efil				-	-			45-0047
- orm	99	0 Return of Organization Exempt From I	ncor	ne 1	ax		OMBNo 15	
5		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue foundations)	e Code ((excej	ot private	2	201	13
epartm	ent of the	Treasury 🕨 Do not enter Social Security numbers on this form as it may be mad		ıc By	law, the I	RS	Open to	
iemal F	Revenue	Service generally cannot redact the information on the service Finformation about Form 990 and its instructions is at <u>www.IRS.gov</u>		<u>90</u>			Inspec	
Fo	rthe 2	2013 calendar year, or tax year beginning 09-28-2013 , 2013, and ending 09-26	-2014					
Che	ck if ap	oplicable C Name of organization Southwest Research Institute			D Emplo	yer i	dentification nu	mber
Add	ress cha				74-10	0705	44	
Nan	ne chan	nge						
Initi	al retur	Number and screet (of P or box in mains not delivered to screet address) Room/ suite	2	ł	E Telepho	one n	umber	
Terr	minated	PO Drawer 28510			(210)	684	-5111	
Ame	ended n	eturn City or town, state or province, country, and ZIP or foreign postal code San Antonio, TX 782280510			(210)	004	5111	
Арр	lication	pending			G Gross r	eceipt	s \$ 529,095,142	
		F Name and address of principal officer			s a group	retu		_
		Beth Ann Rafferty PO Drawer 28510		subor	dınates?		ΓYe	s 🔽 No
		San Antonio, TX 782280510	H(b)	A rea	ll subordı	nate	s 🔽 Ye	s∏No
				Includ	led?			
lax	-exem	pt status 🔽 501(c)(3) 🔽 501(c) () ◀ (Insert no) 🔽 4947(a)(1) or 🔽 527		it"No	," attach	a lis	st (see instruc	tions)
W	ebsite	:► www.swriorg	H(c)	Grou	p exempt	ion r	iumber 🕨	
Forn	n of org	anization 🔽 Corporation 🗍 Trust 🗍 Association 🗍 Other 🕨	L Yea	ar of for	mation 19	66	M State of legal	domicile T
Pa	rt I	Summary						
	2 C	Check this box 🏹 if the organization discontinued its operations or disposed of	more t	han 2	5% of its	net	assets	
	2 C	Check this box 🏹 if the organization discontinued its operations or disposed of	more t	han 2	5% of its	net	assets	
				han 2	5% of its	I	assets	
	3 N	Number of voting members of the governing body (Part VI, line 1a)		han 2	5% ofits	3	assets	
	3 N 4 N	Number of voting members of the governing body (Part VI, line 1a)	 			3 4	assets	1
	3 N 4 N 5 T	Number of voting members of the governing body (Part VI, line 1a)	· · · ·	 		3 4 5	assets	1
	3 N 4 N 5 T 6 T	Number of voting members of the governing body (Part VI, line 1a)	 	· · · · · · · · · · · · · · · · · · ·		3 4		1 3,27
	3 N 4 N 5 T 6 T 7a T	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	 	· · · · · · · · · · · · · · · · · · ·		3 4 5 6	66	1 3,27 5,298,08
	3 N 4 N 5 T 6 T 7a T	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	 	· · · · · · · · · · · · · · · · · · ·		3 4 5 6 7a	66	1 3,27 5,298,08 2,321,17
	3 N 4 N 5 T 6 T 7a T	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	 	· · · · · · · · · · · · · · · · · · ·		3 4 5 6 7a 7b	66	1 3,27 5,298,08 2,321,17 Year
	3 N 4 N 5 T 6 T 7a T b N	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	 	Prio	r Year 802, 67,957,	3 4 5 7a 7b 062 302	66 -2 Current V 526	1 3,27 5,298,08 2,321,17 Year 926,777 ,628,21
	3 N 4 N 5 T 6 T 7a T b N 8 9	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	 	Prio	Year 802, 67,957, 442,	3 4 5 7a 7b 062 302	66 -2 Current V 526	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a)	 	Prio	r Year 802, 67,957,	3 4 5 7a 7b 062 302	66 -2 Current V 526	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67
	3 N 4 N 5 T 6 T 7a T b N 8 9	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a)	 	• • • • • • • • • • • • • • • • • • •	Year 802, 67,957, 442,	3 4 5 6 7a 7b 062 302 525 106	66 -2 Current V 526 1	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a)	 	• • • • • • • • • • • • • • • • • • •	Year 802, 67,957, 442, 436,	3 4 5 7a 7b 062 302 525 106 595	66 -2 Current V 526 1	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74 ,032,41
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a)	 	• • • • • • • • • • • • • • • • • • •	Year 802, 67,957, 442, 436, 69,638,	3 4 5 7a 7b 062 302 525 106 595	66 -2 Current V 526 1	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74 ,032,41 403,17
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13	Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) Total number of volunteers (estimate if necessary) . Total unrelated business revenue from Part VIII, column (C), line 12 . Total unrelated business taxable income from Form 990-T, line 34 . Contributions and grants (Part VIII, line 1h) . . Program service revenue (Part VIII, line 2g) . . Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines . .	 	• • • • • • • • • • • • • • • • • • •	r Year 802,0 67,957,0 442,0 436,0 69,638,0 360,	3 4 5 7a 7b 062 302 525 1066 595 182 0	66 -2 Current V 526 1 529	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74 ,032,41 403,17
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	 	• • • • • • • • • • • • • • • • • • •	Year 802, 67,957, 442, 436, 69,638,	3 4 5 7a 7b 062 302 525 1066 595 182 0	66 -2 Current V 526 1 529	1 3,27 5,298,08 2,321,17 Year 926,777 ,628,21 ,034,67 442,74 ,032,41 403,17
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15 16a	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	 	• • • • • • • • • • • • • • • • • • •	r Year 802,0 67,957,0 442,0 436,0 69,638,0 360,	3 4 5 7a 7b 062 302 525 106 595 182 0 451	66 -2 Current V 526 1 529	1 3,27 5,298,08 2,321,17 Year 926,777 ,628,21 ,034,67 442,74 ,032,41 403,17
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Total unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	 	• • • • • • • • • • • • • • • • • • •	r Year 802,0 67,957,0 442,0 436,0 69,638,0 360,	3 4 5 7a 7b 062 302 595 106 595 182 0 451 0	66 -2 Current V 526 1 529 278	1 3,27 5,298,08 2,321,17 Year 926,777 ,628,21 ,034,67 442,74 ,032,41 403,17
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15 16a b	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	 	Prior 5 5	Year 802, 67,957, 442, 436, 69,638, 360, 77,353,	3 4 5 7a 7b 062 302 525 106 595 182 0 451 0 0	66 -2 Current V 526 1 529 278 278	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74 ,032,41 403,17 ,064,94
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15 16a b 17	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)		· · · · · · · · · · · · · · · · · · ·	r Year 802, 67,957, 442, 436, 69,638, 360, 77,353, 62,023,	3 4 5 7a 7b 0062 5955 1066 5955 1822 0 4551 0 4551 0 3666 4999	66 -2 Current V 526 1 529 278 278 247 526	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74 ,032,41 403,17 ,064,94 ,965,57 ,433,70
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15 16a b 17 18	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Total unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 1h)		Prior 5 5 1 3 5 1	r Year 802, 67,957, 442, 436, 69,638, 360, 77,353, 62,023, 39,737, 29,901, of Curre	3 4 5 6 7a 7b 0262 3022 5255 1066 5955 1822 0 4511 0 33666 499 0096	66 -2 Current V 526 1 529 278 278 247 526	1 3,27 5,298,08 2,321,17 Year 926,77 ,628,21 ,034,67 442,74 ,032,41 403,17 ,064,94 ,064,94 ,965,57 ,433,70 ,598,70
	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15 16a b 17 18	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 1h)		Prior 5 5 5 1 1 3 5 5	r Year 802, 67,957, 442, 436, 69,638, 360, 77,353, 62,023, 39,737, 29,901,	3 4 5 6 7a 7b 525 106 595 182 0 4511 0 3666 499 096 nt	Current Y 526 1 526 1 529 278 278 247 526 247 526 2 247	1 3,27 5,298,08 2,321,17 Year 926,77 628,215 ,034,67 442,740 ,032,410 403,17 0 ,064,947 0 ,965,577 ,433,701 ,598,705
Fund Brances EXD Anses Havenue	3 N 4 N 5 T 6 T 7a T b N 8 9 10 11 12 13 14 15 16a b 17 18 19	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Total unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 1h)		• • • • • • • • • • • • • • • • • • •	r Year 802, 67,957, 442, 436, 69,638, 360, 77,353, 62,023, 39,737, 29,901, of Curre ear	3 4 5 7a 7b 2062 3022 525 1066 5955 1822 0 0 4551 0 4551 0 3666 4999 0966 nt	66 -2 Current V 526 1 529 278 278 247 526 247 526 247 526 247 526 247 526 247 526	926,776 ,628,215 ,034,679 442,740 ,032,410 403,177 ,064,947 ,064,947 ,965,577 ,433,701 ,598,709

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

	*	****								
Sign	S	ignature of officer								
Here		Beth Ann Rafferty CFO & Vice President, Finance								
	ŢΤ	ype or print name and title								
		Print/Type preparer's name	Preparer's signature							
Paid Preparer		Firm's name	I							
Use Onl	у	Firm's address 🕨								

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

Form	990 (2013)				Page 2
Par	t IIII Statement of Program Check If Schedule O contai			п	ম
1	Briefly describe the organization's	mission			
techi	Eexists to benefit government, indu nology, establishing, maintaining & ntific, charitable, testing for public s	operating research facilitie	s, & providing a ch		
2	Did the organization undertake any the prior Form 990 or 990-EZ?			which were not listed on	∏Yes 🔽 No
	If "Yes," describe these new servi				
3	Did the organization cease conduct services?			nducts, any program	🗌 Yes 🔽 No
4	If "Yes," describe these changes of Describe the organization's progra expenses Section 501(c)(3) and s the total expenses, and revenue, if	m service accomplishmen 501(c)(4) organizations ar	e required to report		
4a	(Code) (Expense	es \$ 450,754,695 in	cluding grants of \$	403,177) (Revenue \$	460,330,129)
	Southwest Research Institute exists to be technology, establishing, maintaining an testing for public safety, literary and edu Additional information regarding federal o	enefit government, industry and d operating research facilities, ar cational purposes Scientific Rese	nd providing a challengir arch and Development (g innovative applied and basic research ig and rewarding work environment to directly related services are described a	n developing/transferring fulfill its scientific, charitable,
4b	(Code) (Expense	es \$ inc	luding grants of \$) (Revenue \$)
	(Code) (Expense	25 \$ INC	luding grants of \$) (Revenue \$)
4d	Other program services (Describ (Expenses \$	e in Schedule O) including grants of \$) (Revenue \$)
4e	Total program service expenses 🕨	450,754,695			
					Form 990 (2013)

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)? <i>If "Yes," complete Schedule A</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 💁	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		No
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 🔀	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
с	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i> 🔂	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	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 \ldots	13		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "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		

Form	990 (2013)			Page 4
Par	t IV Checklist of Required Schedules (continued)			_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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? If "Yes," complete Schedule I, Parts I and III	22		No
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
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \cdot .	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> 🔞	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔞	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <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? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 😨	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		E	orm 000	1(2013)

Form **990** (20 , -

	990 (2013)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
		<u> </u>	Yes	.) No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 671			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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 2a 3,273			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? \ldots .	Зa	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶ <mark>CH</mark> See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $$. $$.	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? \ldots . \ldots .	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		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			
h	required?	7g		
8	Form 1098-C?	7h		
•		8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
U	year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
с	Enter the amount of reserves on hand	ĺ		
14a	Did the organization receive any payments for indoor tanning services during the tax year? \ldots \ldots	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form	990 (2013)			Page 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chang See instructions. Check if Schedule O contains a response or note to any line in this Part VI			
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 13			
	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	_		
-	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu		
		10	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			<u> </u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	O ther officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		_	
	organization's exempt status with respect to such arrangements?	16b	Yes	
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed CK			
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			

(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 ▶Beth Ann Rafferty 6220 Culebra Road San Antonio,TX 78228 (210)684-5111

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

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

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

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

◆ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

+ List all of the organization's current key employees, if any See instructions for definition of "key employee "

◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(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- 2/1000 MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustaa or dilector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organızatıon and related organızatıons
										Form 990 (2013)

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t perso	tion (han d on is	one l both	oox, an c /tru	heck unless officer stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	c or	(F) Estima nount of ompens from t ganizatio relate organiza	other ation he on and
1b	Sub-Total		•••	•				►					
С	Total from continuation sheet	s to Part VII, S	ection A	۰.	•	•	•	•					
	Total (add lines 1b and 1c) .	• • • •					•	•	9,198,850		ו	1	,049,494
2	Total number of individuals (in \$100,000 of reportable compe	-					a abov	e) w	no received more th	ian			
												Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ										5		No

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
University of New Hamphire 51 College Road Durham NH 03824	R&D Services	6,587,464
Johns Hopkins University 111000 John Hopkins Laurel MD 20723	R&D Services	4,641,530
University of Colorado Campus Box 572 Boulder CO 80309	R&D Services	2,897,467
Sierra Nevada 444 Salomon Circle Sparks NV 89436	R&D Services	2,783,939
Surrey Satellite 345 Inverness Dr Englewood CO 80112	R&D Services	2,310,875
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 ►53

Form 99		-	f Devenue					Page 9
	/1111	Statement o		oonse or note to any l	ine in this Part VIII	<u></u>		<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1	1a				
unt	Ь	Membership du	ies	1b				
Contributions, Gifts, Grants and Other Similar Amounts	с	Fundraising eve	ents	1c				
ifts, ar A	d	Related organiz	zations 1	Ld 677,133				
nii Gi	e	Government grant	<i>,</i>	 le				
Sir	f	All other contributi		1f 249,643				
her	.	sımılar amounts no	ot included above					
Ē	g	Noncash contributi 1a-1f \$	ions included in lines	249,643				
anc Gor	h	Total. Add line:	s1a-1f	· · · •	926,776			
				Business Code				
nua	2a	Research & Develo	opment	541700	526,578,040	460,279,954	66,298,086	
Rev	Ь	Signature Science		541700	50,175	50,175		
AC e	c							
Program Service Revenue	d							
E E	e							
r ogr	f	All other progra	am service revenue					
<u> </u>	g	Total. Add lines			526,628,215			
	3		come (including divid ar amounts)					
	4		stment of tax-exempt bo		1,034,679			1,034,679
	5	Royalties .		<u> ►</u>	363,051			363,051
	6a	Gross rents	(I) Real 142,421	(II) Personal	-			
	b	Less rental	62,732		-			
	c c	expenses Rental income	79,689		-			
	d	or (loss) Net rental unco	me or (loss)		79,689			79,689
		Net rentar meo	(I) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	Ь	Less cost or						
		other basis and sales expenses						
	C d	Gain or (loss)			-			
	d 8a	Gross income f	from fundraising	· · · · · •				
a		events (not inc						
Other Revenue		<pre>\$</pre>	s reported on line 1c)				
Ř		See Part IV, lır						
ler	Ь	less directer	penses	ab	-			
ŧ	c		(loss) from fundraisir		-			
	9a	Gross income f	from gaming activitie	s				
		See Part IV, lır	ne 19	а				
	ь	Less dırectex	penses	b				
	c	Net income or	(loss) from gaming a	ctivities 🕨				
	10a	Gross sales of returns and allo						
		recurns and and	a a a a a a		-			
	Ь	Less costofg	oodssold b	•				
	с		(loss) from sales of II					
	11-	Miscellaneou	s Revenue	Business Code	4			
	11a b							
	C C							
	d	All other reven	ue					
	e	Total. Add line:	s 11a-11d					
	12	Total revenue.	See Instructions .				<u> </u>	
	1			F	529,032,410	460,330,129	66,298,086	1,477,419

Section Do no 7b, 8b	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns Al Check if Schedule O contains a response or note to any line in this of include amounts reported on lines 6b,				
7b, 8t	ot include amounts reported on lines 6b,	Part IX			
7b, 8t					<u></u>
-	o, 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	403,177	403,177		
2	Grants and other assistance to individuals in the United States See Part IV , line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	7,842,189	4,185,808	3,656,381	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	205,694,522	175,182,970	30,511,552	
8	Pension plan accruals and contributions (include section 401(k)				
_	and 403(b) employer contributions)	18,361,278	15,314,964	3,046,314	
9	Other employee benefits	31,423,679	25,005,053	6,418,626	
10	Payroll taxes	14,743,279	12,380,442	2,362,837	
11	Fees for services (non-employees)				
а	Management				
Ь	Legal	1,506,694		1,506,694	
с	Accounting	102,576		102,576	
d	Lobbying	231,590		231,590	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	14,375,978	11,362,288	3,013,690	
14	Information technology	2,344,523	1,752,894	591,629	
15	Royalties				
16	Occupancy	13,833,559	8,768,449	5,065,110	
17	Travel	5,323,271	4,667,819	655,452	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	454,633		454,633	
20	Interest	523,539		523,539	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,404,930	10,472,346	15,932,584	
23	Insurance	1,857,553		1,857,553	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Project cost-non labor	163,569,436	163,569,436		
b	Purchased Services	13,528,907	14,117,886	-588,979	
с	Equipment Rental	2,094,104	1,835,656	258,448	
d	Internal Research	1,196,046	1,196,046		
е	All other expenses	618,238	539,461	78,777	
25	Total functional expenses. Add lines 1 through 24e	526,433,701	450,754,695	75,679,006	0
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 F 「 if following SOP 98-2 (ASC 958-720)				rm 990 (2013)

Part X Balance Sheet

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

					,
	•		(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	13,762	1	
	2	Savings and temporary cash investments	96,702,211	2	100,771,370
	3	Pledges and grants receivable, net		3	10,000,000
	4	Accounts receivable, net	111,484,514	4	107,256,198
	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	
ets	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	
Assets	7	Notes and loans receivable, net		7	
Ą	8		5,976,989	8	8,681,761
	9	Prepaid expenses and deferred charges	10,356,343	9	11,534,334
	10a	Land, buildings, and equipment cost or other basis	10,000,040		11,004,004
	104	Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b 313,377,639	290,056,636	10 c	293,998,677
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	130,265,498	15	118,929,333
	16	Total assets. Add lines 1 through 15 (must equal line 34)	644,855,953	16	651,171,673
	17	Accounts payable and accrued expenses	95,370,820	17	102,476,783
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	20,000,000	20	10,000,000
Ś	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabi		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	47,077,210		50,981,930
	26	Total liabilities. Add lines 17 through 25	162,448,030	26	163,458,713
у ф		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔽 and complete			
hC	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	482,407,923	27	487,712,960
Balance	27		402,407,923	27	407,712,900
ä –	28	Temporarily restricted net assets		28 29	
Fund	29	Permanently restricted net assets		29	
Ч. Е		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and complete lines 30 through 34.			
s or	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
ls s	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	482,407,923	33	487,712,960
Net	34	Total liabilities and net assets/fund balances	644,855,953	34	651,171,673
			044,000,900	54	Form 990 (2013)

Form	990	(201	.3)
------	-----	------	-----

Par	t XI Reconciliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI				ম
1	Total revenue (must equal Part VIII, column (A), line 12)	1		529,(032,410
2	Total expenses (must equal Part IX, column (A), line 25)	2			433,701
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		2,	598,709
		4		482,4	107,923
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments	7			
0		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		2,7	706,328
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	10		487	712,960
Par	column (B)) t XII Financial Statements and Reporting	10		407,	,12,900
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				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?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed or	ו		
	☐ Separate basıs ☐ Consolıdated basıs ☐ Both consolıdated and separate basıs				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	IN			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ıe	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: Software Version: EIN: 74-1070544 Name: Southwest Research Institute

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

Compensated Employees, and Inde	pendent Cor	ntracto	rs			•	-		I	
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or dilector	Institutional Trustee	Officei	Ke} employee	Highest compensated employee	Former			related organizations
Wayne S Alexander	1 00	x						32,000	0	0
Director Eugene L Ames	10 1 00									
Director	10	x						31,000	0	0
Rıchard W Calvert Dırector	1 00 10	x						28,500	0	0
A Baker Duncan Dırector	1 00 10	x						29,000	0	0
Roger R Hemminghaus Director	1 00	x						34,000	0	0
Milton B Lee II Director	10 1 00	x						31,000	0	0
Phillip J Pfeiffer	10 1 00	x						48,250	0	0
Chairman Mary Ann Rankin	10 1 00	x						32,000	0	0
Director John B Roberts	10 1 00	x						30,500	0	0
Director Ricardo Romo	10 1 00	x						28,250	0	0
Vice Chairman Curtis Vaughan Jr	10 1 00	x						2,500	0	0
Director David S Zachry	10 1 00	x						0	0	0
Director John C Korbell	10 1 00	x						0	0	0
Director J Dan Bates	10 40 00									
President Walter D Downing Jr	10 40 00	×		x				1,147,634	0	134,864
Executive Vice President Beth Ann Rafferty	10 40 00	X		X				692,022	0	44,463
Chief Financial Officer Amos E Holt				х				362,779	0	51,268
Vice President	40 00			х				104,434	0	4,014
John W McLeod V P & General Counsel	40 00			x				388,928	0	45,963
Robert P Griffith Jr Vice President	40 00			x				271,829	0	26,934
Richard D Somers Vice President	40 00			x				417,099	0	50,827
Edward D Moore Vice President	40 00			x				331,696	0	42,053
Bob Keys	40 00			x				240,711	0	14,574
Vice President Susan B Crumrine	40 00			x				329,247	0	49,756
Vice President Michael MacNaughton	40 00			x				459,866	0	28,784
Vice President Bruce B Bykowski	40 00			x				323,649	0	45,739
Vice President								525,075	0	+3,135

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more th persoi and a Individual trustie	ion (ian o n is b	ne b oth a ctor/	ox, u an of 'trus	nless ficer	Former	(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
Steven D Marty	40 00			x				281,743	0	42,466
Vice President				^				201,743	0	42,400
Wesley C Patrick Vice President	40 00			x				431,392	0	41,953
Danny M Deffenbaugh	40 00			x				336,546	0	41,882
Vice President								,		,
C Nils Smith	40 00			х				252,389	0	49,556
Vice President James L Burch	40.00									
Vice President	40 00			х				536,874	0	45,522
Linda Boehme	40 00			x				176,280	0	32,850
Treasurer Paul Easley	40.00									
Vice President	40 00			х				217,482	0	44,728
Mary Massey	40 00			x				273,949	0	35,505
Vice President								,	_	
Scott J Bolton	40 00					x		345,145	0	51,887
Associate Vice President David J McComas	40 00									
Asst Vice President	40.00					x		346,330	0	54,102
Sol A Stern	40 00									
Associate Vice President						X		370,522	0	52,435
Adam Hamilton	1 00					x		0	355,795	7,650
President-Related Organization	40 00									
William M Thompson	1 00					x		0	292,815	7,650
V P - Related Organization Katharine C Golas	40 00 24 00									
Vice President	24 00						х	233,304	0	2,069

efil	e GR	APHIC	print - D	O NOT PROCESS	As File	ed Data -				DLN: 9349	322903	33805
50	HED	ULE /	Δ	Dublic (hority (Statura	nd Duk!			ОМВ	No 154	5-0047
		or 990E2		PUDIIC C nplete if the organiz	ation is a see					(1)	201	3
Depart Treasu Interna	ry	of the enue Servic	e	 Attach to F Information 	orm 990 or l n about Sche	Form 990-EZ	. ┣ See sepaı n 990 or 990-				pen to P Inspect	
Name	e of th	he organi:	zation			init orget / ite			Employer i	ident if icatio	n number	r
Southv	vest Re	esearch Ins	titute							- <i></i>		
Da	rt I	Poac	on for Du	blic Charity Sta		apizations	must com	aloto this n	74-10705			
				te foundation becaus						istructions.		
1				ion of churches, or a								
2	, 			d in section 170(b)(1					//-//-/////////////////////////////////			
3	_			perative hospital se				n 170(b)(1)	(4)(iii)			
4	, L			h organization operat	_					1)(A)(iii), F	nter the	
•	,			ity, and state	eu in conjun	ie cioni wich u	noopital aco				iter the	
5	Γ			erated for the benefi	t of a college	e or universit	ty owned or o	perated by a	a government	tal unit desci	ibed in	
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)							
6	Γ	A feder	al, state, or	local government or	governmen	tal unit desc	rıbed ın secti	on 170(b)(1	.)(A)(v).			
7		describ	ed in sectic	at normally receives on 170(b)(1)(A)(vi).	(Complete F	Part II)			ntal unit or fi	rom the gene	ral public	с
8				described in sectior								
9	ন	-		at normally receives							-	SS
				vities related to its e								
				oss investment inco						tax) from bus	sinesses	
4.0	—			ganization after June								
10				ganized and operated								6
11	I	one or r the box	nore public that descr	ganized and operated ly supported organiz ibes the type of supp b	ations descr orting organ	ubed in secti zation and c	ion 509(a)(1 complete line) or section s 11e throu	509(a)(2) So gh 11h	ee section 50	9(a)(3).	.Check
e f	Γ	other th section	nan foundat 509(a)(2) rganızatıon	ox, I certify that the ion managers and ot received a written de	ner than one	or more pub	licly support	ed organızat	ions describ	ed in section	509(a)(1)or
g		Since A followin	ugust 17, 2 g persons?									, ,
				irectly or indirectly o	-		-	persons des	scribed in (ii)		Yes	No
			-	governing body of th		-	17			11g(┨────
			-	er of a person descri			have?			11g(
h				lled entity of a person ng information about						11g () 	L
Ś) Nan suppoi ganiz		(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is organızat col (i) lıs your gove docume	ion in ted in erning	(v) Did you the organi in col (i) o suppor	zation of your	(vi) Is f organizati col (i) org in the U	ion in anized	(vii) Am mone supp	
				instructions))	Yes	No	Yes	No	Yes	No		
Total												

Pa	(Complete only if you of						
	Part III. If the organiza						
S	ection A. Public Support			_			
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20	13 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	arants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paıd to or expended on ıts behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
	ection B. Total Support		1				
Cal	endar year (or fiscal year beginning : المناط	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	13 (f) Total
7	in) ► A mounts from line 4						
, 8	Gross income from interest,						
Ũ	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
3	business activities, whether or not						
	the business is regularly carried						
	on Otherse Deveterslade and						
10	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)						
11							
12	10) Gross receipts from related activity	es etc (see inst				12	
13	First five years. If the Form 990 is	, (,	l third fourth or	fifth tax year ac a		organization chock
13	this box and stop here						
S	ection C. Computation of Pub						
14	Public support percentage for 2013	(lıne 6, column	(f) dıvıded by lıne	11, column (f))		14	
15	Public support percentage for 2012	Schedule A, Pa	rt II, lıne 14			15	
16a	,				ine 14 is 33 1/3%	or more, cl	
L.	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 1 E is 22		
U	box and stop here. The organization				, and the 15 is 55	1/3-70 01 110	
17a	10%-facts-and-circumstances test-			-	ne 13, 16a, or 16	b, and line	. ,
	is 10% or more, and if the organization	tion meets the "f	acts-and-circum	stances" test, ch	eck this box and s	top here. E	Explain
	in Part IV how the organization mee	ts the "facts-an	d-cırcumstances'	' test The organı	ization qualifies as	a publicly	
h	organization	-2012 If the era	anization did not	check a hoy on lu	ng 13 162 166 /	or 17a and	► F
D	10%-facts-and-circumstances test - 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						publicly
	supported organization						▶
18	Private foundation. If the organizat instructions	ion did not checl	k a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and s	see
	113114110113						F (

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) **Section A. Public Support** Calendar year (or fiscal year beginning (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🕨 Gifts, grants, contributions, and 1 membership fees received (Do 911,712 961,058 1,031,183 802,062 926,776 4,632,791 not include any "unusual grants ") Gross receipts from admissions, 2 merchandise sold or services performed, or facilities furnished 2,540,969,970 483,247,992 514,842,243 505,230,767 511,070,928 526,578,040 in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities 3 that are not an unrelated trade or business under section 513 Tax revenues levied for the 4 organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit 100,000 100,000 500,000 100,000 100,000 100,000 to the organization without charge 484,259,704 515,903,301 506,361,950 511,972,990 527,604,816 2,546,102,761 Total. Add lines 1 through 5 6 Amounts included on lines 1, 2, 7a and 3 received from disqualified 911,712 959,089 864,621 752,257 677,133 4,164,812 persons Amounts included on lines 2 and b 3 received from other than disgualified persons that exceed 159,201,390 185,799,517 155,457,882 140,455,195 115,879,029 756,793,013 the greater of \$5,000 or 1% of the amount on line 13 for the year 186,758,606 160,113,102 156,322,503 141,207,452 116,556,162 760,957,825 c Add lines 7a and 7b Public support (Subtract line 7c 8 1,785,144,936 from line 6) Section B. Total Support Calendar year (or fiscal year (b) 2010 (d) 2012 (a) 2009 (c) 2011 (e) 2013 (f) Total beginning in) 🕨 9 Amounts from line 6 484,259,704 515,903,301 506,361,950 511,972,990 527,604,816 2,546,102,761 Gross income from interest, 10a dividends, payments received 3,134,675 -203,364 1,032,212 878,731 1,477,419 6,319,673 on securities loans, rents, rovalties and income from sımılar sources b Unrelated business taxable income (less section 511 1,646,375 636,383 8,067,669 3.682.663 2.102.248 taxes) from businesses acquired after June 30, 1975 6,817,338 1,443,011 3,134,460 1,515,114 1,477,419 14,387,342 Add lines 10a and 10b С Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 491,077,042 517,346,312 509,496,410 513,488,104 529,082,235 2,560,490,103 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, ►Γ check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) 15 15 69720% Public support percentage from 2012 Schedule A, Part III, line 15 16 16 67 210 % Section D. Computation of Investment Income Percentage Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) 17 17 0 560 %

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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

0 610 %

►F

18

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		

Schedule A (Form 990 or 990-EZ) 2013

efi	le GRAPHIC pr	int - DO NO	T PROCESS As Filed Data	-	DLN	: 93493229033805
SC	HEDULE C		Political Campaign and	d Lobbying	Activities	OMBNo 1545-0047
(Fori Departm	m 990 or 990-EZ) nent of the Treasury Revenue Service	► Complet	zations Exempt From Income Ta e if the organization is described be arate instructions. Information ab instructions is at <u>www</u>	low. ► Attach to out Schedule C (F	Form 990 or Form 990-EZ. form 990 or 990-EZ) and its	
 \$ 	Section 501(c)(3) c Section 501(c) (oth Section 527 organize organization ar Section 501(c)(3) c Section 501(c)(3) c organization ar Section 501(c)(4),	organizations (ner than section zations Completions organizations the organizations the organizations the organizations the organizations the organizations the organizations the organizations the organization of the organization of the organization of the organizat	s" to Form 990, Part IV, Line 3, or Complete Parts I-A and B Do not com 501(c)(3)) organizations Complete ete Part I-A only s" to Form 990, Part IV, Line 4, or hat have filed Form 5768 (election und hat have NOT filed Form 5768 (election s" to Form 990, Part IV, Line 5 (Pr inizations Complete Part III	plete Part I-C Parts I-A and C be Form 990-EZ, Pa der section 501(h) n under section 50	low Do not complete Part I-I rt VI, line 47 (Lobbying A) Complete Part II-A Do not D1(h)) Complete Part II-B Do n 990-EZ, Part V, line 35c (B ctivities), then complete Part II-B not complete Part II-A Proxy Tax), then
	me of the organıza thwest Research Instit				Employer iden	tification number
Part 1 2 3		ption of the org	ganization is exempt under			organization.
Par	t I-B Comple	te if the or	ganization is exempt under	section 501(d	c)(3).	
1 2 3 4a	Enter the amoun Enter the amoun	t of any excise t of any excise on incurred a s	e tax incurred by the organization un e tax incurred by organization manage ection 4955 tax, did it file Form 47	der section 4955 gers under sectior	•	\$ \$ Yes No Yes No
b	If "Yes," describ					
			ganization is exempt under			1(c)(3).
1 2		t of the filing o	nded by the filing organization for sirganization for sirganization's funds contributed to o			\$
3	Total exempt fun	nction expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b 🕨 🕨	\$
4	Dıd the filing org	anızatıon file F	Form 1120-POL for this year?			Ŷ
5	organization mac amount of politic	de payments al contributior	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	e amount paid fro directly delivered	m the filing organization's f to a separate political orga	unds Also enter the nızatıon, such as a
	(a) Name	2	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		- A-A - - - - - - -	e the instructions for Form 990 or 99			

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Sc	nedule C (Form 990 or 990-EZ) 2013				Page 2
P	art II-A Complete if the organization under section 501(h)).	n is exempt under section 501(c)(3)	and fi	led Form 5768	(election
	Check ▶ ☐ If the filing organization belongs to expenses, and share of excess lob Check ▶ ☐ If the filing organization checked be		liated gro	oup member's name	, address, EIN,
	Limits on Lobbying (The term "expenditures" means a			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public	opınıon (grass roots lobbyıng)			
b	Total lobbying expenditures to influence a legis	latıve body (dırect lobbyıng)		231,590	
с	Total lobbying expenditures (add lines 1a and 1	b)		231,590	
d	O ther exempt purpose expenditures			450,523,105	
е	Total exempt purpose expenditures (add lines 1	c and 1d)		450,754,695	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both		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 li	ne 1f)		250,000	
h	Subtract line 1g from line 1a If zero or less, en	ter - 0 -		0	
i	Subtract line 1f from line 1c If zero or less, ent	er - 0 -		0	
j	If there is an amount other than zero on either l section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 4	1720 rep	porting	⊤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 Expendi	tures During	4-Year Avera	ging 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
Ь	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
_ c	Total lobbying expenditures	442,690	489,200	357,424	231,590	1,520,904
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					

Schedule C (Form 990 or 990-EZ) 2013

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 11 below, provide in Part IV a detailed description of the lobbying activity.	()	a)	(b)		
	Yes	No	A	mount	Ł
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?					
${f g}$ 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		•	1		
${f c}$ 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)(6).	501(c)(5), c	or se	ctior	1
1 Were substantially all (90% or more) dues received nondeductible by members?		Г	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)		ction	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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				
	2c				
c Total	3				
 c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 	-				
 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? 	5 4				
 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 	5				

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

Schedule C (Form 990 or 990-EZ) 2013

Part IV Supplemental Info	prmation <i>(continued)</i>
Return Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC	print - DO NOT PROCESS As F	iled Data -			DLN:	93493229	9033805
SCHEDULE D Form 990)			al Statements			омв № 15 20	
	► Complete if the or Part IV, line 6, 7, 8, 9, 1		ered "Yes," to Form 990			 	IJ
Pepartment of the Treasury nternal Revenue Service	🕨 Attach to Form 990. 🕨 See separate	instructions. 🕨	irs.gov/form990.	edule D	(Form 990)	Open to Inspe	
Name of the organ Southwest Research In				Emp	loyer ident	ification num	ber
Part I Organ	nizations Maintaining Donor Adv	vised Eunds	or Other Similar F		1070544	inte Comp	lata if tha
	zation answered "Yes" to Form 990					ints. comp	
		(a) Dor	nor advised funds		(b) Funds a	and other acc	ounts
L Total number a	,						
	itributions to (during year)						
	nts from (during year)						
	ue at end of year	L					
funds are the o	zation inform all donors and donor adviso organization's property, subject to the or	rganization's exc	clusive legal control?			∏ Yes	s ∏ No
used only for c conferring imp	zation inform all grantees, donors, and d charitable purposes and not for the bene permissible private benefit?	fit of the donor o	r donor advisor, or for a	any othe	r purpose	∏ Yes	
	ervation Easements. Complete if			to Forn	n 990, Pai	rt IV, line 7.	
🔽 Preservatı	conservation easements held by the org on of land for public use (e g , recreation of natural habitat						a
🔽 Preservatı	on of open space						
	s 2a through 2d if the organization held a the last day of the tax year	a qualified conse	ervation contribution in	the form	n of a conse	ervation	
					Held at	the End of t	he Year
-	of conservation easements			2a			
	restricted by conservation easements			2b			
d Number of con	nservation easements on a certified histons nservation easements included in (c) acc cure listed in the National Register			2c 2d			
	nservation easements modified, transferi	red, released, ex	tinguished, or terminat	ed by th	ie organizat	tion during	
Number of sta	tes where property subject to conservat	ion easement is	located 🕨				
5 Does the orga	nızatıon have a written policy regardıng i if the conservation easements it holds?				violations,	and F Yes	;
Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enfor	cing conservation ease	ments d	luring the y	ear	
A mount of exp	penses incurred in monitoring, inspecting	g, and enforcing	conservation easement	ts during	g the year		
B Does each cor	nservation easement reported on line 2(70(h)(4)(B)(II)?	d) above satısfy	the requirements of se	ction 17	70(h)(4)(B)	(I)	5 - No
balance sheet	describe how the organization reports con , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the					
	nizations Maintaining Collection			or Ot	her Simil	ar Assets.	
.	lete if the organization answered "Y ation elected, as permitted under SFAS 1				tomontar	halanac at -	ot
works of art, h	iston elected, as permitted under SFAS I istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for publi	c exhibition, education,	, or rese	arch ın furt		
works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for publi					ıblıc
(i) _{Revenues}	included in Form 990, Part VIII, line 1				►\$_		
(ii) Assets inc	cluded in Form 990, Part X						
2 If the organiza	ation received or held works of art, histor unts required to be reported under SFAS						
a Revenues incl	uded in Form 990, Part VIII, line 1				►\$_		
b Assets include	ed ın Form 990, Part X				► \$		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Cat No 52283D	Schedule D (Form 990) 2013

	edule D (Form 990) 2013											Page 2
Par	t III Organizations Maintaining Co											ntınued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds,ch	neck			-		sıgnıficant	use of	fits	
а	Public exhibition		d	ļ	Loan o	rexc	hange progra	ms				
b	✓ Scholarly research		е	Γ	Other							
с	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ellections and expla	ın hov	w the	y furthei	r the	organızatıon's	sex	empt purpo	ose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than t								ılar	Г	Yes	∏ No
Par	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	"Y	es" to For	m 990	Ο,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for c	ontribut	ions	or other asse	ts r	iot	Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving t	able							
										Amo	unt	
С	Beginning balance							۱c				
d	Additions during the year						1	ld				
е	Distributions during the year						1	le				
f	Ending balance						1	lf				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has b	oeen j	provided in Pa	art)				Г
Ра	rt V Endowment Funds. Complete											
4-		(a)Current year	(b))Prior	year	b (c)⊺	wo years back	(d)⊺	hree years b	ack (e	e)Four ye	ears back
1a	Beginning of year balance									_		
Ь												
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end baland	e (lın	ie 1g	columr	n (a))	held as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
с	Temporarily restricted endowment > The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%										
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	ation	that a	are held	and a	administered	for	the		Yes	No
	(i) unrelated organizations			•		•		•		3a(i)		
	(ii) related organizations							•		3a(ii)		
	If "Yes" to 3a(II), are the related organization					•		•	· · ·	Зb		
4	Describe in Part XIII the intended uses of th						wared West	t-0	Farma 000	Dowt	T)/ 1.	
Pa	11 Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		ne o	rgan	ization	ans	wered res	το	FORM 990	, Part	1V, III	ie
	Description of property				Cost or of (Investm		(b) Cost or othe basis (other)		(c) Accumul depreciati		(d) Boo	ok value
1a	Land					\rightarrow	8,746,7	96				8,746,796
	Buildings			 		-+	420,323,1	-	174,01	0,001		6,313,181
	Leasehold improvements		•				1,151,2	-		6,392		234,872
	Equipment			<u> </u>			160,265,4		124,09		3	6,171,945

2,531,883

293,998,677

14,357,736

16,889,619

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . 🕨 . . .

. .

. . . .

e Other .

.

.

. . . .

Schedule D (Form 990) 2013			Page 3
Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	mplete if the organization	answered 'Yes' to Forr	n 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of va Cost or end-of-year r	
1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*		
Part VIII Investments-Program Related. C	omplete if the organization	on answered 'Yes' to Fo	rm 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	luation
	(2) 2001 14140	Cost or end-of-year r	
	.		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	Annowered 'Ves' to Form 99	O Part IV lupe 11d See F	form 990 Part V Jupe 15
(a) Desc		0, Falt IV, IIIe IIu See F	(b) Book value
(1) Tianjin SwARC Investment			1,512,096
(2) Investment in Signature Science			7,462,257
(3) Post Retirement Medical Fund			56,245,228
(4) Bond Redemption Fund			10,000,000
(5) Deferred Tax Asset			2,525,641
(6) Other Assets			7,140,175
(7) Long Term Investments			34,043,936
	4 F \		110.000.000
Total. (Column (b) must equal Form 990, Part X, col.(B) line 3 Part X Other Liabilities. Complete if the org			118,929,333
Form 990, Part X, line 25.	anization answered Tes	to Form 990, Part IV, II	he fie of fill. See
1 (a) Description of liability	(b) Book value		
Federal income taxes]	
Post Retirement Medical Benefits Obligation	43,092,646]	
Pension O bligations	749,109]	
Deferred Compensation Obligation	7,140,175	-	
		1	
		4	
		4	

 Total. (Column (b) must equal Form 990, Part X, col (B) line 25)
 50,981,930

 2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

ন

Schedule D (Form 990) 2013 Page 4 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 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 2a а Donated services and use of facilities 2b b Recoveries of prior year grants 2c С Other (Describe in Part XIII) 2d d е Add lines 2a through 2d 2e Subtract line 2e from line 1 3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a а 4b b С 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. Total expenses and losses per audited financial statements 1 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a а b Prior vear adjustments 2b Other losses 2c С 2d Other (Describe in Part XIII) d 2e е 3 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . а 4a b Other (Describe in Part XIII) 4b Add lines **4a** and **4b** **4**c С 5 5 Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18) Part XIIII 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
Part X, Line 2	Southwest Research Institute does not have any uncertain tax positions under ASC 740 "Income Taxes"

Part XIII Supplemental Info	prmation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC pri	int - DO NOT	PROCESS	As Filed Dat	ta -	DLN: 93493229033805					
SCHEDULE F (Form 990)	Stat	ement of /	Activities C	Outside the Unit	ed States	OMBNo 1545-0047				
(1 0111 330)		► Complete i	f the organization	n answered "Yes" to Form	990,	2013				
		5. Attack	-	4b, 15, or 16.						
Department of the Treasury	▶ Informatio			See separate instructions. nd its instructions is at <i>w</i>		Open to Public				
Internal Revenue Service			. ,		Inspection					
Name of the organization Southwest Research In					Employer identification number					
	Informatio Form 990, Par			e United States. C	omplete if the organiz	ation answered				
					mount of its grants an selection criteria used	nd				
to award the gra	ants or assista	ance?				🗌 Yes 🗌 No				
assistance outs	ide the United	l States.			ng the use of ıts gran	ts and other				
3 Activites per Reg	110n (The follow			uplicated if additional sp		1				
(a) Regior	1	(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) East Asia and the	e Pacıfic	1	4	Program Services	Marketing and project coordination for SwRI's Research and Development efforts	560,864				
(2)										
(3)										
(4)										
(5)										
3a Sub-total		1	4			560,864				
b Total from contin to Part I	uation sheets	0	0			0				
c Totals (add lines	3a and 3b)	1	4			560,864				

Schedule F (Form 990) 2013

Page **2**

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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 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

Schedule F (Form 990) 2013

Part III can be duplicated if additional space is needed. (c) Number of (d) A mount of (e) Manner of cash (a) Type of grant or (b) Region (f) A mount of (g) Description (h) Method of cash grant disbursement of non-cash valuation assistance recipients non-cash (book, FMV, assistance assistance appraisal, other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

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.

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporat Instructions for Form 926)	,	Yes	ম	No
2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization r required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instruction Forms 3520 and 3520-A)	n Foreign	Yes	ন	No
3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Corporations. (see Instructions for Form 5471)		Yes	Г	No
4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a q electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for 8621)	ion Return	Yes	ম	No
5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,' organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Part (see Instructions for Form 8865)		Yes	ন	No
6 Did the organization have any operations in or related to any boycotting countries during the tax yea the organization may be required to file Form 5713, International Boycott Report (see Instructions for Forn 5713).	•	Yes	ন	No

Schedule F (Form 990) 2013

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				
Part I, line 3	Accrual Method				

Schedule I (Form 990) Department of the Treasury Internal Revenue Service	90) 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.							
Name of the organization Southwest Research Institute						Employer identification number		
Part I General Informatio	n on Grants and	L Assistance				74-1070544		
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization Part III Grants and Other Art Form 990, Part IV, line 	records to substanti vard the grants or as ation's procedures fo ssistance to Go	ate the amount of the sistance? r monitoring the use o vernments and O	f grant funds in the Unite rganizations in the	d States United States. Con	nplete if the orga	nızatıon answered "	マYes 「No 'es" to	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
See Addıtıonal Data Table								

Schedule I (Form 990) 2013

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	e (b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book,	(f)Description of non-cash assistance	
	recipients			FMV, appraisal, other)		
Part IV Supplemental In	formation. Provide the in	formation required in I	Part I, line 2, Part III, co	lumn (b), and any other a	dditional information.	
Return Reference	Explanation					
Part I, Line 2	The assistance amounts listed are provided to the entities as donations in accordance with the applicable stated purposes of Southwest Research Institute					

Schedule I (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 74-1070544

Name: Southwest Research Institute

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ESSAR Recreation Association 6220 Culebra Road San Antonio,TX 78228	74-1490851	501(c)(4)	34,670				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Texas at Austin 1 University Drive Austin, TX 78712	74-6000203	501(c)(3)	17,600				General Support

(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
University of Texas at San Antonio 6900 N Loop 1604 San Antonio, TX 78249	74-1717115	501(c)(3)	10,000				General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Way of San Antonio 700 South Alamo San Antonio, TX 78293	74-1272381	501(c)(3)	182,350				General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Haven for Hope of Bexar County P O Box 781609 San Antonio, TX 78278	20-8075412	501(c)(3)	5,000				General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Mary's University of San Antonio 1 Camino Santa Maria San Antonio,TX 78228	74-1143128	501(c)(3)	5,000				General Support

(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
Junior Achielvement of South Texas 403 East Ramsey Suite 201 San Antonio, TX 78216		501(c)(3)	20,000				General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance ,	(h) Purpose of grant or assistance
Trinity University One Trinity Place 49 San Antonio, TX 782127200	74-1109633	501(c)(3)	5,000				General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Good Samarıtan Community 1600 Saltıllo St San Antonio,TX 78207	74-1117340	501(c)(3)	5,000				General Support

efil	e GRAPHIC p	rint - DO NOT PROCESS	As Filed D	Data -		DLN: 9	349322	9033	805
Sch	edule J	Co	mpensat	ion Inf	ormation		OMBNo 1	545-0	047
Forn	n 990)	For certain Office	- rs, Directors, 1 Compensa		Key Employees, and High oyees	est	20	13)
onartm	ient of the Treasury				s" to Form 990, Part IV,	line 23.	Open t	o Puł	lic
· ·	Revenue Service	Attach Information about Schedule			parate instructions. structions is at www.irs	aov/form990.	Insp		
	ne of the organiz	ation	- (<u></u>	Employer ident if i			
Sout	hwest Research Ins	titute				74-1070544			
Pa	rt I Questi	ons Regarding Compensa	ition			/ - 10/0344			
								Yes	No
1a		opiate box(es) if the organizatio Section A , line 1a Complete Pa							
	First-class	or charter travel	Γ ι	Housing a	llowance or residence fo	r personal use			
		companions	F F	ayments	for business use of pers	onal residence			
		fication and gross-up payments		lealth or	social club dues or initia	tion fees			
	Discretion	ary spending account	L t	Personal	services (e g , maid, chai	uffeur, chef)			
b		xes in line 1a are checked, did t or provision of all of the expens					16	Yes	
2		ation require substantiation prio							
	dırectors, trust	ees, officers, including the CEO,	Executive Dir	ector, reg	arding the items checke	d ın lıne 1a?	2	Yes	
3	organization's (ıf any, of the following the filing CEO/Executive Director Check ed organization to establish com	all that apply	Do not c	heck any boxes for metho	ods			
	Compensa	tion committee		Written er	nployment contract				
	🔽 Independe	nt compensation consultant	> ম	Compens	ation survey or study				
	Form 990 (of other organizations	۲ ک	Approval	by the board or compens	atıon committee			
4	During the year or a related org	r, dıd any person lısted ın Form 9 anızatıon	90, Part VII,	Section A	, line 1a with respect to	the filing organizat	ion		
а	Receive a seve	rance payment or change-of-co	ntrol payment?	2			4a	Yes	
b	Participate in, d	or receive payment from, a suppl	emental nonqu	ualıfıed re	tırement plan?		4b	Yes	
с	Participate in, d	or receive payment from, an equi	ty-based com	pensatio	n arrangement?		4c		No
		of lines 4a-c, list the persons a				ın Part III			
5	For persons list	and 501(c)(4) organizations on ted in Form 990, Part VII, Secti contingent on the revenues of				any			
а	The organizatio	n?					5a		No
b	Any related org	anization?					5b		No
	If "Yes," to line	5a or 5b, describe in Part III							
6		ted in Form 990, Part VII, Secti contingent on the net earnings o		dıd the or	ganızatıon pay or accrue	any			
а	The organizatio	n?					6a		No
b	Any related org	anization?					6b		No
	If "Yes," to line	e 6a or 6b, describe in Part III							
7		ted in Form 990, Part VII, Secti lescribed in lines 5 and 6? If "Ye				on-fixed	7		No
8		nts reported in Form 990, Part \ nitial contract exception describ					8		No
9	If "Yes" to line	8, did the organization also follo	w the rebuttab	ole presur	nption procedure describ	ed in Regulations	⊢ –		
-	section 53 495		ene reputed	e presur		es in regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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 o'	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation			reported as deferred In prior Form 990
See Additional Data Table	·'	·'	· ′		[]		

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference	Explanation
	The Institute's travel policy generally does not permit first class travel There are a small number of exceptions for approved medical conditions or other business required special circumstances Tax indemnification and gross-up payments SwRI provided additional cash compensation (reported on the W-2 and Schedule J) to partially offset the economic impact of a grandfathered taxable benefit to one officer This represents less than 1% of total officer compensation Health or social club dues/fees SwRI pays the membership cost for two officers at two social clubs These memberships are used primarily for business meetings Any personal charges are paid by the officers
	The Institute had a funded noncontributory defined benefit pension plan (Group Annuity Plan) The Institute's Group Annuity Plan was granted to Institute officers that were employed as of March 30, 1981 Remaining Plan member J Dan Bates, \$92,385

Schedule J (Form 990) 2013

Software ID:

Software Version:

EIN: 74-1070544

Name: Southwest Research Institute

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

Form 990, Schedule J, Part II -		I - Officers, Direc	tors, irustees, ke	y Employees, and	i Hignest Compens	sated Employees		
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	Denents	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	990 or Form 990-EZ
J Dan Bates President	(1) (11)	890,599 0	123,104 0	133,931 0	118,161 0	16,703 0	1,282,498 0	0
Walter D Downing Jr Executive Vice President	(1) (11)	540,785 0	76,428 0	74,809 0	25,776 0	18,687 0	736,485 0	0 0
Beth Ann Rafferty Chief	(1)	286,729	45,279	30,771	25,776	25,492	414,047	0
Financial Officer	(11)	0	0	0	0	0	0	0
John W McLeod V P &	(1)	321,525	43,436	23,967	25,776	20,187	434,891	0
General Counsel	(11)	0	0	0	0	0	0	
Robert P Griffith Jr Vice	(1)	146,784	40,657	84,388	17,161	9,773	298,763	0
President	(11)	0	0	0	0	0	0	
Richard D Somers Vice	(1)	329,060	46,876	41,163	25,776	25,051	467,926	0
President	(11)	0	0	0	0	0	0	0
Edward D Moore Vice	(1)	269,831	33,860	28,005	25,776	16,277	373,749	0
President	(11)	0	0	0	0	0	0	0
Bob Keys Vice	(1)	135,813	53,700	51,198	13,836	738	255,285	0
President	(11)	0	0	0	0	0	0	0
Susan B Crumrine Vice	(1)	256,256	45,332	27,659	25,776	23,980	379,003	0
President	(11)	0	0	0	0	0	0	0
Mıchael MacNaughton	(1)	347,939	57,273	54,654	25,776	3,008	488,650	0
Vıce President	(11)	0	0	0	0	0	0	0
Bruce B Bykowski Vice	(1)	256,978	37,398	29,273	25,776	19,963	369,388	0
President	(11)	0	0	0	0	0	0	0
Steven D Marty Vice	(1)	230,977	28,906	21,860	25,776	16,690	324,209	0
President	(11)	0	0	0	0	0	0	0
Wesley C Patrick Vice	(1)	342,748	45,757	42,887	25,776	16,177	473,345	0
President	(11)	0	0	0	0	0	0	0
Danny M Deffenbaugh	(1)	278,125	45,488	12,933	25,776	16,106	378,428	0
Vice President	(11)	0	0	0	0	0	0	0
C Nils Smith Vice	(1)	234,704	12,928	4,757	24,639	24,917	301,945	0
President	(11)	0	0	0	0	0	0	0
James L Burch Vice	(1)	370,515	43,212	123,147	25,776	19,746	582,396	0
President	(11)	0	0	0	0	0	0	0
Lında Boehme	(1)	171,751	0	4,529	17,220	15,630	209,130	0
Treasurer	(11)	0	0	0	0	0	0	0
Paul Easley Vice	(I)	208,000	0	9,482	21,473	2 3 ,2 5 5	262,210	0
President	(II)	0		0	0	0	0	0
Mary Massey Vice President	(1) (11)	249,817 0	0	24,132 0	25,776 0	9,729 0	309,454 0	0
Scott J Bolton Associate Vice President	(1) (11)	338,062 0	0	7,083 0	25,776 0	26,111 0	397,032 0	0 0

orm 990, Schedule J, Part II - Officers, Directors, Trustees, key Employees, and Aignest Compensated Employees											
(A) Name		(B) Breakdown of	fW-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form			
		(i) Base Compensation	(ii) Bonus & (iii) O ther Incentive compensation		compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ			
David J McComas Asst Vice President	(1) (11)	321,649 0	0	24,681 0	25,776 0	28,326 0	4 0 0 ,4 3 2 0	0 0			
Sol A Stern Associate Vice President	(1) (11)	353,658 0	0 0	16,864 0	25,776 0	26,659 0	4 2 2 ,9 5 7 0	0 0			
A dam Hamilton President-Related Organization	(I) (II)	0 276,598	0 66,000	0 13,197	0 7,650	0 0	0 363,445	0 0			
William M Thompson V P - Related Organization	(I) (II)		0 5 3 ,0 0 0	0 8,103	0 7,650,7	0 0	0 300,465	0 0			
Katharıne C Golas Vıce President	(1) (11)		0 0	2 3 3 , 30 4 0	1,308 0	761 0	2 3 5 , 3 7 3 0	0 0			

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

efile G	RAPHIC print	- DO NOT PROCESS	As Filed Data -										93493		
Schedi (Form			the organization a	l Information	orm 990, Part I	V, line	e 24a.		criptions,			OM	^{B No} 154		947
			explanatio ► Attach to	ns, and any addition				_					LU		
	t of the Treasury	► Informati		Form 990. ■ K (Form 990) and i	 See separate ts instructions 				n 990.				Open to I		
	venue Service									Em	ployer id	entifica	Inspect tion num		
	st Research Instit	tute									-10705				
Part I	Bond Issu	es													
	(a) Issuer name	e (b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue pr	ice	(f	f) Descriptio	n of purpose	(g) De) Defeased behalf o		(h) On behalf of issuer		Pool ncing
										Yes	No	Yes	No	Yes	No
	City of Tatum Industrial Development Corp 75-2841079			06-17-2005	10,000		BUIL	STRUCTION DING 238- OFFICE SPA	LABORATORY		×		x		х
	City of Tatum Industrial Development Corp 75-2841079 01-17-2006			01-17-2006	10,000	,000,	BUIL	STRUCTION DING 238- OFFICE SPA	LABORATORY		x		x		х
Part II	tII Proceeds														
4 0 0	Amount of bonds retired				A		В			С			D		
-	ount of bonds retired ount of bonds legally defeased														
	tal proceeds of is			0.000	0 0 0 0		10.000.000								
	oss proceeds in i				1	0,000	0,000		10,000,000						
•	apitalized interest														
	oceeds in refundi	•													
-	suance costs from	m proceeds													
	edıt enhancemen	t from proceeds													
9 Wo	orking capital exp	enditures from proceeds													
10 Ca	pital expenditure	s from proceeds			1	0,000	0,000		10,000,000						
11 Ot	her spent procee	ds													
12 Ot	her unspent proc	eeds													
13 Ye	ar of substantial	completion			200)6		20	06						
					Yes	N	0	Yes	No	Yes	N	lo	Yes	\perp	No
14 We	ere the bonds iss	ued as part of a current refund	ling issue?			Х	<		X						
15 We	ere the bonds iss	ued as part of an advance refu	inding issue?			х	<		х						
16 Ha	is the final alloca	tion of proceeds been made?			X			x							
	es the organizati ocation of procee	on maintain adequate books a :ds?	and records to sup	port the final	x			х							
Part II	I Private Bu	siness Use							-						
					A Yes	N		Yes	3 No	Yes	<u>с</u> N		Yes	D	No
		on a partner in a partnership, o y tax-exempt bonds?	or a member of an L	LC, which owned		×		105	×	103					110
	e there any lease anced property?	e arrangements that may resul	t in private busine	ss use of bond-		х	<		х						
For Paper	work Reduction	Act Notice see the Instructio	ns for Form 990		C :	at No	5019	93E				Sch	edule K (I	Form (90) 201

Schedule K (Form 990) 2013

	III Private Business Use (Continued)									Page Z
Part	Private Business Use (Continued)						1			
			Yes			B		C	Yes	D
2-	Are there any management or service contracts that may result in private	husiness use	res	No	Yes	No	Yes	No	tes	No
3a	of bond-financed property?			Х		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or									
	outside counsel to review any management or service contracts relating to property?	the financed								
с	Are there any research agreements that may result in private business use financed property?	e of bond-		х		x				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance									
4	Enter the percentage of financed property used in a private business use b other than a section 501(c)(3) organization or a state or local government									1
5	Enter the percentage of financed property used in a private business use a	s a result of								
5	unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?			Х		X				
8a	Has there been a sale or disposition of any of the bond financed property to									
	nongovernmental person other than a 501(c)(3) organization since the bor issued?	nds were		Х		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of								
с	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non									
	bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?	der		Х		X				
Dar	TV Arbitrage									
r ar	Abilitige	A			В		с		D	
		Yes	No	Yes	No	Y	es	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		X					
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?		Х		X					
b	Exception to rebate?		Х		X					
с	No rebate due?		Х		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						
<u>-</u> 4a	Has the organization or the governmental issuer entered									
	into a qualified hedge with respect to the bond issue?	X		X						
b	Name of provider	Bank of Amer A	nca N	Bank of A A	merica N					
c	Term of hedge	10 0000	00000000	10 00	000000000	00				
d	Was the hedge superintegrated?		Х		X					
е	Was the hedge terminated?		х		X					
		-			-	•				

Schedule K (Form 990) 2013

Page **2**

Schedule K (Form 990) 2013

Par	t IV Arbitrage (Continued)								
		A		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х		х				
b	Name of provider								
с	T erm of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х		х				
7	Has the organization established written procedures to monitor the requirements of section 148?		х		х				
Pa	rt V Procedures To Undertake Corrective Action								
		A		В		С	_	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?		Х		х				

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

Schedule L Form 990 or 990			ULESS	As Filed I	Data -				DLN	: 9349	93229	033805
Form 990 or 990		Т	ransac	tions wit	h Interest	ed Perso	ons			ОМВ	No 154	15-0047
)-EZ)	"Yes"	► Co on Form 99 or	omplete if th 90, Part IV, li Form 990-EZ,	e organization a nes 25a, 25b, 20 Part V, line 38a	answered 5, 27, 28a, 28b a or 40b.), or 28c				201	
epartment of the Treasury ternal Revenue Service				chedule L (Fo	1 990-EZ. ► See rm 990 or 990-E 5.gov/form990	Z) and its ins			:		en to nspec	Public tion
Name of the orga							E	mploy	er ident	ificatio	on numb	er
Southwest Research	Institute						7	4-10	70544			
Part I Exces					3) and sectio						40b	
	of disqualifie		(b) Relatio	nship betwee	n dısqualıfıed	(c) Des						rrected?
			pers	on and organ	Ization						Yes	No
												-
												-
												_
												-
												-
												_
2 Enter the ar			-	-		-		r unde	rsectio	า		
4958 3 Enter the ar					• • • • • •			• •	►\$ ► ¢			
							• •	• •	⊢			
	ns to and				s. 990-EZ, Part \	/ luna 295 or	Earm 0	00 0	+ T\/ ı	na 26	oriftha	
					, line 5, 6, or 22		FUIIII9	90, Pa	ait IV, II	ne zo,		
(a) Name of Interested	(b) Relationship	(c) Purpose d	(d) Loan		(e)Original principal	(f)Balance due	(g) In defaul		(h) Approv	hev		ritten ment?
person	with .	loan	organizat		amount	uuc			by	cu	lagree	intent
	organızatıon								board or			
					_				commi			
			To	From			Yes	No	Yes	No	Yes	No
											—	
											_	
											_	
otal		► \$										
					e d Persons. n Form 990, P	Dart IV Jupa	77					
(a) Name of int		b) Relations			unt of assistanc			istanc	e (e) Purpo	se of as	sistance
person		nterested pe organı	rson and th									
		organi	241011									

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (d) Description of transaction (a) Name of interested person (b) Relationship (c) A mount of (e) Sharing between interested transaction of person and the organization's revenues? organızatıon Yes No See Additional Data Table

Part V Supplemental Information

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

Return Reference

Explanation

Schedule L (Form 990 or 990-EZ) 2013

Software ID: Software Version: EIN: 74-1070544 Name: Southwest Research Institute

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	1	aring of ation's nues?
	organization			Yes	No
(1) Heather Bates	Family member of Dan Bates,President	90,950	Employment		No
(2) Deborah Deffenbaugh	Family member of Danny M Deffenbaugh, Vice President	78,519	Employment		No
(3) Julia Fey	Family member of Walter D Downing Jr , Executive Vice President	42,788	Employment		No
(4)					No
(5) James Keys	Family member of Bob Keys, Vice President	205,950	Employment		No
(6) David O 'Neal	Family member of Bruce B Bykowski, Vice President	47,924	Employment		No
(7) William Rafferty	Family member of Beth Ann Rafferty, Chief Fiancial Officer	133,082	Employment		No
(8) Paul Easley II	Family member of Paul Easley, Vice President	43,298	Employment		No

efile GRAPHIC	print - DO NOT PR	OCESS	As Filed Data -		DLN: 93	49322	9033	805
SCHEDULE M		Noi	ncash Contrib	utions	0 N	1B No 1	545-0	047
(Form 990) Department of the Treasury		mplete if t	20	o Pub	olic			
Internal Revenue Service Name of the organiz		t Schedule N	ו (Form 990) and its instru וואלים		<u>//form990</u> . nployer ident if ic	Inspe ation pu		n
Southwest Research Inst				nployer identific	ation nu	mber		
Part I Types	s of Property			74	4-1070544			
Parti Types	s of Property	(2)	(b)	(a)		(4)		
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method c noncash con		-	nts
1 Art—Works of a								
2 Art—Historical								
3 Art—Fractional								
4 Books and pub5 Clothing and he								
6 Cars and other								
7 Boats and plan								
 8 Intellectual pro 9 Securities—Pu 	operty							
	osely held stock .							
11 Securities—Pa								
or trust interes	sts							
12 Securities—Mis								
13 Qualified conso contribution—F structures .	Historic							
14 Qualified const contribution—C	ervation Other							
15 Real estate—R								
	ommercial							
 Real estate—O Collectibles 								
19 Food inventory								
	lical supplies .							
21 Taxıdermy .								
22 Historical artif								
23 Scientific spec								
24 Archeological a25 Other ► (artifacts	x	1	125.823	FAIR MARKET			
<u>R&D EQUIPMENT)</u>)		-	125,025		VALUE		
26 Other►(<u>R&D EQUIPMENT</u>))	X	1		FAIR MARKET			
27 Other►(R&D EQUIPMENT))	X	1		FAIR MARKET			
<pre>28 Other►(<u>R&D EQUIPMENT</u>) Other►(</pre>)	- ×	1		FAIR MARKET			
<u>R&D EQUIPMENT</u>))		<u> </u>	17,243		VALUE		
			tion during the tax year for Part IV, Donee Acknowle		29			
			contribution any property e of the initial contribution			:	Yes	No
for exempt pu	rposes for the entire ho	oldıng perioc	1?		• • • • •	30a		No
-	ribe the arrangement i			_			,	
_	-		licy that requires the revie r related organizations to s			31	Yes	
contributions?	· · · · · · ·	-	=			32a		No
b If"Yes," desc	nbe 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

Schedule M (Form 990) (2013)

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -		DLN: 93493229033805
SCHEDULE O				OMBN0 1545-0047
(Form 990 or 990-EZ)	Supplementa	I Information to	o Form 990 or 990-EZ	2013
Department of the Treasury Internal Revenue Service	· · · · ·	ide information for resj 90 or to provide any ad ▶ Attach to Form 990		Open to Public Inspection
	Information about \$	-	or 990-EZ) and its instructions is at	
		www.irs.gov/fo	rm990.	
Name of the organization			Employe	r identification number
Southwest Research Institute	e			
			74-1070)544

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	
Form 990, Part VI, Section B, line 12c	Directors of the organization are obligated under the conflict of interest policy to repor t all conflicts, to disclose all interests that could arise to conflicts, and all covered family and business relationships when completing the required annual disclosure questionn aire
Form 990, Part VI, Section B, line 15	Determination of Compensation Sw RI's strategy is to provide compensation that is fair, re asonable, and consistent with compensation paid for similar work in relevant labor areas a nd with compensation paid by Institute competitors in the markets for scientific research and development (R&D) and other technical services. The principal compensation authority i is vested with the Board of Directors, how ever, the President of the Institute retains the authority to determine how various programs will be structured and administered subject to the oversight of the Compensation Committee of the Board of Directors. The Committee uses reputable compensation survey data, gathered annually, to compare the compensation of Off icers to peer groups, within the relevant market segments, targeting an appropriate percen- tile corresponding to performance both for the year in question, and considering longer-te irm performance trends for total compensation This review shall include comparative analys is of compensation paid by the linstitute to compensation paid by local, sector, and nation al applied research and development organizations of similar size, both for profit and non profit organizations. The Committee engages the services of an external compensation advis or when conducting such comparability studies. Compensation for the changes in annu al compensation and benefits for all Officers, except the President and Executive Vice Pre- sident. The Committee will review the performance of the President and Executive Vice Pre- sident. The Committee will review the performance of the President and Executive Vice Pre- sident. The Committee is and the Board of Directors' determination for bot h of these officers. Adequate documentation is created contemporaneously and maintained to substantiate the basis for the Committee's and the Board of Directors' determination of t otal compensation for the President and all other Officers.
Form 990, Part VI, Section C, line 19	The organization's governing documents, conflict of interest policy and financial statemen ts are available to the public upon written request to the organization's Treasurer
Form 990, Part XI, line 9	NET GAIN ON DERIVATIVE INSTRUMENT 559,857 DECREASE OBLIGATION FOR GROUP ANNUITY (NET) 63,2 70 INCREASED OBLIGATION FOR PMBP (NET) -2,406,013 NET UNREALIZED GAIN OF PRMB 4,212,666 FIT credit 1,335,310 Aquisition of remaining portion of Signature Science, LLC -1,058,76 2

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -
--------------------------------------	-----------------

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

▶ 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.

Department of the Treasury Internal Revenue Service

Name of the organization Southwest Research Institute

Employer identification number

				74-107054	4
Part I Identification of Disregarded Entities Complete	e if the organization a	nswered "Yes" on	Form 990, Par	t IV, lıne 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
(1) Signature Science LLC 8329 N Mopac Blvd Austin, TX 78759 90-0041499	Scientific Research and Development	ТХ	50,175	1,512,096	Southwest Research Institute

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co	g) 512(b) ontrolled tity?
						Yes	No
(1) ESSAR Recreation Association 6220 Culebra Road San Antonio, TX 78228 74-1490851	Improve the morale and welfare of members	ТХ	501(c)(4)				No
 (2) Tom Slick Memorial Trust for SwRI 6220 Culebra Road San Antonio, TX 78228 23-7225476 	Support for Southwest Research Institute's scientific & educational purposes	ТХ	501(c)(3)	11a			No
For Paperwork Reduction Act Notice, see the Instructions for Form	990.	Cat No 501	35Y		Schedule R (Forr	n 990) 2	2013

2013

Open to Public

Inspection

Part III Identification of Related Organizations Taxable as a Partnership Complete of 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.

	icated as a pe	in the is	inp during t	ne tax year.								
(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	e controlling r entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	total income	(g) Share of end- of-year assets	(h) Dispropi allocati	prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part		(k) Percentage ownership
		1	1	,	1 '	1	Yes	No	1	Yes	No	, <u> </u>
	Scientific Research and Development		Southwest Research Institute	Related Income	-28,185	8,545,854		No		Yes		86 470 %
											ļ	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			\square
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e	 	No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j	\square	No
k Lease of facilities, equipment, or other assets from related organization(s)	1 k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	1 Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	l Yes	
• Sharing of paid employees with related organization(s)	10	\square	No
p Reimbursement paid to related organization(s) for expenses	1 p		No
q Reimbursement paid by related organization(s) for expenses	1q	\square	No
r Other transfer of cash or property to related organization(s)	1r	Yes	
s Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must 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) ESSAR Recreation Association	В	34,670	GL Transaction Amt
(2) Tom Slick Memorial Trust for SwRI	С	677,133	GL Transaction Amt
(3) ESSAR Recreation Association	Ν	5,592,801	Asset Book Value
(4) ESSAR Recreation Association	R	43,614	GL Transaction Amt
(5) Signature Science LLC	L	1,809,968	GL Transaction Amt
(6) Signature Science LLC	М	3,674,572	GL Transaction Amt

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations	ate	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1 1	

Part VII Supplemental Information

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

Return Reference

Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 74-1070544

Name: Southwest Research Institute

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
ESSAR Recreation Association	В	34,670	GL Transaction Amt
Tom Slick Memorial Trust for SwRI	С	677,133	GL Transaction Amt
ESSAR Recreation Association	Ν	5,592,801	Asset Book Value
ESSAR Recreation Association	R	43,614	GL Transaction Amt
Signature Science LLC	L	1,809,968	GL Transaction Amt
Signature Science LLC	М	3,674,572	GL Transaction Amt

efile GRAPHIC prin	t - DO NOT PR	OCESS As Filed	Data -			DLN:	93493229033805
4500				OMBNo 1545-0172			
Form 4562		Depreciation (Including Information)		2042
Department of the Treasury		(2013
Internal Revenue Service (99)							Attachment
	•	See separate instruction	ns. 🕨 Attach	to your tax retu	ırn.		Sequence No 179
			s or activity to v	which this form r	elates		Identifying number
Name(s) shown on return Southwest Research Ins		Form 99	0 Page 10				
Southwest Research Ths	litute						
							74-1070544
		Certain Property U			lata Davt I		
	· · · · · · · · · · · · · · · · · · ·	isted property, compl				1	500,000
		laced in service (see ins				2	500,000
						3	2 000 000
		rty before reduction in li					2,000,000
		3 from line 2 If zero or				4	
		ctline 4 from line 1 If ze				-	
filing separately, se	ee instructions					5	
			(b) Cost (b)	usiness use			
6 (a) Description of pi	roperty	on		(c) Elected	cost	
7 Listed property Ente	er the amount from	n line 29		. 7			
8 Total elected cost	of section 179 pr	operty Add amounts in	column (c), lınes	6 and 7 🔹 🔹		8	
9 Tentative deductio	n Enter the small	er of line 5 or line 8 🔸				9	
10 Carryover of disalle	owed deduction fro	om line 13 of your 2012	Form 4562 •			10	
11 Business income li	mitation Enter th	e smaller of business in	come (not less tl	nan zero) or line	5 (see		
instructions)						11	
12 Section 179 expen	se deduction Add	d lines 9 and 10, but do	not enter more tl	nan line 11		12	
13 Carryover of disallow				. 🕨 13		·	ſ
Note: Do not use Par	t II or Part III l	below for listed prope	erty. Instead, u	ise Part V.			<u> </u>
Part II Special I	Depreciation A	Allowance and Othe	er Depreciati	on (Do not in	nclude listed	proper	rty) (See instructions)
14 Special depreciation							
						14	
15 Property subject to	section 168(f)(1)election · ·				15	
		,)				16	26,404,930
		Do not include listed				<u> </u>	, , ,
			ection A				
17 MACRS deductions	s for assets place	d in service in tax years	beginning before	2013 • • •		17	
18 If you are electing	to group any asse	ets placed in service dur	ing the tax year	into one or more	general		
asset accounts, ch	eckhere				. ⊾Г		
		Service During 20				preci	ation System
		(c) Basis for					
(a) Classification of	(b) Month and year placed in	depreciation (business/investment	(d) Recovery	(e) Convention	n (f) Meth	bod	(g)Depreciation
property	service	use	period			lou	deduction
		only—see instructions)				
19a 3-year property	_						
b 5-year property			+				+
c 7-year property							
d 10-year property e 15-year property			+	+			+
f 20-year property				1			+
g 25-year property			25 yrs	1	S/L		+
h Residential rental	1		27 5 yrs	ММ	S/L		†
property			27 5 yrs	мм	S/L		
i Nonresıdentıal real			39 yrs	ММ	S/L		
property				MM	S/L		
	ion C—Assets Pla	ced in Service During 20	13 Tax Year Usin	g the Alternativ		on Sys	tem
20a Class life	4				S/L		
b 12-year			12 yrs		S/L		<u> </u>
c 40-year		<u> </u>	40 yrs	ММ	S/L		
	ary (see instruc					<u> </u>	1
21 Listed property Ente						21	
22 Total. Add amounts f							
		your return Partnerships			ctions • •	22	26,404,930
23 For assets shown abo portion of the basis a				e 23			
		LIGH ZUDA LUSIS	· · · ·	· · · · ·			

orm 4562 (2013)		Ann /The all radia															age	
	ed Proper ertainment,					other v	enic	les, ce	rtain	comp	uter	s, an	a pro	pert	y us	еа то	r	
	e: For any					he stai	ndar	d milea	age r	ate or	dec	luctir	ıg lea	se e	exper	nse,		
	plete only																	
Section A—Depre							the i							_	_			
24a Do you have evider	nce to support f	the business/in	vestment u	use claime	d? Γ Υ εε	sГNo		24	ib If "`	r∕es,"ıs	the ev	videnco	e writte	n?	Yes			
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost o	I (DUSINESS/INVESTMENT I		(f) Recovery period	(g) Method/ Convention			(h) Depreciation/ deduction			(i) Elected section 1 cost					
25 Special depreciation allo 50% in a qualified busi	•		erty placed	in service (during the	tax year	and u	sed more	e than	25								
26 Property used mor		,	business	suse						1=0								
		%																
		%									_							
27 Property used 50%	 6 or less in a	,,		<u>م</u>														
		%							S/L -		Т							
		%							S/L -									
		%			L., .				S/L -				<u> </u>					
28 Add amounts in c						ne 21,	page	- L	28			<u> </u>						
29 Add amounts in c	olumn (i), lin								:	· ·	•		29					
Complete this sectior	n for vehicles		ction B								relat	ed ne	rson					
If you provided vehicles to														iose ve	ehicles			
30 Total business/in year (do not inclu			ring the	(a) (b) Vehicle 1 Vehicle 2						•	(d) (e) nicle 4 Vehicl			· ·				
31 Total commuting	mıles drıven	during the ye	ear .										+		+			
32 Total other persor	nal(noncomm	nuting) miles	drıven															
33 Total miles driver through 32	n during the y	ear Add line	es 30															
34 Was the vehicle a		ersonal use		Yes	No	Yes	No	Yes	r	No Y	Yes	No	Yes	5 N	<u>io</u> `	Yes	No	
during off-duty ho 35 Was the vehicle u owner or related p	sed primarily	• • • • v by a more t	• • han 5%										+					
36 Is another vehicle		r personal u	se? .										+	+				
Sectio Answer these questio 5% owners or related		ine if you me	et an exc													t mor	e tha	
37 Do you maintain a employees?	written polic	y statement	that prol	nıbıts all	personal	luse of	vehi • •	cles, ind	ludın	g comi •••	nutır •	ng, by • •	your •••	.	Ye	s	No	
38 Do you maintain a employees? See t														.				
39 Do you treat all us	se of vehicles	s by employe	es as pe	rsonal us	e?									. f				
40 Do you provide movehicles, and reta				oyees, o	btaın ınfo	ormatio	n fror	n your (emplo	yees a	bout	the u	se of	.				
41 Do you meet the r				automobi	le demoi	nstratio	n use	e? (See	Instr	uctions	;).			. †				
Note: If your ansv	ver to 37, 38	, 39, 40, or 4	41 is "Ye	s," do no	t comple	te Sect	ion B	for the	cove	red ve	hicle	s						
Part VI Amo	rtization																	
(a) Description of c	costs	(b) Date amortizatio	'n	((A mort	izable	le C		(d) Code		ode period o		ation	A mor			(f) rtization for		
		begins		amo	unt		se	ection		ercent				this	year			
42 A mortization of co	osts that beg	ins during yo	our 2013	tax year	(see ins	truction	ns)											
43 A mortization of co	osts that beg	an before yo	ur 2013	tax year			•			[43							
44 Total. Add amoun	ts ın column	(f) See the	nstructio	ns for wh	ere to re	port				Г	44							