PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2024
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2024 calendar year, or tax year beginning AUG 1, 2024 and ending JUL 31, 2025

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Final return/terminated [ ] Amended return [ ] Application pending

C Name of organization: PEPPERDINE UNIVERSITY
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) / Room/suite: 24255 PACIFIC COAST HWY
City or town, state or province, country, and ZIP or foreign postal code: MALIBU, CA 90263-4497

D Employer identification number: 95-1644037
E Telephone number: (818) 702-1364
G Gross receipts $ 1,224,947,415.

F Name and address of principal officer: JAMES A. GASH
SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No
H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. See instructions
H(c) Group exemption number

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) (insert no.) [ ] 4947(a)(1) or [ ] 527
J Website: WWW.PEPPERDINE.EDU
K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other
L Year of formation: 1937 **M** State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: PEPPERDINE UNIVERSITY IS A CHRISTIAN UNIVERSITY (CONTINUED SCHEDULE O).

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	5155
6	Total number of volunteers (estimate if necessary)	6	20
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	23,234,091.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	1,482,922.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	31,484,848.	56,339,649.
	9	Program service revenue (Part VIII, line 2g)	563,918,646.	553,972,247.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	92,081,374.	121,647,437.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,999,788.	23,157,358.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	705,484,656.	755,116,691.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	151,139,601.	150,373,104.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	249,636,516.	260,303,276.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	459,563.	476,686.
	b	Total fundraising expenses (Part IX, column (D), line 25) 9,354,583.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	263,499,285.	255,299,506.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	664,734,965.	666,452,572.
	19	Revenue less expenses. Subtract line 18 from line 12	40,749,691.	88,664,119.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,610,614,882.	2,732,551,710.
	21	Total liabilities (Part X, line 26)	756,550,821.	758,728,770.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,854,064,061.	1,973,822,940.

Part II Signature Block

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

Sign Here
Signature of officer — Date 6/2/26
GREG G. RAMIREZ, CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only
Preparer's name: DAVID M. HIGHFILL
Preparer's signature: David M. Highfill
Date: 6/01/2026
Check [ ] if self-employed
PTIN: P01517891
Firm's name: KPMG LLP
Firm's EIN: 13-5565207
Firm's address: 633 WEST 5TH STREET, LOS ANGELES, CA 90071
Phone no. 213-972-4000

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

LHA **For Paperwork Reduction Act Notice, see the separate instructions.** 432001 12-10-24 Form **990** (2024)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
PEPPERDINE UNIVERSITY IS A CHRISTIAN UNIVERSITY COMMITTED TO THE HIGHEST STANDARDS OF ACADEMIC EXCELLENCE AND CHRISTIAN VALUES, WHERE STUDENTS ARE STRENGTHENED FOR LIVES OF PURPOSE, SERVICE, AND LEADERSHIP. SEE SCHEDULE O FOR MORE INFORMATION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 233,812,960. including grants of $ 150,066,268.) (Revenue $ 61,734,780.)
STUDENT SERVICES, INCLUDING SCHOLARSHIPS TO ENROLLED STUDENTS - THERE ARE MANY AUXILIARY SERVICES OFFERED TO THE STUDENTS TO PROMOTE THEIR INTELLECTUAL, EMOTIONAL, AND SPIRITUAL DEVELOPMENT. PEPPERDINE UNIVERSITY MAINTAINS MULTIPLE DINING AND HOUSING FACILITIES, A BOOKSTORE, BANKING SERVICES, PARKING FACILITIES LOCATED ALL OVER CAMPUS, TRANSPORTATION SERVICES, RECREATIONAL FIELDS, AND MAIL SERVICES. IN ADDITION TO THESE FACILITIES AND SERVICES, PEPPERDINE UNIVERSITY OFFERS APPROXIMATELY 83% OF ITS TOTAL STUDENT BODY FINANCIAL AID IN THE FORM OF VARIOUS SCHOLARSHIPS, GRANTS, AND LOANS.

4b (Code:) (Expenses $ 126,751,443. including grants of $ 53,922.) (Revenue $ 474,779.)
ACADEMIC SUPPORT - PEPPERDINE UNIVERSITY EQUIPS STUDENTS WITH ACADEMIC SUPPORT TO ENSURE STUDENTS REACH THEIR EDUCATIONAL GOALS. UNIVERSITY SERVICES SUCH AS THE LIBRARY, TECH CENTRAL, PEPPERDINE COUNSELING CENTER, THE HEALTH CENTER, AND ONE STOP, THE PRIMARY ACADEMIC ADVISING CENTER, ASSIST IN THE WELL-BEING AND ACADEMIC PROGRESS OF THE UNIVERSITY'S STUDENTS.

4c (Code:) (Expenses $ 118,896,962. including grants of $ 238,889.) (Revenue $ 491,569,432.)
INSTRUCTION AND RESEARCH - PEPPERDINE UNIVERSITY IS A TOP CHRISTIAN INSTITUTION FOR HIGHER EDUCATION, AND SERVES APPROXIMATELY 3,600 UNDERGRADUATE STUDENTS AND 5,400 GRADUATE STUDENTS. IN ADDITION TO THE UNIVERSITY'S CAMPUSES IN CALIFORNIA, PEPPERDINE UNIVERSITY MAINTAINS SEVERAL STUDENT LEARNING PROGRAMS IN LOCATIONS SUCH AS EUROPE, SOUTH AMERICA, AND WASHINGTON D.C. PEPPERDINE UNIVERSITY BELIEVES IN A LOW STUDENT-FACULTY RATIO (13:1) AND HAS AN AVERAGE CLASS SIZE OF 18. THE UNIVERSITY OFFERS 43 MAJORS THAT UNDERGRADUATES CAN PURSUE, AS WELL AS 38 GRADUATE DEGREES, INCLUDING SEVEN DOCTORAL DEGREES.

4d Other program services (Describe on Schedule O.)
(Expenses $ 27,982,802. including grants of $ 14,025.) (Revenue $ 291,396.)

4e Total program service expenses 507,444,167.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
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		X
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	X	
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 Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
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		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16	X	
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	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	X	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26	X	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b	X	
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c	X	
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	X	
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	X	
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		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	11736			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
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: 5155			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	X	
b	If "Yes," enter the name of the foreign country SEE SCHEDULE O See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.		13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		17		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	20		
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	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
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		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
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 on Schedule O*		9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed CA,KY,MA,MD,MI,NH,OR,SC

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

MICHAEL MILLAR, CONTROLLER - 818-702-1364

24255 PACIFIC COAST HIGHWAY, MALIBU, CA 90263-4497

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JAMES GASH PRESIDENT & CEO	40.00 2.00	X		X				917,815.	0.	405,190.
(2) JAY BREWSTER PROVOST & CHIEF ACADEMIC OFFICER	40.00 0.00			X				473,194.	0.	382,341.
(3) PHIL PHILLIPS EXEC. VICE PRESIDENT	40.00 0.00			X				440,255.	0.	276,727.
(4) EDMUND SCHILLING HEAD COACH, BASKETBALL	40.00 0.00					X		558,269.	0.	21,022.
(5) PAUL CARON DEAN, CARUSO SCHOOL OF LAW	40.00 0.00						X	353,109.	0.	221,378.
(6) SARA YOUNG JACKSON CHANCELLOR	40.00 0.00			X				498,205.	0.	61,860.
(7) KIRON SKINNER PROFESSOR, SCHOOL OF PUBLIC POLICY	40.00 0.00					X		478,467.	0.	48,896.
(8) JEFFREY ROHDE CHIEF INVESTMENT OFFICER	40.00 2.00				X			447,528.	0.	76,885.
(9) MICHAEL FELTNER DEAN OF COLLEGE OF HEALTH SCIENCE	40.00 0.00					X		405,249.	0.	84,029.
(10) SARA COSENTINO VP FOR ADV & CHIEF DEV OFFICER	40.00 1.00			X				399,210.	0.	81,779.
(11) LORENZO ROMAR HEAD COACH, BASKETBALL	40.00 0.00					X		461,602.	0.	17,684.
(12) DEBORAH CROWN DEAN OF PGBS	40.00 0.00				X			410,079.	0.	55,752.
(13) GREG RAMIREZ CHIEF FINANCIAL OFFICER	40.00 1.00			X				427,277.	0.	36,961.
(14) NICOLLE TAYLOR SENIOR VP, COO	40.00 1.00			X				409,633.	0.	51,461.
(15) DAMON SEAN BURNETT SVP, INTEGRATED MARKETING & CMO	40.00 0.00			X				302,795.	0.	157,216.
(16) DANIEL DEWALT VP & CHIEF OF STAFF	40.00 2.00			X				389,748.	0.	68,421.
(17) LARRY PERRIN SVP STRATEGIC IMPLEMENTATION	40.00 0.00			X				400,269.	0.	54,006.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) LEE KATS DEAN, SEAVER FROM 3/25	40.00 0.00				X			409,117.	0.	43,259.
(19) FARZIN MADJIDI DEAN, GSEP	40.00 0.00				X			258,769.	0.	165,219.
(20) TIMOTHY SPIVEY VP SPIRITUAL LIFE	40.00 0.00			X				167,453.	0.	244,825.
(21) EDWARD LARSON DARLING CHAIR IN LAW & PROF	40.00 0.00					X		358,415.	0.	53,334.
(22) DAVID SMITH SENIOR ASSOCIATE PROVOST & PROFESSOR	40.00 0.00						X	346,575.	0.	36,241.
(23) CONNIE HORTON VP STUDENT AFFAIRS, VC RISE	40.00 0.00			X				204,856.	0.	161,918.
(24) SHARON BEARD INTERIM VP STUDENT AFFAIRS FROM 7/25	40.00 0.00			X				167,163.	0.	164,224.
(25) JERI-ELAYNE GOOSBY SMITH VP COMM BELONGING & CDO	40.00 0.00			X				292,655.	0.	37,840.
(26) MICHAEL NICKS DIRECTOR OF INVESTMENTS	40.00 0.00				X			250,151.	0.	75,589.
1b Subtotal								10,227,858.	0.	3,084,057.
c Total from continuation sheets to Part VII, Section A								1,822,159.	0.	442,583.
d Total (add lines 1b and 1c)								12,050,017.	0.	3,526,640.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 547

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

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
CLARK CONSTRUCTION GROUP - CA LP 18201 VON KARMAN STE 800, IRVINE, CA 92612	CONSTRUCTION	88,310,245.
2U INC 7900 HARKINS ROAD, LANHAM, MD 20706	E-LEARNING	54,190,121.
BON APPETIT MANAGEMENT COMPANY PO BOX 50196, LOS ANGELES, CA 90074-0196	CATERING	11,411,379.
TURNER & TOWNSEND HEERY LLC, 3550 LENOX ROAD NE STE 2300, ATLANTA, GA	CONSTRUCTION	5,233,313.
THE PENTA BUILDING GROUP LLC 181 E WARM SPRINGS RD, LAS VEGAS, NV 89119	CONSTRUCTION	3,560,852.

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 223

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	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
(27) JONATHAN SEE	40.00									
CHIEF INFORMATION OFFICER	0.00				X			249,221.	0.	74,690.
(28) LILA MCDOWELL CARLSEN	40.00									
VICE PROVOST FROM 3/25 & PROFESSOR	0.00				X			250,775.	0.	60,187.
(29) MICHAEL THOMAS	40.00									
VP, INTEGRATED MARKETING	0.00			X				250,549.	0.	57,994.
(30) BEN VEENENDAAL	40.00									
VP PLANNING, OPS & CONSTRUCTION	0.00			X				239,148.	0.	63,275.
(31) FAYE HOLTON	35.00									
DIRECTOR OF INVESTMENTS	6.00				X			248,525.	0.	44,705.
(32) GARY HANSON	40.00									
SENIOR EVP THRU 7/24	0.00						X	237,358.	0.	39,443.
(33) KATELYN CROWE	40.00									
CONTROLLER THRU 6/25	0.00				X			227,278.	0.	23,964.
(34) RICK GIBSON	40.00									
SV CHANCELLOR THRU 7/24	0.00						X	119,305.	0.	78,325.
(35) DEE ANNA SMITH	1.00									
CHAIR, REGENT	1.00	X		X				0.	0.	0.
(36) ALAN BEARD	1.00									
REGENT THRU 5/25	0.00	X						0.	0.	0.
(37) ANNA MERGELE	1.00									
REGENT	0.00	X						0.	0.	0.
(38) CHRISTOPHER RUDD	1.00									
REGENT	0.00	X						0.	0.	0.
(39) DALE BROWN	1.00									
REGENT	0.00	X						0.	0.	0.
(40) DENNIS LEWIS	1.00									
REGENT	0.00	X						0.	0.	0.
(41) ERIC WOLFORD	1.00									
REGENT	0.00	X						0.	0.	0.
(42) FREDERICK RICKER	1.00									
VICE CHAIR, REGENT	0.00	X		X				0.	0.	0.
(43) JAY WELKER	1.00									
SECRETARY, REGENT	1.00	X		X				0.	0.	0.
(44) JEREMY JOHNSON	1.00									
REGENT	0.00	X						0.	0.	0.
(45) JOHN LEWIS	1.00									
ASSISTANT SECRETARY, REGENT	1.00	X		X				0.	0.	0.
(46) JOHN PLUEGER	1.00									
REGENT	0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	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
(47) KASEY PIPES REGENT	1.00 0.00	X						0.	0.	0.
(48) KIMBERLY LINDLEY REGENT	1.00 0.00	X						0.	0.	0.
(49) MICHAEL OKABAYASHI REGENT	1.00 0.00	X						0.	0.	0.
(50) PETER JOHNSON, JR. REGENT	1.00 0.00	X						0.	0.	0.
(51) R. CHARLES WALKER, JR. REGENT	1.00 0.00	X						0.	0.	0.
(52) SETH HAYE REGENT	1.00 0.00	X						0.	0.	0.
(53) SHELLE ENSIO REGENT	1.00 0.00	X						0.	0.	0.
(54) STEPHEN STEWART REGENT	1.00 0.00	X						0.	0.	0.
(55) VIRGINIA MILSTEAD REGENT	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c								1,822,159.		442,583.

Part VIII **Statement of Revenue**

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	731,732.				
	d	Related organizations	1d	6,900.				
	e	Government grants (contributions)	1e	5,155,040.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	50,445,977.				
	g	Noncash contributions included in lines 1a-1f	1g	$ 6,245,872.				
	h	**Total.** Add lines 1a-1f			56,339,649.			
Program Service Revenue				**Business Code**				
	2 a	STUDENT TUITION & FEES		611710	498,357,943.	498,357,943.		
	b	ROOM AND BOARD		611710	50,092,254.	50,092,254.		
	c	OTHER REVENUE		611710	3,536,504.	3,536,504.		
	d	SALES AND SERVICES		611710	1,985,546.	1,985,546.		
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a-2f			553,972,247.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			34,337,005.		8,110,907.	26,226,098.
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
				(i) Real / (ii) Personal				
	6 a	Gross rents	6a	(i) 861,418.				
	b	Less: rental expenses	6b	(i) 0.				
	c	Rental income or (loss)	6c	(i) 861,418.				
	d	Net rental income or (loss)			861,418.	98,140.	49,773.	713,505.
				(i) Securities / (ii) Other				
	7 a	Gross amount from sales of assets other than inventory	7a	(i) 556,205,852.				
	b	Less: cost or other basis and sales expenses	7b	(i) 468,895,420.				
	c	Gain or (loss)	7c	(i) 87,310,432.				
	d	Net gain or (loss)			87,310,432.		11,068,739.	76,241,693.
	8 a	Gross income from fundraising events (not including $ 731,732. of contributions reported on line 1c). See Part IV, line 18	8a	592,387.				
	b	Less: direct expenses	8b	935,304.				
	c	Net income or (loss) from fundraising events			-342,917.			-342,917.
	9 a	Gross income from gaming activities. See Part IV, line 19	9a	420.				
	b	Less: direct expenses	9b	0.				
	c	Net income or (loss) from gaming activities			420.			420.
	10 a	Gross sales of inventory, less returns and allowances	10a					
	b	Less: cost of goods sold	10b					
	c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue				**Business Code**				
	11 a	OPERATING INTEREST REV		900099	6,741,660.		0.	6,741,660.
	b	OTHER NON PROGRAM REV		900099	6,291,328.		93,100.	6,198,228.
	c	SALES AND SERVICES		900099	5,605,449.		3,911,572.	1,693,877.
	d	All other revenue		900099	4,000,000.			4,000,000.
	e	**Total.** Add lines 11a-11d			22,638,437.			
	12	**Total revenue.** See instructions			755,116,691.	554,070,387.	23,234,091.	121,472,564.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,750.	10,750.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	141,630,402.	141,630,402.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	8,731,952.	8,731,952.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	10,718,699.	3,122,408.	5,806,896.	1,789,395.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	3,205,912.	2,396,861.	533,573.	275,478.
7 Other salaries and wages	188,694,630.	136,358,303.	48,114,975.	4,221,352.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,826,918.	8,656,042.	3,850,931.	319,945.
9 Other employee benefits	31,132,658.	24,382,686.	5,918,634.	831,338.
10 Payroll taxes	13,724,459.	9,337,829.	4,002,606.	384,024.
11 Fees for services (nonemployees):				
a Management				
b Legal	6,619,177.	357,382.	6,261,795.	
c Accounting	1,377,578.	57,147.	1,320,431.	
d Lobbying	52,276.		52,276.	
e Professional fundraising services. See Part IV, line 17	476,686.			476,686.
f Investment management fees	7,853,587.		7,853,587.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	57,870,300.	56,747,362.	1,122,938.	
12 Advertising and promotion	6,282,245.	802,494.	5,331,973.	147,778.
13 Office expenses	13,350,252.	6,321,759.	6,728,081.	300,412.
14 Information technology	9,775,368.	3,896,407.	5,873,442.	5,519.
15 Royalties				
16 Occupancy	13,379,729.	8,969,036.	4,408,508.	2,185.
17 Travel	13,269,408.	9,930,464.	3,136,073.	202,871.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,243,224.	3,443,705.	1,761,563.	37,956.
20 Interest	16,560,948.	13,523,093.	2,971,725.	66,130.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	32,843,505.	26,561,094.	6,152,528.	129,883.
23 Insurance	6,608,196.	163,266.	6,444,930.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a STUDENT MEALS	12,218,094.	1,220,310.	10,997,552.	232.
b CONSTRUCTION & EQUIP	11,794,100.	3,178,079.	8,611,621.	4,400.
c EQUIPMENT RENTAL & MAIN	4,457,430.	3,064,791.	1,391,270.	1,369.
d LIBRARY EXPENSES	2,146,879.	2,130,130.	16,749.	
e All other expenses	33,597,210.	32,450,415.	989,165.	157,630.
25 **Total functional expenses.** Add lines 1 through 24e	666,452,572.	507,444,167.	149,653,822.	9,354,583.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	17,393,175.	1	38,037,817.
	2	Savings and temporary cash investments	71,998,121.	2	69,914,730.
	3	Pledges and grants receivable, net	43,656,073.	3	45,527,272.
	4	Accounts receivable, net	19,235,283.	4	19,971,695.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	1,390,151.	5	1,689,201.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net	6,698,126.	7	7,355,994.
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	9,904,686.	9	12,800,326.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a 1,156,457,908.			
	b	Less: accumulated depreciation — 10b 351,394,198.	653,395,634.	10c	805,063,710.
	11	Investments - publicly traded securities	569,315,138.	11	547,834,191.
	12	Investments - other securities. See Part IV, line 11	933,278,724.	12	940,236,466.
	13	Investments - program-related. See Part IV, line 11	11,873,325.	13	11,721,734.
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	272,476,446.	15	232,398,574.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	2,610,614,882.	16	2,732,551,710.
Liabilities	17	Accounts payable and accrued expenses	54,288,345.	17	69,581,002.
	18	Grants payable		18	
	19	Deferred revenue	29,050,325.	19	29,856,863.
	20	Tax-exempt bond liabilities	29,963,639.	20	24,993,561.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	31,511,434.	21	32,405,894.
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	611,737,078.	25	601,891,450.
	26	**Total liabilities.** Add lines 17 through 25	756,550,821.	26	758,728,770.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** [X] **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	1,071,683,429.	27	1,134,110,089.
	28	Net assets with donor restrictions	782,380,632.	28	839,712,851.
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	1,854,064,061.	32	1,973,822,940.
	33	Total liabilities and net assets/fund balances	2,610,614,882.	33	2,732,551,710.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	755,116,691.
2	Total expenses (must equal Part IX, column (A), line 25)	2	666,452,572.
3	Revenue less expenses. Subtract line 2 from line 1	3	88,664,119.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,854,064,061.
5	Net unrealized gains (losses) on investments	5	22,113,301.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	8,981,459.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,973,822,940.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ________ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: [ ] Separate basis [X] Consolidated basis [ ] Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	X	
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 on Schedule O and describe any steps taken to undergo such audits	3b	X	

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

2 [X] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

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

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

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

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

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

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

9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

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

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

12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	67,242,887.	71,538,193.	44,076,355.	31,484,848.	56,339,649.	270,681,932.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	67,242,887.	71,538,193.	44,076,355.	31,484,848.	56,339,649.	270,681,932.
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)						1,944,069.
6 **Public support.** Subtract line 5 from line 4.						268,737,863.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	67,242,887.	71,538,193.	44,076,355.	31,484,848.	56,339,649.	270,681,932.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	79,329,098.	21,255,394.	33,571,510.	28,300,271.	26,939,603.	189,395,876.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	538,255.	4,400,240.	1,172,617.	3,663,030.	6,088,809.	15,862,951.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,303,956.	6,819,913.	10,629,356.	14,540,167.	19,226,572.	53,519,964.
11 **Total support.** Add lines 7 through 10						529,460,723.

12 Gross receipts from related activities, etc. (see instructions) — 12 — 2,685,432,854.

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) — 14 — 50.76 %

15 Public support percentage from 2023 Schedule A, Part II, line 14 — 15 — 52.06 %

16a **33 1/3% support test - 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support test - 2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% -facts-and-circumstances test - 2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10% -facts-and-circumstances test - 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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 VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) | 15 | %

16 Public support percentage from 2023 Schedule A, Part III, line 15 | 16 | %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f)) | 17 | %

18 Investment income percentage from **2023** Schedule A, Part III, line 17 | 18 | %

19a **33 1/3% support tests - 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

- **a** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	*Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.	**3b**		

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	5	
6 Other distributions (describe in **Part VI**). See instructions.	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	**(i)** Excess Distributions	**(ii)** Underdistributions Pre-2024	**(iii)** Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f **Total** of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

FUNDRAISING EVENTS & GAMING
2020 AMOUNT: $ 103,145.
2021 AMOUNT: $ 377,142.
2022 AMOUNT: $ 644,230.
2023 AMOUNT: $ 714,596.
2024 AMOUNT: $ 592,387.

OTHER INCOME
2020 AMOUNT: $ 115,661.
2021 AMOUNT: $ 3,184,968.
2022 AMOUNT: $ 5,331,127.
2023 AMOUNT: $ 5,043,889.
2024 AMOUNT: $ 6,198,228.

SALES AND SERVICES
2020 AMOUNT: $ 1,447,201.
2021 AMOUNT: $ 3,254,943.
2022 AMOUNT: $ 4,652,279.
2023 AMOUNT: $ 8,779,312.
2024 AMOUNT: $ 1,693,877.

GAMING INCOME
2020 AMOUNT: $ 4,960.
2021 AMOUNT: $ 2,860.
2022 AMOUNT: $ 1,720.
2023 AMOUNT: $ 2,370.
2024 AMOUNT: $ 420.

INSURANCE SETTLEMENT
2020 AMOUNT: $ 632,989.

SETTLEMENT PAYMENTS
2024 AMOUNT: $ 4,000,000.

OPERATING INTEREST REVENUE
2024 AMOUNT: $ 6,741,660.

Schedule B (Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service	**Schedule of Contributors** **Attach to Form 990, 990-EZ, or 990-PF.** **Go to www.irs.gov/Form990 for the latest information.**	OMB No. 1545-0047

Name of the organization	**Employer identification number**
PEPPERDINE UNIVERSITY	95-1644037

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year .... $ ____________

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization	Employer identification number
PEPPERDINE UNIVERSITY	95-1644037

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 3,000,167.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
2		$ 1,500,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 1,691,041.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 2,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5		$ 9,999,510.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6		$ 3,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
PEPPERDINE UNIVERSITY	95-1644037

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 1,563,739.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8		$ 2,397,898.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
9		$ 1,500,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
PEPPERDINE UNIVERSITY	95-1644037

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	STOCK/PROPERTY	$ 3,000,167.	01/30/25

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

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

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

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

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

Name of organization	Employer identification number (EIN)
PEPPERDINE UNIVERSITY	95-1644037

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures .... $

3 Volunteer hours for political campaign activities ....

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

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

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

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .... ☐ Yes ☐ No

4a Was a correction made? .... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

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

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .... $

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

4 Did the filing organization file **Form 1120-POL** for this year? .... ☐ Yes ☐ No

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

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

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

IF the amount on line 1e, column (a) or (b), is:	THEN 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.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2021	**(b)** 2022	**(c)** 2023	**(d)** 2024	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X		2,588.
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		49,688.
j Total. Add lines 1c through 1i			52,276.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

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

Part IV **Supplemental Information**

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LINE 1(F), GRANTS TO OTHER ORGANIZATIONS FOR LOBBYING PURPOSES:
THE UNIVERSITY PAID MEMBERSHIP DUES TO THE NATIONAL ASSOCIATION OF COLLEGE AND UNIVERSITY BUSINESS OFFICERS AND THE ASSOCIATION OF INDEPENDENT CALIFORNIA COLLEGES AND UNIVERSITIES, A PORTION OF WHICH WAS USED BY THE ORGANIZATIONS TO LOBBY FOR HIGHER EDUCATION INITIATIVES.

LINE 1(I), OTHER ACTIVITIES:
THE UNIVERSITY HIRED A LOBBYING FIRM IN CONNECTION WITH LAND USE ISSUES.

SCHEDULE D (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	7	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)	277,129.	
4	Aggregate value at end of year	1,484,844.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (for example, recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

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

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

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

4 Number of states where property subject to conservation easement is located ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ______

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ______

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part VIII, line 1 $ ______

(ii) Assets included in Form 990, Part X $ 11,100,844.

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

a Revenue included on Form 990, Part VIII, line 1 $ ______

b Assets included in Form 990, Part X $ ______

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

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

a [X] Public exhibition
b [X] Scholarly research
c [X] Preservation for future generations
d [ ] Loan or exchange program
e [ ] Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [ ] Yes [X] No

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

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? [ ] Yes [X] No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? [X] Yes [ ] No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII [X]

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,319,031,044.	1,218,871,505.	1,200,868,391.	1,145,290,820.	908,307,875.
b Contributions	27,974,733.	16,300,465.	27,297,369.	87,393,092.	23,371,272.
c Net investment earnings, gains, and losses	132,183,986.	140,901,535.	48,419,708.	21,517,845.	273,594,646.
d Grants or scholarships	18,295,573.	17,517,115.	16,825,278.	16,113,915.	15,474,077.
e Other expenditures for facilities and programs	125,911,580.	39,525,347.	40,888,685.	37,219,451.	44,508,896.
f Administrative expenses					
g End of year balance	1,334,982,610.	1,319,031,044.	1,218,871,505.	1,200,868,391.	1,145,290,820.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 52.4437 %
b Permanent endowment 34.8783 %
c Term endowment 12.6781 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations?	3a(i)	X	
(ii) Related organizations?	3a(ii)	X	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	X	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		24,719,804.		24,719,804.
b Buildings	26,499,843.	1,014,179,170.	328,530,724.	712,148,289.
c Leasehold improvements				
d Equipment		70,795,179.	22,525,586.	48,269,593.
e Other		20,263,912.	337,888.	19,926,024.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				805,063,710.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	936,951,675.	END-OF-YEAR MARKET VALUE
(B) LIMITED PARTNERSHIPS	1,773,184.	END-OF-YEAR MARKET VALUE
(C) OTHER INVESTMENTS	1,109,843.	END-OF-YEAR MARKET VALUE
(D) CASH & CASH EQUIV. INVESTMENTS	401,764.	COST
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	940,236,466.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) ASSETS HELD AS TRUSTEE	41,020,088.
(2) INVESTMENTS IN SUBSIDIARIES	87,284,665.
(3) ASSETS UNDER AGENCY AGREEMENTS	72,910,815.
(4) RIGHT OF USE ASSETS	31,183,006.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	232,398,574.

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) U.S. GOVERNMENT STUDENT LOANS	842,098.
(3) TAXABLE BOND LIABILITIES	562,657,374.
(4) LEASE LIABILITY	38,391,978.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	601,891,450.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	628,930,814.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	22,113,301.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	9,916,763.		
e	Add lines 2a through 2d			2e	32,030,064.
3	Subtract line 2e from line 1			3	596,900,750.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,853,587.		
b	Other (Describe in Part XIII.)	4b	150,362,354.		
c	Add lines 4a and 4b			4c	158,215,941.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	755,116,691.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	509,171,935.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	935,304.		
e	Add lines 2a through 2d			2e	935,304.
3	Subtract line 2e from line 1			3	508,236,631.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,853,587.		
b	Other (Describe in Part XIII.)	4b	150,362,354.		
c	Add lines 4a and 4b			4c	158,215,941.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	666,452,572.

Part XIII Supplemental Information

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

PART III, LINE 4:

COLLECTION OF ART AND OTHER SIMILAR ASSETS:

COLLECTIONS CONSIST OF ITEMS ACQUIRED BY THE UNIVERSITY'S LIBRARY THAT REQUIRE SPECIAL HANDLING DUE TO THEIR RARITY, VALUE, AND/OR PHYSICAL CONDITION. THE UNIVERSITY ALSO MAINTAINS AN ARCHIVAL COLLECTION OF OFFICIAL DOCUMENTS, PAPERS, PUBLICATIONS, AND ARTIFACTS OF PEPPERDINE UNIVERSITY AND PERSONS CONNECTED WITH THE UNIVERSITY. THESE COLLECTIONS ARE PROTECTED AND PRESERVED FOR EDUCATION, RESEARCH, AND PUBLIC EXHIBITION.

PART IV, LINE 2B:

ESCROW AND CUSTODIAL ARRANGEMENTS:

PEPPERDINE UNIVERSITY RECORDS A CUSTODIAL LIABILITY FOR CHARITABLE GIFT ANNUITIES, CHARITABLE REMAINDER TRUSTS, AND LIFE ESTATES THAT ARE SUBJECT TO LIFE INTERESTS OF THE BENEFICIARIES. NO SIGNIFICANT FINANCIAL BENEFIT CAN BE REALIZED UNTIL THE CONTRACTUAL OBLIGATIONS ARE RELEASED.

THE UNIVERSITY ALSO ACTS AS THE FISCAL AGENT FOR FUNDS RELATED TO UNIVERSITY SPONSORED AND/OR AFFILIATED PROGRAMS, AS WELL AS STUDENT GROUPS. THE UNIVERSITY DOES NOT OWN THE FUNDS ASSOCIATED WITH THESE GROUPS.

PART V, LINE 4:

USE OF ENDOWMENT FUNDS:

THE INTENT OF PEPPERDINE UNIVERSITY'S ENDOWMENT FUND IS TO GENERATE

Part XIII Supplemental Information *(continued)*

REVENUES NECESSARY TO SUPPORT THE UNIVERSITY'S EXEMPT PURPOSE, INCLUDING EDUCATION, RESEARCH, AND SCHOLARSHIP.

PART X, LINE 2:

LIABILITY FOR UNCERTAIN TAX POSITIONS:

AS A NOT-FOR-PROFIT EDUCATIONAL INSTITUTION, THE UNIVERSITY IS EXEMPT FROM FEDERAL AND CALIFORNIA INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE (EXCEPT FOR TAXES ON UNRELATED BUSINESS INCOME). SINCE THE UNIVERSITY'S UNRELATED BUSINESS INCOME FOR THE YEARS ENDED JULY 31, 2025 AND 2024 WAS IMMATERIAL, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ACTUARIAL ADJUSTMENT OF TRUST OBLIGATIONS	-1,892,492.
FUNDRAISING EXP REPORTED AS FUNCTIONAL EXP ON FS	935,304.
ANNUITY FUNDS TRANSFERRED FROM RELATED ORGANIZATION	12,515,802.
CHANGE IN VALUE OF BENEFICIAL INTEREST	-1,641,851.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	9,916,763.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GROSS-UP FINANCIAL AID REPORTED NET ON FINANCIALS	150,362,354.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXP REPORTED NET OF REVENUE ON FORM 990	935,304.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

GROSS-UP FINANCIAL AID REPORTED NET ON FINANCIALS	150,362,354.

SCHEDULE E (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Schools

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X	
	PEPPERDINE UNIVERSITY DISPLAYS A NOTICE OF ITS RACIALLY NONDISCRIMINATORY POLICY ON ITS PRIMARY, PUBLICLY ACCESSIBLE INTERNET HOMEPAGE AT ALL TIMES IN ACCORDANCE WITH REV. PROC. 2019-22.			
4	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain in Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II	7	X	

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

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
PEPPERDINE UNIVERSITY IS AWARDED GRANTS FROM GOVERNMENT AGENCIES TO PROVIDE FINANCIAL AID TO STUDENTS. THESE GOVERNMENT AGENCIES INCLUDE, BUT ARE NOT LIMITED TO, THE U.S. DEPARTMENT OF EDUCATION, THE CALIFORNIA STUDENT AID COMMISSION, AND THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE.

SCHEDULE F **(Form 990)**
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to *www.irs.gov/Form990* **for instructions and the latest information.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
PEPPERDINE UNIVERSITY	95-1644037

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...... [X] **Yes** [ ] **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in the region (by type) (such as, 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 the region	**(f)** Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		288,461,572.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		31,959,727.
EUROPE (INCLUDING ICELAND AND GREENLAND)	4	139	PROGRAM SERVICES	EDUCATIONAL PROGRAMS	19,397,159.
SOUTH AMERICA	1	19	PROGRAM SERVICES	EDUCATIONAL PROGRAMS	2,640,560.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	EDUCATIONAL PROGRAMS	322,885.
SUB-SAHARAN AFRICA	0	43	PROGRAM SERVICES	EDUCATIONAL PROGRAMS	744,039.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING	SCHOLARSHIPS / FINANCIAL ASSISTANCE	7,310,469.
SOUTH AMERICA	0	0	GRANTMAKING	SCHOLARSHIPS / FINANCIAL ASSISTANCE	872,849.
3 a Subtotal	5	201			351,709,260.
b Total from continuation sheets to Part I	0	0			548,634.
c **Totals** (add lines 3a and 3b)	5	201			352,257,894.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule F (Form 990) (Rev. 12-2024)**

LHA 432071 01-15-25

Part I **Continuation of Activities per Region.** (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING	SCHOLARSHIPS / FINANCIAL ASSISTANCE	346,785.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING	SCHOLARSHIPS / FINANCIAL ASSISTANCE	201,849.
Totals					548,634.

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

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

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

3 Enter total number of other organizations or entities

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

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS / FINANCIAL ASSISTANCE	EUROPE (INCLUDING ICELAND AND GREENLAND)	429	7310469.	STUDENT ACCOUNT	0.	N/A	N/A
SCHOLARSHIPS / FINANCIAL ASSISTANCE	SOUTH AMERICA	49	872,849.	STUDENT ACCOUNT	0.	N/A	N/A
SCHOLARSHIPS / FINANCIAL ASSISTANCE	EAST ASIA AND THE PACIFIC	48	346,785.	STUDENT ACCOUNT	0.	N/A	N/A
SCHOLARSHIPS / FINANCIAL ASSISTANCE	SUB-SAHARAN AFRICA	28	201,849.	STUDENT ACCOUNT	0.	N/A	N/A

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* ..... [X] **Yes** [ ] **No**

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ..... [ ] **Yes** [X] **No**

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* ..... [X] **Yes** [ ] **No**

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* ..... [X] **Yes** [ ] **No**

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* ..... [X] **Yes** [ ] **No**

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* ..... [ ] **Yes** [X] **No**

Part V Supplemental Information

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

PART I, LINE 2:

MONITORING OF FUNDS:

PEPPERDINE UNIVERSITY MAINTAINS AN OFFICE OF RESEARCH, GRANTS, AND FOUNDATION RELATIONS THAT OVERSEES THE ADMINISTRATION OF ALL GRANTS, DOMESTIC AND INTERNATIONAL, TO ENSURE COMPLIANCE WITH GRANT REQUIREMENTS, AS WELL AS LAWS AND REGULATIONS. FURTHER OVERSIGHT IS PROVIDED BY THE UNIVERSITY'S FINANCE OFFICE.

PART I, LINE 3(F):

ACCOUNTING BASIS:

EXPENDITURES IN COLUMN (F) ARE THE REGIONAL EXPENDITURES INCURRED BY THE UNIVERSITY IN U.S. DOLLARS AND BASED ON THE ACCRUAL BASIS OF ACCOUNTING.

PART III, COL (C):

NUMBER OF RECIPIENTS:

THE NUMBER OF RECIPIENTS REPORTED IN COLUMN (C) IS DETERMINED BY REVIEWING THE ACTUAL NUMBER OF STUDENTS THAT RECEIVED AID FOR THE RESPECTIVE REGION.

PART III, COL (D):

ACCOUNTING BASIS:

EXPENDITURES REPORTED IN COLUMN (D) ARE IN U.S. DOLLARS USING THE ACCRUAL BASIS OF ACCOUNTING.

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

Part I Fundraising Activities.

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

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

- **a** [ ] Mail solicitations
- **b** [ ] Internet and email solicitations
- **c** [ ] Phone solicitations
- **d** [ ] In-person solicitations
- **e** [ ] Solicitation of nongovernment grants
- **f** [ ] Solicitation of government grants
- **g** [X] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [X] **Yes** [ ] **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
EVERTRUE - P.O. BOX 844787, BOSTON, MA 02284	SOFTWARE & PROFESSIONAL SERVICE		X	0.	186,291.	0.
MARTS & LUNDY - 1200 WALL STREET W, LYNDHURST, NJ	PROFESSIONAL FUNDRAISING SERVICES		X	0.	178,834.	0.
JAMES MICHAEL LANGLEY - 8300 WISCONSIN AVE APT. 302,	CONSULTANT		X	0.	43,200.	0.
DOUGLAS CORBIN - 44 DORNOCH WAY, TRABUCO CANYON, CA	CONSULTANT		X	0.	39,200.	0.
25 GIVING - 3711 MOPAC EXPY STE 150, AUSTIN, TX 78746	PROFESSIONAL FUNDRAISING SERVICES		X	0.	8,000.	0.
KDD PHILANTHROPY INC. - 11324 SHOREPOINTE COURT, SAN DIEGO,	CONSULTANT		X	0.	6,578.	0.
COMMUNICATIONS CENTER LLC (JIMMY DUNNE) - 14020 PANAY	CONSULTANT		X	0.	14,583.	0.
Total					476,686.	

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

AL,AK,AR,CA,CO,CT,DC,HI,KY,MD,MA,MI,MO,NV,NH,NC,OH,OR,PA,SC,UT,VA,WA,WV

SEE PART IV FOR CONTINUATIONS

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

		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 LAW DINNER (event type)	(c) Other events 3 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	566,731.	335,921.	421,467.	1,324,119.
	2 Less: Contributions	303,321.	191,071.	237,340.	731,732.
	3 Gross income (line 1 minus line 2)	263,410.	144,850.	184,127.	592,387.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	3,183.	260,744.	118,040.	381,967.
	8 Entertainment		3,000.		3,000.
	9 Other direct expenses	306,615.	87,802.	155,920.	550,337.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				935,304.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-342,917.

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

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

9 Enter the state(s) in which the organization conducts gaming activities: ____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: ____

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

b If "Yes," explain: ____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

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

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility **13a** %

b An outside facility **13b** %

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

Name

Address

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

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

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

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation $

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: MARTS & LUNDY

(I) ADDRESS OF FUNDRAISER: 1200 WALL STREET W, LYNDHURST, NJ 07071

(I) NAME OF FUNDRAISER: JAMES MICHAEL LANGLEY

(I) ADDRESS OF FUNDRAISER: 8300 WISCONSIN AVE APT. 302, BETHESDA, MD 20814

(I) NAME OF FUNDRAISER: DOUGLAS CORBIN

(I) ADDRESS OF FUNDRAISER: 44 DORNOCH WAY, TRABUCO CANYON, CA 92679

(I) NAME OF FUNDRAISER: KDD PHILANTHROPY INC.

(I) ADDRESS OF FUNDRAISER: 11324 SHOREPOINTE COURT, SAN DIEGO, CA 92310

(I) NAME OF FUNDRAISER: COMMUNICATIONS CENTER LLC (JIMMY DUNNE)

(I) ADDRESS OF FUNDRAISER:

14020 PANAY WAY STE 123, MARINA DEL REY, CA 90292

Part IV Supplemental Information *(continued)*

SCHEDULE I
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY
Employer identification number 95-1644037

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] **Yes** [ ] **No**

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
FOREVER FOUND 1070 COUNTRY CLUB DRIVE SUITE F SIMI VALLEY, CA 93065	27-2568005	501(C)(3)	6,250.	0.	N/A	N/A	GENERAL SUPPORT

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (Rev. 12-2024)**

LHA 432101 01-02-25

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS / FINANCIAL AID PAID	6139	141,630,402.	0.	N/A	N/A

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:
MONITORING USE OF FUNDS:
GRANTS ARE PROVIDED ON THE BASIS OF VERIFIED FINANCIAL NEED OR MERIT. THE UNIVERSITY DOES NOT UNLAWFULLY DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL OR ETHNIC ORIGIN, RELIGION, AGE, SEX, DISABILITY, OR PRIOR MILITARY SERVICE. FINANCIAL ASSISTANCE IS MONITORED SO THAT IT IS IN COMPLIANCE WITH AWARDING TERMS AND CONDITIONS. EXPENDITURES ARE REVIEWED FOR PERMISSIBILITY AND COMPLIANCE. STUDENTS ARE REQUIRED TO SUBMIT APPROPRIATE DOCUMENTS PRIOR TO APPROVAL.

PART III, LINE (B)
NUMBER OF RECIPIENTS:
CASH GRANTS ARE CREDITS TO STUDENT ACCOUNTS. THE NUMBER OF RECIPIENTS REPRESENTS ONLY THE NUMBER OF STUDENTS RECEIVING INSTITUTIONAL FUNDING AND FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS. OUTSIDE GRANTS, OR APPLICATIONS OF FUNDS PROVIDED BY OUTSIDE ORGANIZATIONS, ARE NOT INCLUDED.

SCHEDULE J (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. [X] First-class or charter travel [X] Travel for companions [X] Tax indemnification and gross-up payments [ ] Discretionary spending account [X] Housing allowance or residence for personal use [ ] Payments for business use of personal residence [X] Health or social club dues or initiation fees [X] Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	**2**	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. [X] Compensation committee [X] Independent compensation consultant [ ] Form 990 of other organizations [ ] Written employment contract [X] Compensation survey or study [X] Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	**4b**		X
c	Participate in or receive payment from an equity-based compensation arrangement?	**4c**		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		X
b	Any related organization?	**5b**		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		X
b	Any related organization?	**6b**		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	**7**	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JAMES GASH	(i)	562,795.	350,000.	5,020.	34,500.	370,690.	1,323,005.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JAY BREWSTER	(i)	395,345.	74,000.	3,849.	27,521.	354,820.	855,535.	0.
PROVOST & CHIEF ACADEMIC OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PHIL PHILLIPS	(i)	325,410.	90,000.	24,845.	65,000.	211,727.	716,982.	0.
EXEC. VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) EDMUND SCHILLING	(i)	474,464.	25,000.	58,805.	0.	21,022.	579,291.	0.
HEAD COACH, BASKETBALL	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) PAUL CARON	(i)	254,699.	68,000.	30,410.	88,000.	133,378.	574,487.	0.
DEAN, CARUSO SCHOOL OF LAW	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SARA YOUNG JACKSON	(i)	360,031.	74,000.	64,174.	30,213.	31,647.	560,065.	0.
CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KIRON SKINNER	(i)	298,000.	0.	180,467.	29,101.	19,795.	527,363.	0.
PROFESSOR, SCHOOL OF PUBLIC POLICY	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFFREY ROHDE	(i)	375,718.	71,000.	810.	34,500.	42,385.	524,413.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MICHAEL FELTNER	(i)	330,561.	65,000.	9,688.	34,592.	49,437.	489,278.	0.
DEAN OF COLLEGE OF HEALTH SCIENCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) SARA COSENTINO	(i)	332,360.	65,000.	1,850.	32,538.	49,241.	480,989.	0.
VP FOR ADV & CHIEF DEV OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) LORENZO ROMAR	(i)	196,707.	0.	264,895.	7,922.	9,762.	479,286.	0.
HEAD COACH, BASKETBALL	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) DEBORAH CROWN	(i)	350,773.	54,000.	5,306.	22,167.	33,585.	465,831.	0.
DEAN OF PGBS	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) GREG RAMIREZ	(i)	357,347.	69,000.	930.	34,500.	2,461.	464,238.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) NICOLLE TAYLOR	(i)	340,492.	68,000.	1,141.	34,481.	16,980.	461,094.	0.
SENIOR VP, COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) DAMON SEAN BURNETT	(i)	225,651.	58,000.	19,144.	43,555.	113,661.	460,011.	0.
SVP, INTEGRATED MARKETING & CMO	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) DANIEL DEWALT	(i)	323,877.	61,000.	4,871.	33,471.	34,950.	458,169.	0.
VP & CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.

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 on 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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(17) LARRY PERRIN	(i)	339,208.	56,000.	5,061.	34,500.	19,506.	454,275.	0.
SVP STRATEGIC IMPLEMENTATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) LEE KATS	(i)	305,921.	55,000.	48,196.	30,794.	12,465.	452,376.	0.
DEAN, SEAVER FROM 3/25	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) FARZIN MADJIDI	(i)	159,309.	48,000.	51,460.	77,340.	87,879.	423,988.	0.
DEAN, GSEP	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) TIMOTHY SPIVEY	(i)	108,874.	30,000.	28,579.	27,940.	216,885.	412,278.	0.
VP SPIRITUAL LIFE	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) EDWARD LARSON	(i)	297,010.	5,000.	56,405.	30,141.	23,193.	411,749.	0.
DARLING CHAIR IN LAW & PROF	(ii)	0.	0.	0.	0.	0.	0.	0.
(22) DAVID SMITH	(i)	306,421.	0.	40,154.	30,985.	5,256.	382,816.	0.
SENIOR ASSOCIATE PROVOST & PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(23) CONNIE HORTON	(i)	153,325.	31,000.	20,531.	65,379.	96,539.	366,774.	0.
VP STUDENT AFFAIRS, VC RISE	(ii)	0.	0.	0.	0.	0.	0.	0.
(24) SHARON BEARD	(i)	166,320.	0.	843.	15,227.	148,997.	331,387.	0.
INTERIM VP STUDENT AFFAIRS FROM 7/25	(ii)	0.	0.	0.	0.	0.	0.	0.
(25) JERI-ELAYNE GOOSBY SMITH	(i)	239,019.	39,000.	14,636.	14,001.	23,839.	330,495.	0.
VP COMM BELONGING & CDO	(ii)	0.	0.	0.	0.	0.	0.	0.
(26) MICHAEL NICKS	(i)	247,715.	0.	2,436.	26,402.	49,187.	325,740.	0.
DIRECTOR OF INVESTMENTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(27) JONATHAN SEE	(i)	246,801.	0.	2,420.	26,210.	48,480.	323,911.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(28) LILA MCDOWELL CARLSEN	(i)	225,249.	25,000.	526.	27,544.	32,643.	310,962.	0.
VICE PROVOST FROM 3/25 & PROFESSOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(29) MICHAEL THOMAS	(i)	249,857.	0.	692.	25,582.	32,412.	308,543.	0.
VP, INTEGRATED MARKETING	(ii)	0.	0.	0.	0.	0.	0.	0.
(30) BEN VEENENDAAL	(i)	231,334.	7,000.	814.	18,885.	44,390.	302,423.	0.
VP PLANNING, OPS & CONSTRUCTION	(ii)	0.	0.	0.	0.	0.	0.	0.
(31) FAYE HOLTON	(i)	244,969.	0.	3,556.	25,239.	19,466.	293,230.	0.
DIRECTOR OF INVESTMENTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(32) GARY HANSON	(i)	225,043.	0.	12,315.	22,770.	16,673.	276,801.	0.
SENIOR EVP THRU 7/24	(ii)	0.	0.	0.	0.	0.	0.	0.

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 on 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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(33) KATELYN CROWE	(i)	223,860.	3,000.	418.	22,135.	1,829.	251,242.	0.
CONTROLLER THRU 6/25	(ii)	0.	0.	0.	0.	0.	0.	0.
(34) RICK GIBSON	(i)	89,215.	0.	30,090.	33,073.	45,252.	197,630.	0.
SV CHANCELLOR THRU 7/24	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							

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.

PART I, LINE 1A:

FIRST CLASS TRAVEL:

PURSUANT TO A WRITTEN POLICY AND APPROPRIATE APPROVAL, FIRST CLASS TRAVEL IS PERMITTED FOR CERTAIN OFFICERS AND EMPLOYEES FOR BUSINESS PURPOSES. TRAVEL FOR BUSINESS PURPOSES IS NOT INCLUDED IN TAXABLE WAGES. SEVEN OFFICERS AND TWO KEY EMPLOYEES LISTED ON FORM 990, PART VII FLEW FIRST CLASS FOR BUSINESS PURPOSES DURING CALENDAR YEAR 2024.

TRAVEL FOR COMPANIONS:

PURSUANT TO A WRITTEN POLICY AND APPROPRIATE APPROVAL, CERTAIN OFFICERS' AND EMPLOYEES' SPOUSES ARE PERMITTED TO TRAVEL ON OCCASION, WHEN NECESSARY FOR BUSINESS PURPOSES. TRAVEL FOR BUSINESS PURPOSES IS NOT INCLUDED IN TAXABLE WAGES. FIVE OFFICERS AND TWO KEY EMPLOYEES LISTED ON FORM 990, PART VII WERE PROVIDED WITH COMPANION TRAVEL FOR BUSINESS PURPOSES DURING CALENDAR YEAR 2024.

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS:

THE UNIVERSITY PROVIDES TAX INDEMNIFICATION AND GROSS-UP PAYMENTS TO EMPLOYEES THAT PROVIDE LATE SUBSTANTIATION OF EXPENSES UNDER ACCOUNTABLE PLAN RULES FOR ORDINARY AND NECESSARY BUSINESS EXPENSES. IN SOME CASES, TAX INDEMNIFICATION OR GROSS-UP PAYMENTS ARE ALSO PROVIDED FOR THE REIMBURSEMENT OF CERTAIN TAXABLE MOVING EXPENSES. ADDITIONALLY, AS PART OF THE MINISTERIAL HOUSING PROGRAM, THE UNIVERSITY ALSO PROVIDES ADDITIONAL COMPENSATION TO PARTICIPANTS FOR WAGE WITHHOLDING, IN AN AMOUNT EQUAL TO THE EMPLOYER'S SHARE OF THE PARTICIPANTS' SELF-EMPLOYMENT TAX. SIX OFFICERS, ONE FORMER OFFICER, ONE KEY EMPLOYEE, ONE FORMER KEY EMPLOYEE AND TWO HIGHEST PAID INDIVIDUALS LISTED ON FORM 990, PART VII WERE PROVIDED WITH TAX INDEMNIFICATION OR GROSS-UP PAYMENTS DURING CALENDAR YEAR 2024.

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE:

SUBJECT TO EXECUTIVE APPROVAL, THE UNIVERSITY PROVIDES A MINISTERIAL HOUSING ALLOWANCE TO EMPLOYEES WHO ARE MINISTERS. THE ALLOWANCE IS INCLUDED IN THE NONTAXABLE BENEFITS OF SUCH EMPLOYEES. FOUR OFFICERS, ONE KEY EMPLOYEE, ONE FORMER OFFICER, AND ONE FORMER KEY EMPLOYEE LISTED ON FORM 990, PART VII WERE PROVIDED A MINISTERIAL HOUSING ALLOWANCE DURING CALENDAR YEAR 2024. ADDITIONALLY, ON-CAMPUS HOUSING PROVIDED AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE EMPLOYER IS NOT INCLUDED IN TAXABLE WAGES. TWO OFFICERS LISTED ON FORM 990, PART VII WERE PROVIDED ON-CAMPUS HOUSING AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF

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.

THE EMPLOYER DURING CALENDAR YEAR 2024.

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES:
EXPENDITURES FOR BUSINESS PURPOSES ARE APPROVED PURSUANT TO THE UNIVERSITY'S REIMBURSEMENT POLICIES. SUCH REIMBURSEMENTS ARE NOT INCLUDED IN TAXABLE WAGES. FIVE OFFICERS, THREE KEY EMPLOYEES, TWO HIGHEST PAID EMPLOYEES, AND TWO FORMER KEY EMPLOYEES LISTED ON FORM 990, PART VII RECEIVED REIMBURSEMENTS FOR EXPENDITURES ASSOCIATED WITH HEALTH OR SOCIAL CLUB MEMBERSHIPS USED FOR BUSINESS PURPOSES DURING CALENDAR YEAR 2024.

PERSONAL SERVICES:
EXPENDITURES FOR BUSINESS PURPOSES ARE APPROVED PURSUANT TO THE UNIVERSITY'S REIMBURSEMENT POLICIES. SUCH REIMBURSEMENTS ARE NOT INCLUDED IN TAXABLE WAGES. FIVE OFFICERS, ONE HIGHEST PAID EMPLOYEE, ONE KEY EMPLOYEE, AND ONE FORMER KEY EMPLOYEE WERE PROVIDED CAR SERVICES FOR BUSINESS RELATED TRANSPORTATION DURING CALENDAR YEAR 2024. ONE OFFICER WAS PROVIDED LAUNDRY SERVICES IN CONNECTION WITH BUSINESS RELATED TRAVEL AND ONE OFFICER WAS PROVIDED CLEANING SERVICES IN CONNECTION WITH UNIVERSITY EVENTS DURING CALENDAR YEAR 2024.

PART I, LINE 7:
NONFIXED PAYMENTS:
THE BOARD OF REGENTS, IN ITS DISCRETION, PROVIDES OBJECTIVES AND KEY RESULTS, AND POTENTIAL MAXIMUM BONUS AMOUNTS FOR THE PRESIDENT EACH YEAR. SIMILARLY, THE PRESIDENT, IN HIS DISCRETION, PROVIDES OBJECTIVES AND KEY RESULTS, AND POTENTIAL BONUSES FOR SELECT SENIOR ADMINISTRATORS EACH YEAR. THE BOARD OF REGENTS DEFINES THE MAXIMUM CUMULATIVE BONUS AMOUNT AVAILABLE FOR BONUS PLAN PARTICIPANTS EACH YEAR. OBJECTIVES AND KEY RESULTS FOR BOTH THE PRESIDENT AND SELECT SENIOR ADMINISTRATORS MAY SPAN ACROSS MULTIPLE YEARS. THE BOARD OF REGENTS ANNUALLY ASSESSES THE PRESIDENT'S PROGRESS TOWARD ACHIEVING OBJECTIVES AND KEY RESULTS, BOTH INDIVIDUALLY AND COLLECTIVELY, AND BASED UPON ITS SOLE ASSESSMENT, MAY AWARD A BONUS UP TO THE MAXIMUM POTENTIAL AMOUNT ESTABLISHED FOR A PARTICULAR OBJECTIVE AND KEY RESULT. SIMILARLY, THE PRESIDENT ANNUALLY ASSESSES SELECT SENIOR ADMINISTRATORS' PROGRESS TOWARD ACHIEVING OBJECTIVES AND KEY RESULTS, BOTH INDIVIDUALLY AND COLLECTIVELY, AND MAY AWARD A BONUS UP TO THE MAXIMUM AMOUNT ESTABLISHED FOR A PARTICULAR OBJECTIVE AND KEY RESULT. ADDITIONALLY, THE AUDIT AND GOVERNANCE COMMITTEE ON ITS OWN INITIATIVE, OR AT THE REQUEST OF THE PRESIDENT, MAY AT ITS SOLE DISCRETION, CONDUCT AN INTERIM ASSESSMENT

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.

OF ANY PARTICULAR OBJECTIVE AND KEY RESULT. BASED ON ITS ASSESSMENT, THE AUDIT AND GOVERNANCE COMMITTEE MAY RECOMMEND TO THE BOARD OF REGENTS ANY ACTION THAT MAY BE APPROPRIATE, INCLUDING FOR EXAMPLE, THAT A BONUS BE IMMEDIATELY AWARDED. LIKEWISE, THE PRESIDENT, MAY AT HIS SOLE DISCRETION, CONDUCT AN INTERIM ASSESSMENT OF ANY PARTICULAR OBJECTIVE AND KEY RESULT AND TAKE ANY ACTION THAT MAY BE APPROPRIATE, INCLUDING FOR EXAMPLE, THAT A BONUS BE IMMEDIATELY AWARDED TO SELECT SENIOR ADMINISTRATORS. THE AUDIT AND GOVERNANCE COMMITTEE IS ANNUALLY APPRISED OF THE PRESIDENT'S RATIONALE AND AWARDS OF BONUSES TO SELECT SENIOR ADMINISTRATORS.

SCHEDULE K (Form 990) (Rev. December 2024)
Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY
Employer identification number 95-1644037

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pooled financing Yes	(i) Pooled financing No
A	CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY	52-1705592	130179AX2	09/03/15	87,786,387.	REFUND 2005A & 2005B BONDS	X			X		X
B	CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY	52-1705592	130179FV1	03/17/16	117,753,105.	REFUND 2010 BONDS, CONSTRUCTION & FACILITIES	X			X		X
C	CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY	52-1705592	130179LU6	12/21/17	24,514,680.	REFUND 2012 BONDS		X		X		X
D												

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	12,825,000.	7,035,000.	5,120,000.	
2	Amount of bonds legally defeased	59,975,000.	88,690,000.		
3	Total proceeds of issue	87,786,387.	117,753,105.	24,514,680.	
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows				
7	Issuance costs from proceeds	717,742.	868,673.	298,224.	
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds		99,395,549.		
11	Other spent proceeds	87,068,645.	17,488,883.	24,728,000.	
12	Other unspent proceeds				
13	Year of substantial completion	2015	2016	2017	

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X			X		X		
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X	X		X			
16	Has the final allocation of proceeds been made?	X		X		X			
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III Private Business Use

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	.02 %		.17 %		.74 %		%	
6 Total of lines 4 and 5	.02 %		.17 %		.74 %		%	
7 Does the bond issue meet the private security or payment test?		X		X		X		
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X			

Part IV Arbitrage

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		
b Exception to rebate?	X			X	X			
c No rebate due?		X	X			X		
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		

Part IV Arbitrage *(continued)*

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X	X			X		
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D 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 isn't available under applicable regulations?	X		X		X			

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

SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:

(A) ISSUER NAME: CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY

DATE THE REBATE COMPUTATION WAS PERFORMED: 03/17/2025

SCHEDULE K, PART I:

LINE A, COLUMN (F) - DESCRIPTION OF PURPOSE:

REFUND 2005A AND 2005B BONDS ORIGINALLY ISSUED ON 08/03/2005 AND 09/06/2005, RESPECTIVELY.

LINE B, COLUMN (F) - DESCRIPTION OF PURPOSE:

REFUND 2010 BONDS ORIGINALLY ISSUED ON 04/28/10, CONSTRUCTION AND FACILITIES.

LINE C, COLUMN (F) - DESCRIPTION OF PURPOSE:

REFUND 2012 BONDS ORIGINALLY ISSUED ON 06/05/2012.

SCHEDULE K, PART IV, LINE 2C, COLUMN (B)

DATE REBATE COMPUTATION WAS PERFORMED: 03/17/2025

SCHEDULE L **(Form 990)** (Rev. December 2024) Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number 95-1644037

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

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

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

Part II Loans to and/or From Interested Persons

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1) MICHAEL NICKS	KEY EMPL	RELOCATI		X	320,000.	353,556.		X		X	X	
(2) JEFFREY ROHDE	KEY EMPL	RELOCATI		X	350,000.	375,123.		X		X	X	
(3) LARRY PERRIN	OFFICER	RELOCATI		X	100,000.	105,970.		X		X	X	
(4) DANIEL DEWALT	OFFICER	RELOCATI		X	100,000.	104,249.		X		X	X	
(5) SARA COSENTIN	OFFICER	RELOCATI		X	100,000.	104,247.		X		X	X	
(6) MICHAEL THOMA	OFFICER	RELOCATI		X	100,000.	103,011.		X		X	X	
(7) DEBORAH CROWN	KEY EMPL	RELOCATI		X	150,000.	153,941.		X		X	X	
(8) JERI-ELAYNE G	OFFICER	RELOCATI		X	150,000.	150,062.		X		X	X	
(9) LEE KATS	KEY EMPL	RELOCATI		X	125,000.	125,003.		X		X	X	
(10) LILA MCDOWELL	KEY EMPL	RELOCATI		X	100,000.	114,039.		X		X	X	
Total .... $						1,689,201.						

Part III Grants or Assistance Benefiting Interested Persons

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule L (Form 990) (Rev. 12-2024)**

SEE PART V FOR CONTINUATIONS

Part IV Business Transactions Involving Interested Persons

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

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1)	RONALD PHILLIPS	FATHER OF OFFICER	288,855.	EMPLOYMENT		X
(2)	SHANNON PHILLIPS	SISTER-IN-LAW OF OF	235,927.	EMPLOYMENT		X
(3)	PHILIP CHO	SON-IN-LAW OF OFFIC	133,144.	EMPLOYMENT		X
(4)	AGNES GIBSON	SPOUSE OF FORMER OF	127,506.	EMPLOYMENT		X
(5)	LUCY PERRIN	SPOUSE OF OFFICER	72,847.	EMPLOYMENT		X
(6)	MARK COSENTINO	SPOUSE OF OFFICER	134,494.	EMPLOYMENT		X
(7)	GEORGE CARLSEN	SPOUSE OF KEY EMPLO	194,831.	EMPLOYMENT		X
(8)	KAMERON VEENENDAAL	SPOUSE OF OFFICER	63,503.	EMPLOYMENT		X
(9)						
(10)						

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L. See instructions.

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: MICHAEL NICKS
(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 320,000. (F) BALANCE DUE $ 353,556.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: JEFFREY ROHDE
(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 350,000. (F) BALANCE DUE $ 375,123.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: LARRY PERRIN
(B) RELATIONSHIP WITH ORGANIZATION: OFFICER
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 100,000. (F) BALANCE DUE $ 105,970.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: DANIEL DEWALT
(B) RELATIONSHIP WITH ORGANIZATION: OFFICER
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 100,000. (F) BALANCE DUE $ 104,249.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: SARA COSENTINO
(B) RELATIONSHIP WITH ORGANIZATION: OFFICER
(C) PURPOSE OF LOAN: RELOCATION

Part V Supplemental Information

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

(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 100,000. (F) BALANCE DUE $ 104,247.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: MICHAEL THOMAS
(B) RELATIONSHIP WITH ORGANIZATION: OFFICER
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 100,000. (F) BALANCE DUE $ 103,011.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: DEBORAH CROWN
(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 150,000. (F) BALANCE DUE $ 153,941.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: JERI-ELAYNE GOOSBY SMIT
(B) RELATIONSHIP WITH ORGANIZATION: OFFICER
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 150,000. (F) BALANCE DUE $ 150,062.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: LEE KATS
(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 125,000. (F) BALANCE DUE $ 125,003.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

(A) NAME OF PERSON: LILA MCDOWELL CARLSEN
(B) RELATIONSHIP WITH ORGANIZATION: KEY EMPLOYEE
(C) PURPOSE OF LOAN: RELOCATION
(D) LOAN TO OR FROM ORGANIZATION? = FROM
(E) ORIGINAL PRINCIPAL AMOUNT $ 100,000. (F) BALANCE DUE $ 114,039.
(G) LOAN IN DEFAULT? = NO
(H) APPROVED BY BOARD OR COMMITTEE? = NO
(I) WRITTEN AGREEMENT? = YES

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: RONALD PHILLIPS
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
FATHER OF OFFICER
(C) AMOUNT OF TRANSACTION $ 288,855.

Part V Supplemental Information

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

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: SHANNON PHILLIPS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SISTER-IN-LAW OF OFFICER

(C) AMOUNT OF TRANSACTION $ 235,927.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: PHILIP CHO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SON-IN-LAW OF OFFICER

(C) AMOUNT OF TRANSACTION $ 133,144.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: AGNES GIBSON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF FORMER OFFICER

(C) AMOUNT OF TRANSACTION $ 127,506.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: LUCY PERRIN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF OFFICER

(C) AMOUNT OF TRANSACTION $ 72,847.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: MARK COSENTINO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF OFFICER

(C) AMOUNT OF TRANSACTION $ 134,494.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: GEORGE CARLSEN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF KEY EMPLOYEE

(C) AMOUNT OF TRANSACTION $ 194,831.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: KAMERON VEENENDAAL

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF OFFICER

(C) AMOUNT OF TRANSACTION $ 63,503.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT - COMPENSATION & BENEFITS

(E) SHARING OF ORGANIZATION REVENUES? = NO

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X		1.	RETAIL COST
5	Clothing and household goods	X		59.	RETAIL COST
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	42	5,906,280.	AVG PRICE/DONATE DAY
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential	X	1	279,655.	FAIR MARKET VALUE
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles	X	1	1.	RETAIL COST
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (OTHER)	X	57	59,876.	RETAIL COST
26	Other ( )				
27	Other ( )				
28	Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 1

			Yes	No
30a	During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

SCHEDULE M, PART I, COL (B):

NUMBER OF CONTRIBUTIONS OR ITEMS CONTRIBUTED:

THE UNIVERSITY REPORTS THE NUMBER OF CONTRIBUTIONS RECEIVED, NOT THE INDIVIDUAL NUMBER OF ITEMS INCLUDED IN THOSE CONTRIBUTIONS.

SCHEDULE O (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
PEPPERDINE UNIVERSITY	95-1644037

FORM 990, PART I, LINE 1:
ORGANIZATION'S SIGNIFICANT ACTIVITIES:
COMMITTED TO THE HIGHEST STANDARDS OF ACADEMIC EXCELLENCE AND CHRISTIAN VALUES, WHERE STUDENTS ARE STRENGTHENED FOR LIVES OF PURPOSE, SERVICE, AND LEADERSHIP. THE UNIVERSITY ENROLLS APPROXIMATELY 9,000 STUDENTS IN ITS SIX COLLEGES AND SCHOOLS. SEAVER COLLEGE, THE UNIVERSITY'S UNDERGRADUATE LIBERAL ARTS COLLEGE, THE CARUSO SCHOOL OF LAW, AND THE SCHOOL OF PUBLIC POLICY ARE HEADQUARTERED ON 830 ACRES IN THE SANTA MONICA MOUNTAINS OVERLOOKING THE PACIFIC OCEAN IN MALIBU, CALIFORNIA. THE PEPPERDINE COLLEGE OF HEALTH SCIENCE IS HEADQUARTERED AT THE UNIVERSITY'S CALABASAS, CALIFORNIA CAMPUS. THE GRADUATE SCHOOL OF EDUCATION AND PSYCHOLOGY AND THE PEPPERDINE GRAZIADIO BUSINESS SCHOOL ARE HEADQUARTERED AT THE UNIVERSITY'S WEST LOS ANGELES, CALIFORNIA GRADUATE CAMPUS.

FORM 990, PART I, LINE 6:
NUMBER OF VOLUNTEERS:
THERE ARE A NUMBER OF STUDENTS AND ALUMNI THAT VOLUNTEER THEIR TIME FOR VARIOUS PURPOSES AT THE UNIVERSITY. THESE VOLUNTEERS, HOWEVER, ARE NOT FORMALLY TRACKED BY THE UNIVERSITY. ACCORDINGLY, THE NUMBER OF VOLUNTEERS REPRESENTS THE NUMBER OF VOLUNTEER REGENTS ON THE BOARD OF REGENTS AS OF THE END OF THE TAX YEAR.

FORM 990, PART III, LINE 1:
ORGANIZATION'S MISSION:
THE UNIVERSITY ENROLLS APPROXIMATELY 9,000 STUDENTS IN ITS SIX COLLEGES AND SCHOOLS. SEAVER COLLEGE, THE UNIVERSITY'S UNDERGRADUATE LIBERAL ARTS COLLEGE, THE CARUSO SCHOOL OF LAW, AND THE SCHOOL OF PUBLIC POLICY ARE HEADQUARTERED ON 830 ACRES IN THE SANTA MONICA MOUNTAINS OVERLOOKING THE PACIFIC OCEAN IN MALIBU, CALIFORNIA. THE PEPPERDINE COLLEGE OF HEALTH SCIENCE IS HEADQUARTERED AT THE UNIVERSITY'S CALABASAS, CALIFORNIA CAMPUS. THE GRADUATE SCHOOL OF EDUCATION AND PSYCHOLOGY AND THE PEPPERDINE GRAZIADIO BUSINESS SCHOOL ARE HEADQUARTERED AT THE UNIVERSITY'S WEST LOS ANGELES, CALIFORNIA GRADUATE CAMPUS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
PUBLIC SERVICE - THE UNIVERSITY OFFERS NUMEROUS SERVICES TO THE GENERAL PUBLIC, INCLUDING ART EXHIBITS, CONCERTS, PRODUCTIONS, AND OTHER PUBLIC BENEFIT ACTIVITIES.
EXPENSES $ 27,982,802.   INCLUDING GRANTS OF $ 14,025. REVENUE $ 291,396.

FORM 990, PART V, LINE 2A:
NUMBER OF EMPLOYEES:
THE NUMBER OF EMPLOYEES INCLUDES STUDENT WORKERS.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:
ARGENTINA, GERMANY, ITALY, SWITZERLAND,

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

UNITED KINGDOM, RWANDA, GHANA

FORM 990, PART VI, SECTION A, LINE 1A:
GOVERNING BODY VOTING MEMBERS:
THE BOARD OF REGENTS OF PEPPERDINE UNIVERSITY HAS AN EXECUTIVE COMMITTEE, WHICH MAY ACT FOR AND IN PLACE OF THE BOARD OF REGENTS BETWEEN REGULAR BOARD MEETINGS. ONLY REGENTS CAN BE MEMBERS OF THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE HAS THE POWER TO TRANSACT BUSINESS ON BEHALF OF THE BOARD OF REGENTS, SUBJECT TO ANY LIMITATIONS IMPOSED BY THE BOARD OF REGENTS, THE BYLAWS, OR APPLICABLE LAW.

FORM 990, PART VI, SECTION A, LINE 2:
FAMILY RELATIONSHIP
SHARON BEARD AND ALAN BEARD HAVE A FAMILY RELATIONSHIP. ALAN BEARD RESIGNED AS A TRUSTEE ON 5/22/2025. SHARON BEARD BECAME INTERIM VP FOR STUDENT AFFAIRS ON 7/01/2025.

FORM 990, PART VI, SECTION B, LINE 11B:
PROCESS TO REVIEW FORM 990:
INFORMATION IS SUPPLIED BY THE UNIVERSITY TO THE PAID PREPARER TO PREPARE THE RETURN. A DRAFT VERSION OF THE FORM 990 IS PROVIDED TO SENIOR MANAGEMENT AND THE AUDIT COMMITTEE OF THE BOARD OF REGENTS FOR REVIEW. CHANGES AND COMMENTS ARE SUBMITTED TO MANAGEMENT, AND ANY NECESSARY CHANGES ARE MADE PRIOR TO THE FINAL REVIEW AND SIGNING OF THE TAX RETURN. A FULL COPY OF THE FORM 990 IS MADE AVAILABLE TO THE BOARD OF REGENTS PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:
CONFLICT OF INTEREST POLICY ENFORCEMENT:
EACH REGENT, OFFICER, AND KEY EMPLOYEE IS REQUIRED TO ANNUALLY DISCLOSE, IN WRITING, ANY FINANCIAL OR BUSINESS RELATIONSHIPS THAT HE OR SHE, OR ANY FAMILY MEMBER, HAS WITH PEPPERDINE UNIVERSITY. THE REGENT DISCLOSURES ARE REVIEWED BY THE GOVERNANCE COMMITTEE AND THE BOARD CHAIR. ALL DISCLOSURES BY SENIOR ADMINISTRATION ARE REVIEWED BY THE AUDIT COMMITTEE. SENIOR ADMINISTRATION INCLUDES THE PRESIDENT, THE CHANCELLOR, THE VICE CHANCELLORS, ALL PROVOSTS, ALL VICE PRESIDENTS, THE GENERAL COUNSEL, THE CHIEF FINANCIAL OFFICER, AND THE CONTROLLER. ALL OTHER EMPLOYEE DISCLOSURES ARE REVIEWED BY GENERAL COUNSEL, THE SENIOR EXECUTIVE VICE PRESIDENT, AND THE PRESIDENT. ALL CONFLICT SITUATIONS ARE RESOLVED DURING THE REVIEW PROCESS IN ACCORDANCE WITH THE UNIVERSITY'S CONFLICT OF INTEREST POLICY. IF AN ACTUAL CONFLICT IS FOUND FOR A REGENT, THE REGENT IS ASKED TO RECUSE HIM OR HERSELF FROM THE MATTER. RESOLUTION OF CONFLICTS FOR SENIOR ADMINISTRATORS AND OTHER EMPLOYEES ARE OVERSEEN BY GENERAL COUNSEL.

FORM 990, PART VI, SECTION B, LINE 15:
PRESIDENT & CEO COMPENSATION:
THE AUDIT AND GOVERNANCE COMMITTEE OF PEPPERDINE UNIVERSITY'S BOARD OF REGENTS REVIEWS THE TOTAL COMPENSATION FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER ON AN ANNUAL BASIS. THE INDIVIDUALS ON THE AUDIT AND GOVERNANCE COMMITTEE THAT CONDUCT THIS REVIEW ARE INDEPENDENT WITH RESPECT TO COMPENSATION DETERMINATIONS. THIS REVIEW INCLUDES CONSIDERATION OF A BENCHMARKING REPORT PROVIDED ANNUALLY BY THE UNIVERSITY'S GENERAL COUNSEL AND HUMAN RESOURCES DEPARTMENT. IN ADDITION TO THE ANNUAL BENCHMARKING REPORT, THE UNIVERSITY REGULARLY REVIEWS BENCHMARKING PRACTICES BY UNDERGOING AN EVALUATION WITH A THIRD PARTY. THE UNIVERSITY'S MOST RECENT EXECUTIVE COMPENSATION ANALYSIS CONDUCTED BY AN EXTERNAL CONSULTANT WAS

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number: 95-1644037

COMPLETED ON SEPTEMBER 8, 2025 TO ASSESS FY25 COMPENSATION AND GUIDE FY26 COMPENSATION TARGETS. THE ANALYSIS INCLUDED A PEER GROUP EVALUATION FOR TOTAL COMPENSATION, AS WELL AS A REVIEW OF ANNUAL MERIT INCREASES. ANY DELIBERATIONS FROM THE AUDIT AND GOVERNANCE COMMITTEE ARE REFLECTED IN A TRANSACTION REPORT THAT SUMMARIZES DECISIONS AND RECOMMENDATIONS.

OTHER OFFICER & KEY EMPLOYEE COMPENSATION:
THE AUDIT AND GOVERNANCE COMMITTEE OF PEPPERDINE UNIVERSITY'S BOARD OF REGENTS REVIEWS THE TOTAL COMPENSATION FOR SELECT SENIOR ADMINISTRATORS, ON AN ANNUAL BASIS. THE INDIVIDUALS ON THE AUDIT AND GOVERNANCE COMMITTEE THAT CONDUCT THIS REVIEW ARE INDEPENDENT WITH RESPECT TO COMPENSATION DETERMINATIONS. THIS REVIEW INCLUDES CONSIDERATION OF A BENCHMARKING REPORT PROVIDED ANNUALLY BY THE UNIVERSITY'S GENERAL COUNSEL AND HUMAN RESOURCES DEPARTMENT. IN ADDITION TO THE ANNUAL BENCHMARKING REPORT, THE UNIVERSITY REGULARLY REVIEWS BENCHMARKING PRACTICES BY UNDERGOING AN EVALUATION WITH A THIRD PARTY. THE UNIVERSITY'S MOST RECENT EXECUTIVE COMPENSATION ANALYSIS CONDUCTED BY AN EXTERNAL CONSULTANT WAS COMPLETED ON SEPTEMBER 8, 2025 TO ASSESS FY25 COMPENSATION AND GUIDE FY26 COMPENSATION TARGETS. THE ANALYSIS INCLUDED A PEER GROUP EVALUATION FOR TOTAL COMPENSATION, AS WELL AS A REVIEW OF ANNUAL MERIT INCREASES. ANY DELIBERATIONS FROM THE GOVERNANCE COMMITTEE ARE REFLECTED IN A TRANSACTION REPORT THAT SUMMARIZES DECISIONS AND RECOMMENDATIONS.

FORM 990, PART VI, SECTION C, LINE 19:
DOCUMENTS AVAILABLE FOR PUBLIC INSPECTION:
PEPPERDINE UNIVERSITY'S FINANCIAL STATEMENTS ARE MADE AVAILABLE VIA THE UNIVERSITY'S WEBSITE. THE UNIVERSITY DOES NOT MAKE ITS CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ACTUARIAL ADJUSTMENT OF TRUST OBLIGATIONS	-1,892,492.
LOSS ON VALUATION OF BENEFICIAL INTEREST	-1,641,851.
ANNUITY FUNDS TRANSFERRED FROM RELATED ORGANIZATION	12,515,802.
TOTAL TO FORM 990, PART XI, LINE 9	8,981,459.

SCHEDULE R (Form 990) (Rev. January 2025) Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: PEPPERDINE UNIVERSITY

Employer identification number 95-1644037

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WAVE JUSTICE, LLC - 39-2809083 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	SUPPORT PEPPERDINE UNIVERSITY	CALIFORNIA	0.	0.	PEPPERDINE UNIVERSITY
WAVE VENTURES, LLC - 46-4526544 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	SUPPORT PEPPERDINE UNIVERSITY	CALIFORNIA	0.	742,595.	PEPPERDINE UNIVERSITY
PEPPERDINE UNIVERSITY UGANDA LIMITED 6 SSERUNKUMA ROAD KAMPALA, UGANDA	EDUCATION	UGANDA	25,168.	7,730.	PEPPERDINE UNIVERSITY
PEPPERDINE UNIVERSITY, A MALIBU, SUCCURSALE DE BLONAY-SAINT LEGIER, CHEMIN DES BOULINGRINS 10, SAINT-LEGIER, SWITZERLAND	EDUCATION	SWITZERLAND	8,222,056.	1,305,039.	PEPPERDINE UNIVERSITY

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
WAVE ENTERPRISES, INC. - 95-4274572 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	SUPPORT PEPPERDINE UNIVERSITY	CALIFORNIA	501(C)(3)	LINE 12A, I	PEPPERDINE UNIVERSITY	X	
WAVE SERVICES, INC. - 95-4315778 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	SUPPORT PEPPERDINE UNIVERSITY	CALIFORNIA	501(C)(3)	LINE 12A, I	PEPPERDINE UNIVERSITY	X	
PEPPERDINE UNIVERSITY (USA) IN LONDON 56 PRINCE'S GATE LONDON, UNITED KINGDOM SW72PG	EDUCATION	UNITED KINGDOM			PEPPERDINE UNIVERSITY	X	
PEPPERDINE UNIVERSITY RWANDA CBC - 98-1769828, REMERA, GASABO, UMUJYI WA KIGALI, RWANDA	SOCIAL JUSTICE	RWANDA			PEPPERDINE UNIVERSITY	X	

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

SEE PART VII FOR CONTINUATIONS

Part II **Continuation of Identification of Related Tax-Exempt Organizations**

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization? Yes	No
PEPPERDINE GHANA LGB - 98-1792404 GA118-3363, NUMBER 23, NORTEI ABABIO STREET ACCRA, GHANA	SOCIAL JUSTICE	GHANA			PEPPERDINE UNIVERSITY	X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
ANDURIL HOLDINGS, LLC - 01-0935824, 310 ALDER ROAD, P.O. BOX 841, DOVER, DE 19904	INVESTMENTS	DE	PEPPERDINE UNIVERSITY	EXCLUDED	228,822.	1,278,204.		X	N/A		X	99.00%
MELODEON LBS DE I HOLDCO, LP - 84-1955404, 143 WEST STREET, SUITE 202, NEW MILFORD, CT 06776	INVESTMENTS	CT	PEPPERDINE UNIVERSITY	EXCLUDED	599,211.	14,098,404.		X	N/A		X	95.61%
P-901 NORTH FAIRFAX CO-INVESTOR, LLC - 83-4222000, 4700 WILSHIRE BLVD, LOS ANGELES, CA 90010	REAL ESTATE	CA	PEPPERDINE UNIVERSITY	UNRELATED	297,913.	1,818,868.		X	243,867.		X	100%

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
PEPPERDINE UNIVERSITY, S.R.L. 11 DE SEPTIEMBRE 955 BUENOS AIRES, ARGENTINA (1426) CAP	EDUCATION	ARGENTINA	PEPPERDINE	C CORP	0.	0.	100%	X	
FUNDACION PEPPERDINE UNIVERSITY PARA 11 DE SEPTIEMBRE 955 BUENOS AIRES, ARGENTINA (1426) CAP	EDUCATION	ARGENTINA	PEPPERDINE	C CORP	2,853,625.	121,171.	100%	X	
CINDERELLA IMMOBILIARE, S.R.L. VIALE MILTON 41 FLORENCE, ITALY 50129	EDUCATION	ITALY	PEPPERDINE	C CORP	4,671,271.	3,134,001.	99.00%	X	
REVOCABLE TRUST 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	PEPPERDINE	TRUST	13,408.	650,387.	100%	X	
CHARITABLE REMAINDER UNITRUST (1) 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	PEPPERDINE	TRUST				X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	No
CHARITABLE GIFT ANNUITIES (68) 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	PEPPERDINE	TRUST				X	
CHARITABLE REMAINDER UNITRUSTS (69) 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	WAVE SERVICES	TRUST				X	
CHARITABLE REMAINDER ANNUITY TRUST (1) 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	WAVE SERVICES	TRUST				X	
NIM CHARITABLE REMAINDER UNITRUST (4) 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	WAVE SERVICES	TRUST				X	
IRREVOCABLE TRUSTS 24255 PACIFIC COAST HIGHWAY MALIBU, CA 90263	INVESTING	CA	WAVE SERVICES	TRUST	0.	4,056,251.	100%	X	

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

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

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)	WAVE ENTERPRISES, INC.	S	502,794.	FMV
(2)	WAVE ENTERPRISES, INC.	Q	123,279.	FMV
(3)	WAVE ENTERPRISES, INC.	R	110,762.	CASH TRANSFER
(4)	WAVE SERVICES, INC.	Q	277,195.	FMV
(5)	WAVE SERVICES, INC.	S	12,515,802.	PRESENT VALUE
(6)	PEPPERDINE UNIVERSITY (USA) IN LONDON, UK	R	2,019,433.	CASH TRANSFER

Part V **Continuation of Transactions With Related Organizations** (Schedule R (Form 990), Part V, line 2)

	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7)	FUNDACION PEPPERDINE UNIVERSITY PARA AMERICA	R	1,819,594.	CASH TRANSFER
(8)	CINDERELLA IMMOBILIARE, S.R.L.	R	1,652,420.	CASH TRANSFER
(9)	PEPPERDINE UNIVERSITY RWANDA CBC	R	270,000.	CASH TRANSFER
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
(19)				
(20)				
(21)				
(22)				
(23)				
(24)				

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

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

(a) 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) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor-tionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME AND ADDRESS OF DISREGARDED ENTITY:

PEPPERDINE UNIVERSITY, A MALIBU, SUCCURSALE DE BLONAY-SAINT

LEGIER

CHEMIN DES BOULINGRINS 10

SAINT-LEGIER, SWITZERLAND 1806