONAL STRUCTURE AND STRATEGY, IN RELATION TO THE SMU UNBRIDLED THE SECOND CENTURY CAMPAIGN DURING FISCAL YEAR 2014, RUFFALOCODY LLC PROVIDED TELEMARKETING SERVICES

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ST PHILIP'S SCHOOL & COMMUNITY CTR 1600 PENNSYLVANIA AVE DALLAS, TX 75215	75-1097360	501C3	6,500				EVENT SPONSORSHIP
(2) THE NATIONAL FOOTBALL FOUNDATION 433 EAST LAS COLLINAS BLVD STE 1130 IRVING, TX 75039	22-1508812	501C3	8,000				SPONSORHIP, MEMBER
(3) COMMUNITIES FOUNDATION OF TEXAS 5500 CARUTH HAVEN LN DALLAS, TX 75225	75-0964565	501C3	25,000				COMMUNITY SUPPORT
(4) US CONFERENCE OF MAYORS PO BOX 655237 DALLAS, TX 752655237	46-3073520	501C6	25,000				CONF SPONSORSHIP

- 2

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

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

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT TUITION GRANTS	6980	5,278,815	145,528,188	BOOK	TUITION, FEES,
(2) AND SCHOLARSHIPS					ROOM AND BOARD
(3)					ALLOWANCES

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, PAGE 1, PART I, LINE 2	THE UNIVERSITY PROVIDES FINANCIAL AID TO STUDENTS TO ENABLE THEM TO ATTEND THE UNIVERSITY ALL FINANCIAL AID RECIPIENTS ARE SELECTED ON AN EQUAL OBJECTIVELY DETERMINABLE BASIS WITH OTHER RECIPIENTS THAT IS, ALL STUDENTS RECEIVING SCHOLARSHIPS AND FELLOWSHIPS ARE JUDGED WORTHY BASED ON THE UNIVERSITY'S ASSESSMENT OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND OTHER SIMILAR STANDARDS A LIST OF RECIPIENTS OF SCHOLARSHIPS AND FELLOWSHIPS IS ON FILE AT THE UNIVERSITY IN THE FINANCIAL AID OFFICE

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

Part I

Questions Regarding Compensation

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part IIISupplemental 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

Return Reference	Explanation
SCHEDULE J, PAGE 1, PART I, LINE 1A	CHARTER FLIGHT AND FIRST-CLASS TRAVEL COSTS WERE INCURRED BY COACH LARRY BROWN FOR RECRUITING PURPOSES THE UNIVERSITY'S TRAVEL POLICY PROVIDES THAT EXPENSES INCURRED BY SPOUSES ARE NOT REIMBURSABLE UNLESS THE SPOUSE IS TRAVELING FOR A BONA FIDE BUSINESS PURPOSE AND THE TRAVEL HAS BEEN APPROVED ANY EXCEPTIONS TO THE POLICY REQUIRE APPROVAL BY THE APPROPRIATE UNIVERSITY OFFICER ALL SPOUSAL TRAVEL IS PROCESSED UNDER THE PROVISIONS OF THE TAX DEPARTMENT'S SPOUSAL TRAVEL POLICY WHICH PROVIDES FOR EVALUATING THE TAXABLE COMPONENT, IF ANY, OF THE TRAVEL AND THE APPROPRIATE TAX TREATMENT AND REPORTING APPROPRIATE APPROVALS IN ACCORDANCE WITH POLICY ARE REQUIRED PRIOR TO REIMBURSEMENT SPOUSAL TRAVEL EXPENSES WERE PAID AND WERE REPORTED AS TAXABLE COMPENSATION FOR R GERALD TURNER AND BRAD CHEVES ALL GROSS-UP PAYMENTS HAVE BEEN APPROPRIATELY APPROVED IN ACCORDANCE WITH UNIVERSITY POLICY PRIOR TO PAYMENT EMPLOYEES WHO RECEIVED GROSS-UP PAYMENTS FOR PAYROLL TAXES WHICH WERE REPORTED AS TAXABLE COMPENSATION WERE WILLIAM DILLON AND ALBERT NIEMI THE PRESIDENT IS REQUIRED UNDER HIS EMPLOYMENT CONTRACT TO RESIDE IN THE UNIVERSITY PROVIDED RESIDENCE THERE IS A POLICY REGARDING REVIEW/APPROVAL OF SOCIAL CLUB DUES THE UNIVERSITY HAS ESTABLISHED A REPORTING PERIOD OF NOVEMBER 1 THROUGH OCTOBER 31 FOR REPORTING PERSONAL USE OF A CLUB AND CALCULATING THE PERSONAL PORTION OF DUES THAT SHOULD BE REPORTED AS TAXABLE INCOME ANY PERSONAL CHARGES AT SOCIAL CLUBS ARE REIMBURSED TO THE UNIVERSITY WHEN THE BILLING IS RECEIVED, PRIOR TO PAYMENT THE EMPLOYEES WHO HAD PERSONAL AMOUNTS REPORTED AS TAXABLE COMPENSATION RELATED TO SOCIAL CLUB DUES ARE R GERALD TURNER, BRAD CHEVES, LORI WHITE, CHRIS REGIS, ALBERT NIEMI, AND LARRY BROWN THE UNIVERSITY PROVIDES SERVICES SUCH AS LANDSCAPING AND RESIDENTIAL REPAIRS AND MAINTENANCE FOR THE PRESIDENT'S RESIDENCE, CONSIDERING THEM NECESSARY AND APPROPRIATE FOR HIS USE OF THE FACILITY FOR BUSINESS FUNCTIONS AS THE RESIDENCE IS A UNVERSITY OWNED ASSET THE PERCENTAGE OF THE MAID'S COMPENSATION AND BENEFITS RELATED TO PERSONAL SERVICES WAS REPORTED AS TAXABLE COMPENSATION TO R GERALD TURNER
SCHEDULE J, PAGE 1, PART I, LINE 5A	THERE IS ONE PERSON LISTED IN FORM 990, PART VII, WHO RECEIVED AN INCENTIVE COMPENSATION BONUS THE ELIGIBILITY FOR AND THE AMOUNT OF THE PAYMENT IS DETERMINED BY TWO COMPONENTS A QUANTITATIVE MEASURE OF THE PERFORMANCE OF THE UNIVERSITY'S INVESTMENT POOL AGAINST AN APPROPRIATE BENCHMARK AND A QUALITATIVE MEASURE BASED ON FACTORS SUCH AS RISK MITIGATION, QUALITY OF DECISION MAKING AND CONTRIBUTIONS TO ADVANCEMENT OF THE ENDOWMENT

Additional Data

Software ID:
Software Version:
EIN: 75-0800689
Name: SOUTHERN METHODIST UNIVERSITY

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
R GERALD TURNER PRESIDENT/TRUSTEE	(i) (ii)	654,636	250,000	57,203	258,016	128,067	1,347,922	
SANTANU ROY PROFESSOR/TRUSTEE	(i) (ii)	156,594		515	15,750	31,236	204,095	
MICHAEL A CONDON UNIVERSITY TREASURER	(i) (ii)	381,958	188,953	21,077	25,500	20,712	638,200	
BRAD E CHEVES VP DEVELOPMENT AND E	(i) (ii)	350,458	75,000	29,286	25,500	19,712	499,956	
PAUL W LUDDEN PROVOST/VP ACADEMIC	(i) (ii)	420,130		18,698	25,500	15,037	479,365	
CHRISTINE REGIS VP BUSINESS AND FINA	(i) (ii)	334,581	25,000	19,105	25,500	18,922	423,108	
PAUL WARD VP LEGAL AFFAIRS AND	(i) (ii)	327,291	25,000	17,498	50,500	15,627	435,916	
THOMAS E BARRY VP EXECUTIVE AFFAIRS	(i) (ii)	269,125	25,000	16,944	25,500	16,127	352,696	
LORI S WHITE VP STUDENT AFFAIRS	(i) (ii)	276,081		16,098	25,500	16,337	334,016	
ALBERT NIEMI JR DEAN	(i) (ii)	567,785	6,798	13,414	25,500	19,863	633,360	
WILLIAM TSUTSUI DEAN	(i) (ii)	257,166		8,842	25,500	10,104	301,612	
LARRY BROWN BASKETBALL COACH	(i) (ii)	2,192,620	7,500	9,474	507,030	25,710	2,742,334	
JUNE JONES FOOTBALL COACH	(i) (ii)	1,906,462	32,500	20,224	25,500	18,253	2,002,939	
TIMOTHY JANKOVICH BASKETBALL COACH	(i) (ii)	544,500		3,187	25,500	23,830	597,017	
WILLIAM DILLON SR ASSOC DEAN BUSINE	(i) (ii)	485,102	34,051	4,963	25,500	23,865	573,481	
MIGUEL QUINONES PROFESSOR	(i) (ii)	499,731		486	21,275	24,793	546,285	
PETER MOORE FORMER INTERIM DEAN	(i) (ii)	187,274		550	16,575	24,930	229,329	

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number
75-0800689

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A 2007 SOUTHWEST HIGHER EDUCATION	52-1442059	845040GD0	02-14-2007	100,890,740	ADVANCE REFUND & DEFEASE A PORTION		X		X		X
B 2009 SOUTHWEST HIGHER EDUCATION	52-1442059	845040HG2	10-01-2009	162,035,907	FINANCE NEW MONEY PROJECTS AND CURRENTLY REFUND		X		X		X
C 2010 SOUTHWEST HIGHER EDUCATION	52-1442059	845040JB1	10-28-2010	124,998,461	FINANCE NEW MONEY PROJECTS		X		X		X
D 2013 SOUTHWEST HIGHER EDUCATION	52-1442059	845040JZ8	04-16-2013	107,014,349	FINANCE NEW MONEY PROJECTS		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	9,715,000		9,790,000					
2	Amount of bonds legally defeased								
3	Total proceeds of issue	114,937,923		162,036,208		125,317,215		107,222,240	
4	Gross proceeds in reserve funds	2,230,707							
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	922,858		1,236,365		1,091,820		817,216	
8	Credit enhancement from proceeds	384,931							
9	Working capital expenditures from proceeds					18			
10	Capital expenditures from proceeds			66,161,260		124,225,377		13,090,874	
11	Other spent proceeds	113,630,132		94,638,583					
12	Other unspent proceeds							93,314,150	
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X	X			X		X
15	Were the bonds issued as part of an advance refunding issue?	X			X		X		X
16	Has the final allocation of proceeds been made?	X		X		X			X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X			X
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?	X		X		X			
c	Are there any research agreements that may result in private business use of bond-financed property?	X		X			X		X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X		X					
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	1 700 %		0 690 %		0 020 %			
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5	1 700 %		0 690 %		0 020 %			
7	Does the bond issue meet the private security or payment test?		X		X		X		X
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?		X		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X		X		X	

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X	X		X		X	
b	Exception to rebate?		X		X		X		X
c	No rebate due?	X			X		X		X
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X		X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X	X	
b	Name of provider							DEUTSCHE BANK	
c	Term of GIC							2 8000000000000	
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								X
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V

Procedures To Undertake Corrective Action

	A		B		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 self-remediation is not available under applicable regulations?								

Part VI

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

Return Reference	Explanation
SCHEDULE K - PURPOSE OF ISSUE DESCRIPTION	2007 SOUTHWEST HIGHER EDUCATION ADVANCE REFUND & DEFEASE A PORTION OF PRINCIPAL ON THE 1999A (1/20/99) AND 2002 (7/3/2002) BONDS 2009 SOUTHWEST HIGHER EDUCATION FINANCE NEW MONEY PROJECTS AND CURRENTLY REFUND THE 1999D (1/20/1999) AND THE 2006 (3/1/2006) BONDS 2010 SOUTHWEST HIGHER EDUCATION FINANCE NEW MONEY PROJECTS 2013 SOUTHWEST HIGHER EDUCATION FINANCE NEW MONEY PROJECTS

Return Reference	Explanation
SCHEDULE K - DATE REBATE COMPUTATION PERFORMED	2007 SOUTHWEST HIGHER EDUCATION 02/14/12

Return Reference	Explanation
SCHEDULE K - ADDITIONAL INFORMATION	2007 SOUTHWEST HIGHER EDUCATION PART II, LINE 3, COLUMN A TOTAL PROCEEDS INCLUDES INTEREST ON ADVANCE REFUNDING ESCROW BEFORE ALL BONDS WERE CALLED 10/01/2012 PART II, LINE 3, COLUMN B,C,& D TOTAL PROCEEDS INCLUDE INVESTMENT PROCEEDS PART II, LINE 6, COLUMN A REDEEMED THE 2002 BOND WITH ESCROW PROCEEDS 45,175,000 AND SMU CASH 2,200,000 ON 10/1/2012 REDEEMED THE 1999A BOND WITH PROCEEDS 43,645,000 ON 10/1/2009 PART II, LINE 11, COLUMN A & B INCLUDED THE REFUNDING AS OTHER UNSPENT PROCEEDS IN THIS YEAR GOING FORWARD PART II, LINE 13, COLUMN A THE SERIES 2007 BONDS WERE REFUNDING BONDS THERE WERE NO NEW PROJECTS FOR WHICH A YEAR OF SUBSTANTIAL COMPLETION WOULD NEED TO BE REPORTED PART II, LINE 17, COLUMN A,B,C,& D THE UNIVERSITY HAS MAINTAINED ADEQUATE BOOKS AND RECORDS FOR THE ALLOCATIONS MADE TO DATE SMU ALWAYS MAINTAINS ADEQUATE BOOKS AND RECORDS WHEN THE FINAL ALLOCATIONS ARE MADE PART IV, LINE 2C, COLUMN A & B DATE REBATE COMPUTATION PERFORMED 2007 SOUTHWEST HIGHER EDUCATION 2/14/2012 PART IV, LINE 5, COLUMN A,B, & C THE UNIVERSITY DID NOT INVEST IN A GIC, HOWEVER, ANSWERS ARE PROVIDED AS THEY ARE REQUIRED BY THE IRS FOR FILING PURPOSES PART IV, LINE 6, COLUMN C & D THE UNIVERSITY REASONABLY EXPECTS TO MEET THE SPENDING REQUIREMENTS WITHIN THE REQUIRED TIMEFRAME

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

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

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

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

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

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			Yes	No		Yes	No
Total ▶ \$											

Part III Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		34,500	MERIT SCHOLAR	EDUCATION

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
SCHEDULE L, PART V	SCHEDULE L, PART III - THE AMOUNT REPORTED ON PART III, LINE 1(C) REPORTS THE MERIT SCHOLARSHIPS AWARDED ON AN OBJECTIVE AND NON-DISCRIMINATORY BASIS BASED ON PRE-ESTABLISHED CRITERIA AND REVIEWED BY A SELECTION COMMITTEE

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.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1 g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	12	289,029	MARKET OR APPRAISAL
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		967,254	MARKET OR APPRAISAL
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	190	7,094,863	MARKET OR APPRAISAL
10 Securities—Closely held stock	X	1	858	MARKET OR APPRAISAL
11 Securities—Partnership, LLC, or trust interests	X	4	180,259	MARKET OR APPRAISAL
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	X	1	1	SEE PART II
18 Collectibles	X	4	2,281	MARKET OR APPRAISAL
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (EQUIPMENT)	X	13	126,028	MARKET OR APPRAISAL
26 Other ▶ (EVENT TICKETS)	X	794	98,058	MARKET OR APPRAISAL
27 Other ▶ (EVENT EXPENSE)	X	42	30,198	MARKET OR APPRAISAL
28 Other ▶ (OTHER)	X	12	704,784	SEE PART II

29

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

23

30a

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

30a

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

b

If "Yes," describe in Part II

33

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

Part II

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

Return Reference	Explanation
SCHEDULE M, PAGE 1, PART I, LINE 32B	SOUTHERN METHODIST UNIVERSITY HIRES EXTERNAL BROKERS AND APPRAISERS AS DEEMED APPROPRIATE
SCHEDULE M, PAGE 2, PART II	PART 1, LINE 17, COL (D), REAL ESTATE - OTHER CONSISTENT WITH UNIVERSITY'S PRACTICE FOR VALUATION OF MINERAL INTERESTS FOR FINANCIAL STATEMENT PRESENTATION PART 1, LINE 28, OTHER - DETAIL COL (B) COL (C) PART 1, LINE 28, OTHER LIVESTOCK 5 470,000 PART 1, LINE 28, OTHER PAVERS 2 128,788 PART 1, LINE 28, OTHER TRAVEL EXPENSE 4 100,996 PART 1, LINE 28, OTHER MUSICAL INSTRUMENTS 1 5,000 ===== TOTAL PART 1 LINE 28 12 704,784 PART 1, LINE 28, COL (D), OTHER MARKET OR APPRAISAL PART 1, COLUMN B THE NUMBERS SHOWN IN COLUMN B REPRESENT THE NUMBER OF CONTRIBUTIONS

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

2013

**Open to Public
Inspection**

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number

75-0800689

Return Reference	Explanation
FORM 990	PART IV, LINE 12 THE UNIVERSITY DID NOT RECEIVE A SEPARATE AUDITED FINANCIAL STATEMENT HOWEVER, THE UNIVERSITY'S CONSOLIDATED FINANCIAL STATEMENTS INCLUDING THE BALANCE SHEET AND RELATED STATEMENTS OF ACTIVITIES AND CASH FLOWS WERE AUDITED IN ACCORDANCE WITH GAAP AND WERE REPORTED ON A CONSOLIDATED BASIS PART IV, LINE 24B THE UNIVERSITY PLANS TO SPEND PROCEEDS WITHIN THE TEMPORARY PERIOD EXCEPTION, BUT IN CASES WHEN IT DOES NOT, IT PREPARES THE APPROPRIATE ARBITRAGE REPORTING AND REMITS ANY EXCESS EARNINGS OVER THE ARBITRAGE YIELD TO THE GOVERNMENT PART IV, LINE 24C THE UNIVERSITY RECEIVED IN A PRIOR YEAR A DONATION RESTRICTED FOR PROJECTS FUNDED BY BONDS WHICH IT PUT INTO ESCROW UNTIL THE EARLIEST OPTIONAL REDEMPTION DATE

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	ORGANIZED ACTIVITIES ORGANIZED ACTIVITIES MAKE AVAILABLE TO THE PUBLIC VARIOUS RESOURCES THAT EXIST WITHIN THE UNIVERSITY SUCH AS SEMINARS, CONFERENCES AND CAMPS

Return Reference	Explanation
FORM 990, PART V, LINE 4B	UNITED KINGDOM, FRANCE

Return Reference	Explanation
FORM 990, PART VI	SECTION B, LINE 14 SOUTHERN METHODIST UNIVERSITY DOES NOT HAVE A UNIVERSITY-WIDE RETENTION POLICY , BUT DEPARTMENTS WITHIN THE UNIVERSITY HAVE RETENTION AND DOCUMENT DESTRUCTION POLICIES THAT REFLECT LEGISLATIVE OR OTHER LEGAL REQUIREMENTS AND GOOD BUSINESS PRACTICES

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 2	R GERALD TURNER RAY HUNT PRESIDENT TRUSTEE BUSINESS RELATIONSHIP JEANNE PHILLIPS RAY HUNT TRUSTEE TRUSTEE BUSINESS RELATIONSHIP GEORGE UTKOV RAY HUNT TRUSTEE TRUSTEE BUSINESS RELATIONSHIP

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7B	PURSUANT TO THE RESTATED ARTICLES OF INCORPORATION OF SMU, CAMPUS PROPERTY MAY BE SOLD OR LEASED ONLY WITH THE CONSENT OF THE SOUTH CENTRAL JURISDICTIONAL CONFERENCE OF THE UNITED METHODIST CHURCH

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE COMPLETED FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AT A REGULARLY SCHEDULED MEETING SUFFICIENTLY IN ADVANCE OF THE FILING DEADLINE TO ENABLE A DETAILED AND CONSCIENTIOUS REVIEW BY THE COMMITTEE. ALL QUESTIONS AND CONCERNS OF THE AUDIT COMMITTEE ARE ADDRESSED BY THE UNIVERSITY AND INCORPORATED INTO THE FORM 990 AS REQUIRED. THE CHAIR OF THE AUDIT COMMITTEE REPORTS ON THIS REVIEW TO THE FULL BOARD OF TRUSTEES AT THE NEXT REGULAR MEETING OF THE BOARD OF TRUSTEES. THE CHAIR OF THE AUDIT COMMITTEE INSTRUCTS THE MEMBERS OF THE BOARD ON HOW TO ACCESS THE FORM 990 ON A SECURE WEBSITE AND ENCOURAGES ANY TRUSTEE WITH QUESTIONS TO CONTACT THE VICE PRESIDENT FOR BUSINESS AND FINANCE. ALL BOARD MEMBERS ALSO RECEIVE AN EMAIL CONTAINING INSTRUCTIONS ON HOW TO ACCESS THE FORM 990 PRIOR TO THE IRS FILING DEADLINE.

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	PURSUANT TO THE SMU CONFLICT OF INTEREST POLICY RELATING TO TRUSTEES, MEMBERS OF BOARD COMMITTEES, EXECUTIVE OFFICERS, AND DEANS, EACH COVERED PERSON COMPLETES A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY. THESE DISCLOSURES ARE REVIEWED BY A BOARD OF TRUSTEES CONFLICTS COMMITTEE. THE COMMITTEE REVIEWS THE MATERIAL FACTS AND DECIDES WHETHER SUCH FACTS GIVE RISE TO CONFLICTS OF INTEREST AND, IF SO, WHETHER SUCH CONFLICTS OF INTEREST SHOULD BE APPROVED OR DISAPPROVED. WITH RESPECT TO ANY OTHER SMU EMPLOYEES WITH AUTHORITY TO SIGN CONTRACTS OR WHO OTHERWISE PLAY A SUBSTANTIVE ROLE IN THE CONTRACT APPROVAL PROCESS FOR FINANCIAL AND OTHER COMMERCIAL COMMITMENTS OF THE UNIVERSITY, EACH SUCH PERSON MUST COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY. THESE DISCLOSURES ARE REVIEWED BY THE GENERAL COUNSEL. UPON REVIEW OF ALL MATERIAL FACTS, THE GENERAL COUNSEL MUST DECIDE WHETHER SUCH FACTS GIVE RISE TO CONFLICTS OF INTEREST AND, IF SO, WHETHER SUCH CONFLICTS OF INTEREST SHOULD BE APPROVED OR DISAPPROVED. THE GENERAL COUNSEL PROVIDES A WRITTEN REPORT OF ALL SUCH DETERMINATIONS TO THE BOARD CONFLICTS COMMITTEE.

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	THE COMPENSATION COMMITTEE OF THE SMU BOARD OF TRUSTEES CONSISTS ENTIRELY OF OUTSIDE AND INDEPENDENT MEMBERS OF THE BOARD. THE COMMITTEE MAKES COMPENSATION DECISIONS BASED UPON APPROPRIATE COMPARABILITY DATA AND INCLUDES THE ADVICE OF AN INDEPENDENT COMPENSATION CONSULTANT AND CONTEMPORANEOUS DOCUMENTATION OF THE COMPENSATION DECISIONS. THE COMPENSATION COMMITTEE HAS ALL OF THE POWERS OF THE FULL BOARD IN MATTERS OF COMPENSATION OF CORPORATE OFFICERS, THE COMPENSATION COMMITTEE MUST REPORT ANY ACTION TAKEN BY THE COMMITTEE TO THE BOARD OF TRUSTEES AT THE BOARD'S NEXT MEETING.

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	SEE ANSWER IN PART VI, LINE 15A

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 17	MINNESOTA, MISSISSIPPI, MISSOURI, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, NORTH CAROLINA, NORTH DAKOTA, OHIO, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WASHINGTON, WEST VIRGINIA, WISCONSIN

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC FORM 990, PART VI, LINE 18 - ALL REQUESTS FOR COPIES OF FORM 990 AND 990-T ARE REVIEWED AND PROCESSED BY THE TAX DEPARTMENT OF SOUTHERN METHODIST UNIVERSITY UPON RECEIVING A WRITTEN REQUEST, THE UNIVERSITY PROVIDES A COPY OF THE REQUESTED DOCUMENTATION WITHIN 30 DAYS FROM THE DATE OF RECEIPT IF THE REQUEST IS MADE IN PERSON, THE UNIVERSITY PROVIDES THE COPIES ON THE DAY OF THE REQUEST, UNLESS UNUSUAL CIRCUMSTANCES PREVENT THIS IN WHICH CASE THE REQUESTED DOCUMENTATION IS PROVIDED WITHIN FIVE DAYS AFTER THE DATE OF THE REQUEST

Return Reference	Explanation
FORM 990, PART XI	THE AUDIT COMMITTEE FOR SOUTHERN METHODIST UNIVERSITY , THE SUPPORTED ORGANIZATION, IS RESPONSIBLE FOR REVIEWING THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS AND ACCOMPANYING FOOTNOTES. DURING THE AUDIT COMMITTEE MEETING, THE COMMITTEE MEMBERS ARE GIVEN AN OPPORTUNITY TO ASK QUESTIONS OF MANAGEMENT AND THE AUDIT FIRM. SIGNIFICANT TRANSACTIONS ARE HIGHLIGHTED IN THE EXECUTIVE SUMMARY PROVIDED TO THE COMMITTEE.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SOUTHERN METHODIST UNIVERSITY

Employer identification number
75-0800689

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

Part II Identification of Related Tax-Exempt Organizations

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
See Additional Data Table							

Part III

Identification of Related Organizations Taxable as a Partnership

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

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

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUST 12 DALLAS, TX 75275	TRUST	TX	SMU	TRUST					No

Part V

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

Yes

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

No

1r

Yes

1s

Yes

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) THE STADIUM CLUB INC	N	1,000	COST
(2) ALL OTHER TRANSACTIONS MARKED YES			
(3) ABOVE ARE WITH 501(C)(3)			
(4) ORGANIZATIONS			

Schedule R (Form 990) 2013

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

[illegible]

Part VII

Supplemental Information

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

Return Reference	Explanation
SCHEDULE R	PART V, LINE 2 FOR THE FISCAL YEAR ENDING MAY 31, 2014, RENT FROM THE STADIUM CLUB, INC TO SMU WAS 1,000 THIS AMOUNT WAS DETERMINED IN ORDER TO ALLOW A SIGNIFICANT PORTION OF THE REVENUE FROM THE CLUB TO BE REINVESTED IN IT RATHER THAN INCREASING ANNUAL LEASE PAYMENTS TO SMU

Additional Data

Software ID:

Software Version:

EIN: 75-0800689

Name: SOUTHERN METHODIST UNIVERSITY

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(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) PERUNA HOLDINGS CORPORATION PO BOX 750261 DALLAS, TX 752750261 20-4039621	SUPPORTING	TX	509A3	11A	SMU		No
(1) MUSTANG MOCKINGBIRD CORPORATION PO BOX 750261 DALLAS, TX 752750261 20-4216744	SUPPORTING	TX	509A3	11A	SMU		No
(2) MUSTANG AIRLINE CORPORATION PO BOX 750261 DALLAS, TX 752750261 20-4217087	SUPPORTING	TX	509A3	11A	SMU		No
(3) MUSTANG MOCKINGBIRD PROPERTIES PO BOX 750261 DALLAS, TX 752750261 20-4216534	SUPPORTING	TX	509A3	11A	SMU		No
(4) PERUNA PROPERTIES INC PO BOX 750261 DALLAS, TX 752750261 75-2806008	SUPPORTING	TX	509A3	11A	SMU		No
(5) PONY PROPERTIES INC PO BOX 750261 DALLAS, TX 752750261 20-0884887	SUPPORTING	TX	509A3	11A	SMU		No
(6) SOUTHERN METHODIST UNIVERSITY FOUND PO BOX 750261 DALLAS, TX 752750261 20-0588905	SUPPORTING	TX	509A3	11A	SMU		No
(7) THE STADIUM CLUB INC PO BOX 750261 DALLAS, TX 752750261 75-2883207	SOCIAL CLB	TX	501C7		NA		No
(8) SMU CORP PO BOX 750261 DALLAS, TX 752750261 26-4739435	SUPPORTING	TX	501C3	11A	SMU		No
(9) CONFERENCE USA 5201 NORTH OCONNOR BLVD SUITE 300 IRVING, TX 752750261 36-4021594	SUPPORTING	TX	501C3	11C	NA		No
(10) PERUNA EAST CORPORATION PO BOX 750261 DALLAS, TX 752750261 45-4611768	SUPPORTING	TX	501C3	11A	SMU		No
(11) SMU GOLF FOUNDATION PO BOX 750261 DALLAS, TX 752750261 46-5131991	SUPPORTING	TX	PENDIN		SMU		No

TY 2013 GeneralDependencySmall**Name:** SOUTHERN METHODIST UNIVERSITY**EIN:** 75-0800689**Business Name or Person Name:****Taxpayer Identification Number:****Form, Line or Instruction****Reference:****Regulations Reference:****Description:** WAIVE NOL CARRYBACK**Attachment Information:**