Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c) of the internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public

A Fo	r the	200 <u>0 calendar year. OR tax year period beginning</u>	07/01	, 2000, and ending	06/30/2001					
B che	ck if applica				D Employer identification number					
	Change of address	use IRS								
	Change of name	SOUTHWEST MISSOURI STATE	UNIV FOUN	DATION	43-1234200					
	Initial reta	Number and street (or P.O. box if mail is not	delivered to street add	ress) Room/suite	E Telephone number					
	Final retu	type.	•							
		Specific 901 S NATIONAL			() -					
	Amead re	tura Instruc-			F Check if application pending					
		SPRINGFIELD, MO 65804								
		tion type (check only one) ▶ X 501(c) (3)	527 OR 4947 (a)(1) Note: (H and I are no	of applicable to section 527 orgs.)					
•	Section	on 501(c)(3) organizations and 4947(a)(1) nonexempt charitable	trusts must	H(a) Is this a group	return for affiliates? Yes X No					
at	tach a	completed Schedule A (Form 990 or 900-EZ).		H(b) If "Yes," enter	number of affiliates					
JA	ccount	ing method: Cash X Accrual Other (s	pecify) 📂	H(c) Are all affiliates (If "No," attach	a list: See inst.) Yes No					
к с	heck h	ere if the organization's gross receipts are normally	not more than	H(d) is this a separate organization cover	return filed by an ered by a group rading? Yes X No					
. \$	25,000	. The organization need not file a return with the IRS; but if the	ne organization	, ,	oup exemption no. (GEN)					
re	eceived	a Form 990 Package in the mail, it should file a return withou	ıt financial data.	L Check this box	cif the organization is not required					
		tates require a complete return.		to attach Sche	dule B (Form 990 or 990-EZ)					
Part		evenue, Expenses, and Changes in Net Assets or Fu	nd Balances (See S	Specific Instructions o	n page 16.)					
	1	Contributions, gifts, grants, and similar amounts received: S								
	a	Direct public support	1 1	6,452,348.						
	b	Indirect public support								
	С	Government contributions (grants)								
	i	Total (add lines to through 1c) (cash \$ 6,452,348.		}	1d 6,452,348.					
	2	Program service revenue including government fees and con	2 510,534.							
	3	Membership dues and assessments	3							
	4	Interest on savings and temporary cash investments	4							
	5	Dividends and interest from securities		5 211,993.						
	1 -	Gross rents		===7030.						
		Less: rental expenses								
	C	Net rental income or (loss) (subtract line 6b from line 6a)		6c 104,742.						
9	7	Other investment income (describe		\	7 -32,008.					
Revenue	2	Gross amount from sales of assets other (A) Securit	ties	(B) Other	,					
ě		than inventory	8a	294,250.						
	ь	Less: cost or other basis and sales expenses	8 b	335,000.						
	1 :	Gain or (loss) (attach schedule)	8c	-40,750.						
		Net gain or (loss) (combine line 8c, columns (A) and (B))			8d -40,750.					
	9	Special events and activities (attach schedule)								
	[Gross revenue (not including \$ of	:							
	-	contributions reported on line 1a)	1 1							
	ь	Less: direct expenses other than fundraising expenses								
	c	Net income or (loss) from special events (subtract line 9b from	line 9a)		9 c					
	10a	Gross sales of inventory, less returns and allowances								
	1	Less: cost of goods sold	1 1							
		Gross profit or (loss) from sales of inventory (attach schedule		m line 10a)	10c					
	11	Other revenue (from Part VII, line 103)			11 24,894.					
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, a								
	13	Program services (from line 44, column (B))			4,718,251.					
10	14	Management and general (from line 44, column (C))			14 197,759.					
Expenses	15	Fundraising (from line 44, column (D))			550,617.					
ď.	16	Payments to affiliates (attach schedule)			16					
m	17	Total expenses (add lines 16 and 44, column (A))	al expenses (add lines 16 and 44, column (A)).							
	18	Excess or (deficit) for the year (subtract line 17 from line 12)			5,466,627. 18 1,765,126.					
Net Assets	19	Net assets or fund balances at beginning of year (from line 73			19 40,326,435.					
A.	20	Other changes in net assets or fund balances (attach explana	tion)	STMT. 2	<u>-285,000.</u>					
Net Net	21	Net assets or fund balances at end of year (combine lines 18,	19, and 20) • • • •		41,806,561.					
		web Reduction Act Notice, see page 1 of the separat			Form 990 (2000)					

43-1234200 Form 990 (2000) All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations Part II Statement of and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 20.) Functional Expenses Do not include amounts reported on line (B) Program services (C) Management and general (D) Fundraising (A) Total 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) 983,106 983,106. _____ noncash \$__ 23 Specific assistance to individuals (attach schedule) 23 24 Benefits paid to or for members (attach schedule) Compensation of officers, directors, etc. 25 26 Other salaries and wages 26 Pension plan contributions 27 27 28 Other employee benefits 28 29 29 Professional fundraising fees 30 30 31 31 32 32 33 33 34 Telephone 34 35 Postage and shipping 35 36 36 Occupancy Equipment rental and maintenance . . 37 38 Printing and publications 38 39 39 Travel 40 Conferences, conventions, and meetings . 40 41 41 Interest 42 Depreciation, depletion, etc. (attach schedule). . 197.759. 550,617 3,735,145. 4,483,521 43a Other expenses (itemize): a STMT 3 43b 43c 43d 43e Total functional expenses (add lines 22 through 43).
Organizations completing columns (B)-(D), carry
these totals to lines 13-15. 197.759 550,617. 4,718,251 5,466,627. Reporting of Joint Costs. Did you report in column (B) (Program services) any joint costs from a combined Yes X No ; (ii) the amount allocated to Program services \$ If "Yes," enter (i) the aggregate amount of these joint costs \$; and (iv) the amount allocated to Fundraising \$ (iii) the amount allocated to Management and general \$ Part III Statement of Program Service Accomplishments (See Specific Instructions on page 23.) Program Service What is the organization's primary exempt purpose? Expenses (Required for 501 (c)(3) and All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (4) orgs., and 4947(a)(1) trusts; but optional for of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) others.) SEE STATEMENT 4 983,106. 4,718,251. (Grants and allocations \$ b (Grants and allocations \$ (Grants and allocations \$

> (Grants and allocations \$ (Grants and allocations \$

Other program services (attach schedule)

Total of Program Service Expenses (should equal line 44, column (B), Program services)......

Part IV Balance Sheets (See Specific Instructions on page 23.)

		Datatice officers (5.55 spreams in the state of 5.55			
N	ote:	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing		45	
	45	Casil - non-interest-bearing	7,053,295.	46	8,169,167.
	46	Savings and temporary cash investments	1,000,200.		
		or res			
- 1		Accounts receivable			04 545
- 1	b	Less: allowance for doubtful accounts 47b	29,147.	47C	<u>81,565.</u>
	48a	Pledges receivable			
	h	Less: allowance for doubtful accounts	2,535,952.	48c	3,326,585.
		Grants receivable	1	49	
	49	Receivables from officers, directors, trustees, and key employees			
	50	1		50	
- 1		(attach schedule)			
	51a	Other notes and loans receivable (attach			
		schedule) STATEMENT 18 51a 39,010.	00 005		20.010
et	b	Less: allowance for doubtful accounts 51b	23,235.		39,010.
Assets	52	Inventories for sale or use		52	
٩	53	Prenaid eynenses and deferred charges	2,279.		1,531.
	54	Investments - securities (attach schedule) STMT. 5► Cost FMV	30,093,774.	54	29,677,533.
		Investments - land, buildings, and			
	JJd	equipment: basis			
	2.	Less: accumulated depreciation (attach			
i	D	Less, accumulated depreciation (attach	{	55c	
		schedule)	341,993.	56	343,895.
	56		341,333.		343/333.
	57a	Land, buildings, and equipment basis 57a 3,335,789.			
	b	Less: accumulated depreciation (attach	1 700 170		0 102 013
		schedule) STATEMENT 21 57b 1,212,578.	1,783,173.		
	58	Other assets (describe SEE STATEMENT 7	1,521,832.	58	918,048.
)				
	59	Total assets (add lines 45 through 58) (must equal line 74) · · · · · · · ·			44,680,545.
_	60	Accounts payable and accrued expenses	92,295.	60	192,779.
	61	Grants payable		61	
	62	Deferred revenue	854,197.	62	764,588.
(A)	63	Loans from officers, directors, trustees, and key employees (attach			•
E E	03	schedule)		63	
labilities		Tax-exempt bond liabilities (attach schedule)		64a	~
la	54a	Mortgages and other notes payable (attach schedule) STATEMENT 19		64b	1,090,674.
_	b	Mortgages and other notes payable (attach schedule)	838,679.		825,943.
	65	Other liabilities (describe ► SEE STATEMENT 8)	0.00,0,0.		
		· · · · · · · · · · · · · · · · · · ·	3,058,245	se	2,873,984.
	66	Total liabilities (add lines 60 through 65)	3,030,243.		2,010,004.
	Org	anizations that follow SFAS 117, check here ► X and complete lines			
	1	67 through 69 and lines 73 and 74.	0 000 055		2 002 444
v	67	Unrestricted	2,802,855.	67	3,223,444.
Ö	68	Temporarily restricted	25,373,928.	68	25,701,208.
lan	69	Permanently restricted	12,149,652.	69	12,881,909.
Ba	1	anizations that do not follow SFAS 117, check here and			
pu	Urg	complete lines 70 through 74.			
Net Assets or Find Balances		Capital stock, trust principal, or current funds		70	
č	70	Paid-in or capital surplus, or land, building, and equipment fund		71	
Ţ	71	Paid-in or capital surplus, or land, building, and equipment and		72	
9	72	Retained earnings, endowment, accumulated income, or other funds			
A	73	Total net assets or fund balances (add lines 67 through 69 OR lines	İ		
ļ		70 through 72; column (A) must equal line 19 and column (B) must	40,326,435.	73	41,806,561.
_	-	equal line 21)			44,680,545.
Ŀ	74		43,384,680.	14	144,000,040.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Dar	30 (2000)	Reconciliation of Revenu	te pe	er Audited		Part IV-B	Reconciliation	of Expense	s pe	r Audited
- 41	11.14.14	Financial Statements wi	. [Financial Statements with Expenses per						
		Return (See Specific Insti			[Return			
				эн э үр э	******	a Total ex	enses and losses	per		
		nue, gains, and other support		7,941,091		•	financial statemen		a	6,460,965
		d financial statements >	a	7,941,031	2000000		s included on line			<u> </u>
		ncluded on line a but not on					7, Form 990:			
	ne 12, Fo					(1) Donated	=			
	et unrealiz	i i				• -	of facilities \$			
Of	n investme	ents \$								
•	onated se					(2) Prior year				
aı	nd use of t	acilities \$				•	on line 20,			
(3) R	ecoveries	of prior					· <u>\$</u>			
yε	ear grants	\$				(3) Losses re				
	ther (spec					line 20, F	form 990 \$	285,000.		
						(4) Other (sp	ecify):			
_		\$								
Ā	dd amou	nts on lines (1) through (4)	ь					709,338.		
		, , , , , , , , , , , , , , , , , , ,				Add amou	unts on lines (1) thr	ough (4) 🕨	Ь	994,338.
c Li	ine a min	us line b	С	7,941,091			inus line b		c	5,466,627.
		ncluded on line 12,				d Amounts	s included on line	17,		
		but not on line a:				Form 99	0 but not on line	a:		
	vestment	· ·				(1) Investme	nt expenses	•		
	ot include					not includ	led on line			
		90 \$				6b, Form	990 \$,		
						(2) Other (sp				
(2) C	Other (spec	ny).				(, (
_	C III AII	9 \$ -709,338.					s			
	STMT		d	-709,338	· .	Add amo	ounts on lines (1)	and (2)	d	
		• • •	┝┷┼	7037555			penses per line 1			
		nue per line 12, Form 990		7,231,753	.		lus line d) · · · ·		e	5,466,627.
() Doc	ine c plu	s line d) · · · · · · · · ▶ st of Officers, Directors, Tr	uste	es, and Key E	mp	lovees (List e	each one even if	not compensa	ted; s	ee Specific
L GI		tructions on page 25.)		,	•	•		-		
	1110	addune on page 20.)				itle and average	(C) Compensation	(D) Contributio employee benefit		(E) Expense account and other
		(A) Name and address				ours perweek oted to position	(If not paid, enter -0)	deferred comper		allowances
	SE	E STATEMENT 14					-0-	-0-		-0-
	برن	D Ullianamana								
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				o receive seers	ate ~	mpeneation of	more than \$100 000	from your		
75	Did any of	ficer, director, trustee, or key en	pioye	ich more than \$44	ט טטע פוב ת	nuperwauon on i Twas provided i	by the related organic	ations?		Yes X No
•	organizati	on and all related organizations,	or wn	icii filore triali ֆ II	٠,٥٥٠	y was provided i	o, are remove organia			,
	If "Yes," a	ttach schedule - see Specific Inst	UCUO	ns on page 26.						
		<u> </u>						LINE TO A STATE OF THE STATE OF		Form 990 (200
										•

Eart	n 9 <u>90 (2</u>	(000)	43-	1234200		Page 5
	rt VI	Other Information (See Specific Instructions on page 26.)			,	Yes No
7 F	Did the	organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	description of each	activity	76	X
77	Were a	ny changes made in the organizing or governing documents but not reported to the IRS?			77	Х
•		" attach a conformed copy of the changes.				1
78 a		organization have unrelated business gross income of \$1,000 or more during the year covered by	this return?		78a	X
		" has it filed a tax return on Form 990-T for this year?			78ь	N/A
79	Was th	ere a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attact	h a statement		79	X
		rganization related (other than by association with a statewide or nationwide organization) through				
	membe	rship, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		<i></i>	80a	X
ь		" enter the name of the organization				
		and check whether it is exempt OR nonexempt	.			
81 a	Enter ti	ne amount of political expenditures, direct or indirect, as described in the				
			81a			
ь	Did the	organization file Form 1120-POL for this year?			81Ь	<u> </u>
82 a	Did the	organization receive donated services or the use of materials, equipment, or facilities at no charge				
	or at su	obstantially less than fair rental value? STATEMENT 20	• • • • • • • • •		82a	X
b	If "Yes,	" you may indicate the value of these items here. Do not include this amount				i
	as reve	nue in Part I or as an expense in Part II. (See instructions for reporting in	1001			
)	82b		83a	v
83 a	Did the	organization comply with the public inspection requirements for returns and exemption application	isr.	• • • • • •	83b	X X
b	Did the	organization comply with the disclosure requirements relating to quid pro quo contributions?			84a	$\frac{\lambda}{x}$
84a	Did the	organization solicit any contributions or gifts that were not tax deductible?	• • • • • • • •		044	
t		" did the organization include with every solicitation an express statement that such contributions			84Ь	х
۰-	or gifts	were not tax deductible?	• • • • • • • •		85a	N/A
89 L	Did the	organization make only in-house lobbying expenditures of \$2,000 or less?			85Ъ	N/A
	if "Voc	was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	ion			
		d a waiver for proxy tax owed for the prior year.				
		assessments, and similar amounts from members	85c	N/A		
		1 162(e) lobbying and political expenditures	85d	N/A		
	Aggreg	ate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A		
f	Taxable	s amount or loppying and pointour experiences (into seasons 1		N/A		
ç	g Does ti	ne organization elect to pay the section 6033(e) tax on the amount in 85f?			85g	N/A
ŀ	n If secti	on 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to it	ts reasonable			
	estima	te of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		7.73	85h	N/A
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		N/A		
		receipts, included on line 12, for public use of club facilities		A/A A/A		
87	501(c)	(12) orgs. Enter: a Gross income from members or shareholders	87a	N/A		
1	b Gross	income from other sources. (Do not net amounts due or paid to other	875	N/A		
	source	s against amounts due or received from them.) time during the year, did the organization own a 50% or greater interest in a taxable corporation or		1771		
88	At any	rship, or an entity disregarded as separate from the organization under Regulations sections			1	
	partne	701-2 and 301.7701-3? If "Yes," complete Part IX		·	88	X
00.	301.71 501(c)	(3) organizations. Enter: Amount of tax imposed on the organization during the year under:				
0.5	section	n 4911 ► N/A ; section 4912 ► N/A ; section 4955	► <u>N/A</u>			
1	h 501(c)	(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction				
	durina	the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach		:		
	a state	ement explaining each transaction		l	89b	X
	c Enter:	Amount of tax imposed on the organization managers or disqualified persons during the year under		_	3T /	¬
	continu	ne 4012 4055 and 4958		₹	N/.	
	d Enter:	Amount of tax on line 89c, above, reimbursed by the organization		▶	14/1	
90	a List th	e states with which a copy of this return is filed N/A	· · · · · · · · · · · · · · · · · · ·	1	90b 1	NONE
	b Numb	er of employees employed in the pay period that includes March 12, 2000 (See inst.)	Telenhone no			
91	The be	cooks are in care of SOUTHWEST MO STATE UNIVERSITY	ZiP code ▶_	65804	 _	
	Locate	ed at 901 S NATIONAL SPRINGFIELD, MO on 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here				
92	Section	on 4947(a)(1) nonexempt chantable trusts liling rount 990 in field of 1 of	<u></u> ▶	92	N/	A
-	and e	nter the amount of tax-exempt interest recorded of adolated earning the section (Form	990 (2000)

Part VII An	alysis of Income-Produc	ing Activit	i <mark>es (S</mark> ee Spe	cific Instr	uctions or	n page 30.)	
	nts unless otherwise	Unre	ated business inc		Excluded by	section 512	, 513, or 514	(E) Related or
indicated.		(A) Business	(B) Amount		(C) Exclusion	1) m 4	D) ount	exempt function
93 Program ser	rvice revenue:	code	Amount		code		- Curic	income
	LANEOUS							510,534.
e								
	dicaid payments							
	ntracts from government agencies							
	p dues and assessments							
	ings and temporary cash investments •							
96 Dividends a	and interest from securities	900000		26.	14	2:	11,967.	
	ncome or (loss) from real estate:							
	ed property							
	anced property	,			16	10	04,742.	<u> </u>
	me or (loss) from personal property							· · · · · · · · · · · · · · · · · · ·
	stment income				14		32,008.	
	from sales of assets other than inventory				18		40,750.	
	or (loss) from special events .							
	or (loss) from sales of inventory							
	rue: a							
	FE INSURANCE				14		24,894.	<u> </u>

104 Subtotal (ac	dd columns (B), (D), and (E)).						68,845.	510,534.
105 Total (add)	line 104, columns (B), (D), and (lus line 1d, Part I, should equal t	E)}				. .	· -	779,405.
▼ of th	lain how each activity for which the organization's exempt purpose STATEMENT 15	eses (other th	nan by providing fu	ınds for suc	:h purposes)			
Part IX Info	ormation Regarding Tax	able Subsi	diaries and D	isregard	ed Entitie	<u>s (See Sp</u>	<u>ecific Instru</u>	ctions on page 31.)
	(A)		(B) Percentage of		(C) of activities	1	(D) tal income	End-of-vear
Name bar	, address, and EIN of corporation, rtnership, or disregarded entity		ownership interest	Maidic	OI acavilles	- 100		, assets
	;		%					
***			%					
			%					
			%	<u> </u>				1 ((())))
Part X Inf	ormation Regarding Tra	insfers As	sociated with	Persona	Benefit	Contracts	(See Specific	: Instructions on page 31.
(a) Did the o	rganization, during the year	, receive an	y funds, directly	y or indire	ctly, to pay	premiums	on a personal	
benefit co	ontract?							Yes X No
(b) Did the o	organization, during the year	r, pay prem	iums, directly o	r Indirecti	y, on a pe	rsonal bene	ent contract?	T ies V iio
Note: If "Yes								to the best of my knowledge
Please	"to (b), file Form 8870 and I Under penalties of perjury, I dec and belief, it is true, correct, and (Important: See General Instruct	clare that I hav d complete. De	e examined this retuined this retuined the properties of the prope	er (othe r than	officer) is bas	ed on all inform	nation of which pre	parer has any knowledge.
	(Important: See General Instruct	ion W, on page	: 14.}		1	_		
Sign					Date	— · 🖢 🚎	pe or print name	and title
Here	Signature of officer				Date	<i>P</i> 19	Check if	Preparer's SSN or PTIN
	Preparer's				Date		self-	
Paid	signature			_ 			employed >	44-0160260
Preparer's	Firm's name (or yours BKD	, LLP		00/50	DOV 1	100		3-4-0100500
Use Only	if self-employed) and 901		LOUIS #10	10 07 PO	BOX 1	190 1-1190	Phone no.	417 865-8701
·	address, and ZIP code SPR	INGFIE	LD, MO		6380	1-1130	<u>′L</u>	Form 990 (2000)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust Supplementary Information - (See separate instructions.)

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OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Employer identification number

2000

Name of the organization				employer identification number
SOUTHWEST MISSOU	JRI STATE U	NIV FOUNDAT	I'ION	43-1234200
Part I Compensation of the Five Highe (See page 1 of the instructions. List e	each one. If there	rees Other I han are none, enter "I	None.")	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans deferred compensation	
ONE	1			
		,		
	1			
			<u> </u>	
				·
Total number of other employees paid over	NONE			940 - 144 940 - 144
Part II Compensation of the Five Higher (See page 1 of the instructions. List	et Paid Indana	ndent Contracto er individuals or fir	ors for Professions). If there are r	onal Services none, enter "None.")
(a) Name and address of each independent contractor paid		1	of service	(c) Compensation
NONE				
	<u> </u>		``.	
·				
		_	·	
Total number of others receiving over \$50,000 for professional services	NONE			##5 4445

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2000

Sche	dule A (Form 990 or 990-EZ) 2000 43-12342	. • •	7	Page
Pa	Statements About Activities		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any			
	attempt to influence public opinion on a legislative matter or referendum?	. 1		X
	If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities > \$			
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			
	organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of			
	the lobbying activities.			
	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
2	of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable			
	organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal			
	beneficiary:			
а	Sale, exchange, or leasing of property?	. 2a		X
b	Lending of money or other extension of credit?	. <u>25</u>		X
С	Furnishing of goods, services, or facilities?	. <u>2c</u>		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	. 2d		x
e	Transfer of any part of its income or assets?	. <u>2e</u>		X
	If the answer to any question is "Yes," attach a detailed statement explaining the transactions.			
	The state of the s		х	
3	Does the organization make grants for scholarships, fellowships, student loans, etc.?	. 3 4a		x
4a	Attach a statement to explain how the organization determines that individuals or organizations receiving grants	. 44		
ь	or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the inststations, 1.6			
	Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions.)			
	organization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 5.)			
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's nar	ne, city,		
10	X An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv).	-
	(Also complete the Support Schedule in Part IV-A.)			
11 a	An organization that normally receives a substantial part of its support from a governmental unit or from the general public	•		
	Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11b	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gi	nee		
12	An organization that normally receives: (1) more than 33 1/3/3 of its support from continuously, membership receives, and greeceipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3	3% of		
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses a	cquired		
	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	•		
43	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization	tions		
13	described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (Section 509(a)(2))	ee		
	section 509(a)(3).)			
	Provide the following information about the supported organizations. (See page 5 of the instructions.)			-
	(b) Li	ne numb		
	(4) 110	m above	_,,,	-
	10	:		_
	SOUTHWEST MISSOURI STATE UNIVERSITY 10			-
-				-
-		•		
				-

	Note: You may use the worksheet in the in:		(b) 1998	(c) 1997	(d) 1996	(e) Total
	ndar year (or fiscal year beginning in) · · · · · · >	(a) 1333	(0) 1990	(6) 1997	(4) 1000	(c) I call
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	6 247 732	7 416 003	6 536 940	5 514 588	25715353
		0,247,132.	7,410,093.	0,330,340.	J,J14,500.	2011000.
16	Membership fees received					
	Gross receipts from admissions,					
	merchandise sold or services performed, or					
	furnishing of facilities in any activity that is					
	not a business unrelated to the organization's	520,014.	486,152.	380,268.	145 208	1,531,642.
	charitable, etc., purpose	320,014.	400,132.	360,268.	143,200.	1,001,042.
18	Gross income from interest, dividends,					
	amounts received from payments on securities					
	loans (section 512(a)(5)), rents, royalties, and					,
	unrelated business taxable income (less					
	section 511 taxes) from businesses acquired by the organization after June 30, 1975	715 225	3 600 659	4.640.013	1.298.989.	11254886.
	Net income from unrelated business	1,110,220.	<u>5,000,055.</u>	1,010,010.	± , <u> </u>	
19	activities not included in line 18	32,251.				32,251.
	Tax revenues levied for the organization's	32,231.				<u> </u>
20	benefit and either paid to it or expended on					
	its behalf					
	The value of services or facilities furnished to					
21	the organization by a governmental unit					
,	without charge. Do not include the value of					
	services or facilities generally furnished to the)	,	
	public without charge					
22	Other income. Attach a schedule. Do not					
	include gain or (loss) from sale of capital assets	35,823.	316,291.	30,007.	79,648.	461,769.
23	Total of lines 15 through 22		11819195.	11587228.	7,038,433.	38995901.
24	Line 23 minus line 17	8,031,031.	11333043.	11206960.	6,893,225.	37464259.
25	Enter 1% of line 23	85,510.	118,192.	115,872.	70,384.	
26	Organizations described in lines 10 or 11: a	Enter 2% of amount	in column (e), line 24	٠	▶ 26a	749,285.
ь	Attach a list (which is not open to public inspection	n) showing the name	of and amount con	tributed by each		and the second
_	person (other than a governmental unit or publicly	supported organizati	on) whose total gifts	for 1996 through		
	1999 exceeded the amount shown in line 26a. Enter	er the sum of all these	excess amounts .	STMT.	1.7 ▶ 26b	891,169.
С	Total support for section 509(a)(1) test Enter line 24	4, column (e)			26c	37464259.
d	Add: Amounts from column (e) for lines: 18 11	.254886. 19		1.		400000
	. 224	61,769. 20	ъ <u>891,16</u>	<u> 9. </u>	▶ <u>26d</u>	12640075.
e	Public support (line 26c minus line 26d total)				▶ 26e	24824184.
f	Public support percentage (line 26e (numerator)	divided by line 26c (d	enominator))		► 26f	66.26 1 0 %
27	Organizations described on line 12: a For amount	nts included in lines	15, 16, and 17 tha	at were received fro	m a "disqualified	
	person," attach a list (which is not open to public in	nspection) to show th	ne name of, and tota	l amounts received in	n each year from,	
	each "disqualified person." Enter the sum of such ar	nounts for each year:	NOT APPL	ICABLE		
	(1999) (1998)		(1997)		(1996)	
ь	For any amount included in line 17 that was receive	ed from a nondisqua	lified person, attach:	a list to show the nam	e ot, and amount	•
	received for each year, that was more than the large	er of (1) the amount	on line 25 for the y	ear or (2) \$5,000. (I	nclude in the list	
	organizations described in lines 5 through 11, as w	vell as individuals.) A	fter computing the di	ifference between the	amount received	
	and the larger amount described in (1) or (2), enter	the sum of these diff	erences (the excess a	amounts) for each yea	(1006)	
	(1999) (1998)		(1997)		(1,550)	
C	Add: Amounts from column (e) for lines: 15		b		270	
	(1999) (1996) (1996) (1996) (1997)	27t 44441			274	
c	Add: Line 27a total Public support (line 27c total minus line 27d total)					
e	Public support (line 27c total minus line 27d total) Total support for section 509(a)(2) test: Enter and		n (a)	275		
f	Total support for section 509(a)(2) test: Enter among Public support percentage (line 27e (numerator)	ount on line 23, colum	denominator))		270	%
9	Public support percentage (line 27e (numerator Investment income percentage (line 18, column) aivided by lifte 2/1 (درم) (مراسمتعامعا طلبا	ded by line 27f (deno	minator))	27h	. %
28						
	grant, and a brief description of the nature of the	grant. Do not include	these grants in line 1	o. (See page 5 of the		rm 990 or 990-EZ) 2000

Part V

Private School Questionnaire (See page 5 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

NOT APPLICABLE

			Yes	No
29		ter, byławs,		
	other governing instrument, or in a resolution of its governing body?	29	<u> </u>	
30	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 admission	ons,		
	programs and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast m	redia during		
	the period of solicitation for students, or during the registration period if it has no solicitation program,			
	that makes the policy known to all parts of the general community it serves?	31	1	**********
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			

		·		
32	Does the organization maintain the following:			
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondis	criminatory		
	basis?	32b	+	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public d	lealing 32c		
	with student admissions, programs, and scholarships?		-	
	d Copies of all material used by the organization or on its behalf to solicit contributions?			
	which a congrate sta	etement)		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate sta	00000000000		
		·		
	and the state of t			
33	Does the organization discriminate by race in any way with respect to:			
_	a Students' rights or privileges?	33a	3 6 000000000	
2	a Students rights of privileges:			
	b Admissions policies?	33Ь		<u> </u>
	n Mattingsions bollows:			
,	c Employment of faculty or administrative staff?	33c		
•	Compleying the street of the s			
	d Scholarships or other financial assistance?	33d	ļ	
. •				
•	e Educational policies?	33e	<u> </u>	
1	f Use of facilities?	33f	<u> </u>	<u> </u>
(g Athletic programs?	33g	<u> </u>	
1	h Other extracurricular activities?	33h	!	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate st	atement.)		
		·		
				40000000000
	and the state of t	34a		1
34	4a Does the organization receive any financial aid or assistance from a governmental agency?		T	
	Chapmandad?	341	,	
	b Has the organization's right to such aid ever been revoked or suspended?			
	If you answered "Yes" to either 34a or b, please explain using an attached statement.		l	
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 th	rough 4.05		1
35	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		<u> </u>
	01 Key, P10C, 70-30, 1373-2 O.D. 301, 50701119 145151 115151	nedule A (Form 990 c	× 990-E	Z) 2000

	(To be come	penditures by Elect	ing Public Charities	(See page 7 of the	e instructions.)					
			ligible organization		3) <u>NO</u>	T APPLICABLE				
Chec	ck here ▶ a if the	organization belongs	to an affiliated group.							
	ck here ▶ b if yo	u checked "a" above a	and "limited control" pr	ovisions apply.	(a)	(b)				
	,	mits on Lobbying	Expenditures amounts paid or incur	red)	Affiliated group totals	To be completed for ALL electing organizations				
36	Total lobbying expendit Total lobbying expendit	ures to influence publi	c opinion (grassroots inlative body (direct le	bbying) 37						
	i otal lobbying expendit Total lobbying expendit									
	Other exempt purpose					6,460,965.				
	Total exempt purpose			40		6,460,965.				
41	Lobbying nontaxable at	nount Enter the amount	unt from the following	table -		, , , , , , , , , , , , , , , , , , , ,				
	If the amount on line 4		bying nontaxable am							
			he amount on line 40	[3333333333]						
	Over \$500,000 but not over									
	Over \$1,000,000 but not ove	r \$1,500,000 \$175,00	ver \$1,000,000 41		<u>473,048.</u>					
	Over \$1,500,000 but not ove	£\$17,000,000 \$225,00	x \$1,500,000							
	Over \$17,000,000	\$1,000,	000	الله الله الله						
42	Grassroots nontaxable	amount (enter 25% of	fline 41)	42		118,262.				
43	Subtract line 42 from li	ne 36. Enter -0- if line	42 is more than line 3	6 43						
44	Subtract line 41 from li	ne 38. Enter -0- if line	41 is more than line 3	8 44						
			40	. El . E 1700						
	Caution: If there is an	amount on either line	Averaging Period	Inder Section 501()	·)					
	(O	4-1 Eai	on 501(h) election do i	not have to complete:	all of the five columns	below.				
	(Some organization	See the instruction	ns for lines 45 through	50 on page 9 of the i	instructions.)	2010111				
	See the instructions for lines 45 through 50 on page 9 of the instructions.)									
			Lobbying Expendit			(-)				
	alendar year (or fiscal	(a)	(b)	(c)	(d)	(e) Total				
у	ear beginning in) 🕨	2000	1999	1998	1997	i Ulai				
	Lobbying nontaxable	472 049	199 110	119 110	406 519	1 817 156				
45	amount	473,048.	488,149.	449,440.	406,519.	1,817,156.				
	amount Lobbying ceiling amount	473,048.	488,149.	449,440.	406,519.					
	amount	473,048.	488,149.	449,440.	406,519.	1,817,156. 2,725,734.				
46	amount Lobbying ceiling amount (150% of line 45(e))			449,440. NONE	406,519. NONE					
46	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures	473,048. NONE	488,149. NONE		NONE	2,725,734. NONE				
<u>46</u>	amount Lobbying ceiling amount (150% of line 45(e))					2,725,734.				
<u>46</u>	amount Lobbying ceiling amount (150% of line 45(e))	NONE	NONE	NONE	NONE	2,725,734. NONE 454,289.				
46 47 48	amount Lobbying ceiling amount (150% of line 45(e))	NONE	NONE	NONE	NONE	2,725,734. NONE				
46 47 48	amount Lobbying ceiling amount (150% of line 45(e))	NONE 118,262.	NONE 122,037.	NONE 112,360.	NONE 101,630.	2,725,734. NONE 454,289. 681,434.				
46 47 48 49	amount	NONE 118,262. NONE	NONE 122,037. NONE	NONE	NONE 101,630. NONE	2,725,734. NONE 454,289. 681,434. NONE				
46 47 48 49	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount	NONE 118,262. NONE	NONE 122,037. NONE NONE	NONE 112,360. NONE	NONE 101,630. NONE NO	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE				
46 47 48 49 50 Pa	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount	NONE 118,262. NONE activity by Nonelections only by organiza	NONE 122,037. NONE Ing Public Charities tions that did not cor	NONE 112,360. NONE	NONE 101,630. NONE NO no page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE				
46 47 48 49 50 Pa	amount	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer	NONE 122,037. NONE ing Public Charities tions that did not con	NONE 112,360. NONE nplete Part VI-A) (Sellegislation, including any	NONE 101,630. NONE NO no page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE				
46 47 48 49 50 Pa	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures rt VI-B Lobbying A (For reporting the year, did the organimpt to influence public opinion of the second	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer inion on a legislative material inion on	NONE 122,037. NONE Ing Public Charities tions that did not conce national, state or locater or referendum, through	NONE 112,360. NONE nplete Part VI-A) (Set I legislation, including any in the use of:	NONE 101,630. NONE NO no page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel	amount	NONE 118,262. NONE ctivity by Nonelection only by organization attempt to influenting only on a legislative material on	NONE 122,037. NONE Ing Public Charities tions that did not cornce national, state or locater or referendum, through	NONE 112,360. NONE nplete Part VI-A) (See legislation, including any on the use of:	NONE 101,630. NONE NO ee page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 48(e)) Grassroots lobbying expenditures Total lobbying expenditures Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer interest on a legislative material on the compensation of th	NONE 122,037. NONE Ing Public Charities tions that did not cornce national, state or local ter or referendum, through	NONE 112,360. NONE nplete Part VI-A) (Set I legislation, including any in the use of:	NONE 101,630. NONE NO ee page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures rt VI-B Lobbying A (For reporting the year, did the organimpt to influence public opin Volunteers Paid staff or managem Media advertisements	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer inion on a legislative mathematical compension on the compension of the compension on the compension on the compension of the compension on the compension of th	NONE 122,037. NONE Ing Public Charities tions that did not cornce national, state or locater or referendum, through	NONE 112,360. NONE nplete Part VI-A) (Set legislation, including any in the use of:	NONE 101,630. NONE NO ee page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b c	amount	NONE 118,262. NONE Activity by Nonelection attempt to influer and a legislative material and a legi	NONE 122,037. NONE Ing Public Charities tions that did not conce national, state or locater or referendum, through	NONE 112,360. NONE nplete Part VI-A) (Set legislation, including any in the use of:	NONE 101,630. NONE NO ee page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b c	amount	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer nion on a legislative material or legislations for lobbying put	NONE 122,037. NONE ing Public Charities tions that did not conce national, state or local ter or referendum, throughter or referendum, throughter or referendum.	NONE 112,360. NONE nplete Part VI-A) (Set I legislation, including any in the use of:	NONE 101,630. NONE NO ee page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b c d e	amount	NONE 118,262. NONE Activity by Nonelection on a legislative material interest to influent interest to influent interest (Include compension on a legislative material interest (Include compension of Include interest (Include interest (I	NONE 122,037. NONE ing Public Charities tions that did not connece national, state or local ter or referendum, through sation in expenses repo	NONE 112,360. NONE Inplete Part VI-A) (Set I legislation, including any in the use of: Interest on lines c through	NONE 101,630. NONE NO ee page 9 of the inst	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b c d e f	amount	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer inion on a legislative mathematic or the public hed or broadcast state zations for lobbying publislators, their staffs, gas. seminars, conventions.	NONE 122,037. NONE Ing Public Charities tions that did not cornece national, state or locater or referendum, throughter	NONE 112,360. NONE nplete Part VI-A) (Sell legislation, including any in the use of: arted on lines c through	NONE 101,630. NONE NO ee page 9 of the inst Yes No	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b c d e f	amount	NONE 118,262. NONE Activity by Nonelection only by organization attempt to influer inion on a legislative mathematic or the public hed or broadcast state zations for lobbying publislators, their staffs, gas. seminars, conventions.	NONE 122,037. NONE Ing Public Charities tions that did not cornece national, state or locater or referendum, throughter	NONE 112,360. NONE nplete Part VI-A) (Sell legislation, including any in the use of: arted on lines c through	NONE 101,630. NONE NO ee page 9 of the inst Yes No	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				
46 47 48 49 50 Pa Duri attel a b c d e f	amount	NONE 118,262. NONE Activity by Nonelection attempt to influer inion on a legislative material inion on a legislative materi	NONE 122,037. NONE Ing Public Charities tions that did not corn nce national, state or local ter or referendum, through sation in expenses report fic. Imments Imposes overnment officials, or ons, speeches, lectures ough h)	NONE 112,360. NONE Inplete Part VI-A) (Set I legislation, including any in the use of: Interest on lines c through the use of: Interest on lines c through the use of: In a legislative body In or any other means	NONE 101,630. NONE NO ee page 9 of the inst Yes No	2,725,734. NONE 454,289. 681,434. NONE T APPLICABLE tructions.)				

Sch	edule A	(For	m 990 or 990-EZ) 2000		43-1234200	Page 6
_	rt VII		nformation Regarding	Transfers To and Transactions an	d Relationships With Noncharitable	
لنبصم	-			See page 9 of the instructions.)		
51	Did th	ne re	porting organization direct	y or indirectly engage in any of the following	owing with any other organization described	in section
	501(c) of t	he Code (other than section	on 501(c)(3) organizations) or in sectio	n 527, relating to political organizations?	
а	Trans	fers	from the reporting organiz	ation to a noncharitable exempt organiz	zation of:	Yes No
					1	i) X
					· · · · · · · · · · · · · · · · · · ·) X
b	Other	tran	sactions:			1 1
	(ī)	Sales	s or exchanges of assets v	with a noncharitable exempt organization	1 b(1)	X
	(ii)	Purcl	hases of assets from a no	ncharitable exempt organization	b(ii)) <u>X</u>
	(iii)	Rent	al of facilities, equipment,	or other assets	b(iii) X
	(iv)	Reim	bursement arrangements		b(iv) X
) X
				mbership or fundraising solicitations) X
				ing lists, other assets, or paid employee		X
d	If the	answ	er to any of the above is "Yes	," complete the following schedule. Column	(b) should always show the fair market value of the	1
				the reporting organization. If the organization		
	transa	ction	or sharing arrangement, sho	w in column (d) the value of the goods, other	assets, or services received:	
	(a)		(p)	(c)	(q)	
	Line no	2.	Amount involved	Name of noncharitable exempt organization	Description of transfers, transactions, and sharing a	rrangements
	<u> N/2</u>	7				
					1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
_	 					
_	:					
_			-			
52:	le th	e ora	anization directly or indire	ctly affiliated with, or related to, one or,	more tax-exempt organizations	_=:
٠,,	desc	cribed	d in section 501(c) of the (Code (other than section 501(c)(3)) or i	n section 527? ▶ 🔲 Y	es X No
!			complete the following sch			
			(a)	(b)	(c)	
		Nar	me of organization	Type of organization	Description of relationship	
		****		N/A		
			N/A			
					· · · · · · · · · · · · · · · · · · ·	
				<u> </u>		<u>,</u>

FORM	990,	PART	I	-	OTHER	DECREASES	IN	FUND	BALANCES

DESCRIPTION

AMOUNT

UNREALIZED LOSS ON REAL ESTATE HELD

FOR RESALE

285,000.

TOTAL

285,000.

FORM 990, PART II - OTHER EXPENSES

i E	. 60		550,617.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	59. 550,617.
MANAGEMENT AND GENERAL	197,759.			1 1 1 1 1 1	197,759.
PROGRAM SERVICES		1,543,558. 1,614,068.	292 508	171,772.	3,735,145.
TOTAL	113,239.	1,543,558.	550,617.	171,772.	4,483,521.
DESCRIPTION	EQUIPMENT & FURNITURE INSTITUTIONAL EXPENSES	STUDENT SERVICES INSTRUCTIONS & ACADEMIC PROGAM	FUNDRAISING COSTS OF DIRECT BENEFITS TO DONORS	UNCOLLECTIBLE PLEDGES REC.	TOTALS

STATEMENT

FEDERAL FOOTNOTES

SOUTHWEST MISSOURI STATE UNIVERSITY FOUNDATION, INC #43-1234200 ATTACHMENT TO 990 06/30/01

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

- 1) ATTRACT AND GENERATE PRIVATE FUNDS FOR THE UNIVERSITY ALLOWING IT TO ACHIEVE GOALS NOT ORDINARILY POSSIBLE THROUGH STATE OR OTHER SOURCES.
- ENLIST THE INTEREST, SUPPORT, AND EFFORTS OF AS MANY VOLUNTEERS AS POSSIBLE IN ATTEMPTS TO OBTAIN FUNDS FOR THE UNIVERSITY.
- PROVIDE FLEXIBILITY IN THE HANDLING, RECEIVING, DISBURSING, AND INVESTING OF MONEY FROM PRIVATE SOURCES.

44

FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
4		
HICKORY HILLS C.C. STOCK HIGHLAND INVESTORS LP-EQUITIES REALTY INVESTORS INC SPRINGFIELD TRUST CO-EQUITIES BOND FUND EQUITY FUND INTERNATIONAL FUND RORER ASSET MGT - EQUITIES TRUST CO OF OZARKS - EQUITIES FUNDS HELD IN TRUST RORER ASSET MGT-BALANCED FUND CS-VANGUARD VALUE CS-MAS SMALL CAP CS-DFA US 4-10 VALUE CS-MSDW INST. INTNAT'L SMALL C	3,500. 4,680,687. 837,057. 3,956,476. 6,384,553. 3,804,272. 2,143,387. 5,245,724. 1,378,584. 1,384,310. 275,224.	3,500. 1,693,515. 794,172. 3,296,491. 3,016,782. 1,543,194. 2,131,086. 1,257,064. 1,135,466. 261,693. 2,172,841. 3,162,171. 1,691,208. 2,217,583.
CS-MSDW INST. INTNAT L SMALL C CS-SSGA EMERGING MARKETS CS-COLUMBIA REAL ESTATE WESTRIDGE CAPITAL MANAGMENT		1,988,714. 1,230,420. 2,081,633.
TOTALS	30,093,774.	29,677,533.

FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE
			was mad and been time and allow due with some
CSV LIFE INS POLICIES		341,993.	343,895.
	TOTALS	341,993.	343,895.

· FORM 990, PART IV - OTHER ASSETS

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
	gan dan dan dan dan dan dan dan dan dan d	
PROPERTY RECEIVED & HELD FOR		
RESALE	1,521,832.	918,048.
TOTALS	1,521,832.	918,048.

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FORM 990, PART IV - OTHER LIABILITIES

		BEGINNING	ENDING
DESCRIPTION		BOOK VALUE	BOOK VALUE
FUNDS MANAGED FOR SMSU		199,762.	199,762.
ANNUITY OBLIGATIONS		638,917.	626,181.
	TOTALS	838,679.	825,943.

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

DESCRIPTION	AMOUNT
RENTAL EXPENSES ARE NETTED	
WITH RENTAL INCOME ON FORM 990	
& ARE LISTED WITH OTHER	
EXPENSES ON AUDITED FINANCIAL	
STATEMENTS	-658,158.
REALIZED LOSS IS NETTED WITH	
REVENUE ON FORM 990 AND IS	
LISTED WITH EXPENSES ON THE	
AUDITED FINANCIAL STATEMENTS.	-40,750.
CHANGE IN VALUE OF SPLIT-	
INTEREST AGREEMENTS IS NETTED	
WITH REVENUES ON FORM 990 AND	
IS LISTED WITH EXPENSES ON THE	10.420
AUDITED FINANCIAL STATEMENTS.	-10,430.
TOTAL	-709,338.

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION	AMOUNT
	, ————————————————————————————————————
RENTAL EXPENSES ARE NETTED	
WITH RENTAL INCOME ON FORM 990	
& ARE LISTED WITH OTHER	
EXPENSES ON AUDITED FINANCIAL	
STATEMENTS	658,158.
REALIZED LOSS IS NETTED WITH	
REVENUE ON FORM 990 AND IS	
LISTED WITH EXPENSES ON THE	
AUDITED FINANCIAL STATEMENTS.	40,750.
CHANGE IN VALUE OF SPLIT-	
INTEREST AGREEMENTS IS NETTED	
WITH REVENUES ON FORM 990 AND	
IS LISTED WITH EXPENSES ON THE	
AUDITED FINANCIAL STATEMENTS.	10,430.
TOTAL	709,338.
<u> </u>	

LIST OF OFFICERS, DIRECTORS, AND TRUSTEES PART V FORM 990",

NAME AND ADDRESS

NASHVILLE, TN 37205 6204 HARDING ROAD MR. TOM BLACK

SMSU OFFICE OF FINANCIAL SERVICES SPRINGFIELD, MO 65804 901 S NATIONAL MR. TOM ALLEN

SMSU-UNIVERSITY ADVANCEMENT MR. GREGORY P. ONSTOT SPRINGFIELD, MO 65804 901 S NATIONAL

SPRINGFIELD, MO 65804 MR. JAMES R. CRAIG 2352 EAST GRAND

SPRINGFIELD, MO 65809 5690 COLDSTREAM DRIVE MR. ALVA R. ELLISON

65775 MRS. VIVIAN H. DRAGO 117 LANGSTON STREET WEST PLAINS, MO

JOHN Q HAMMONS INDUSTRIES, 300 JOHN Q HAMMONS PARKWAY MR. JOHN Q. HAMMONS SUITE 900

65806

SPRINGFIELD, MO

DEVOTED TO POSITION TITLE AND TIME

PART-TIME DIRECTOR

SECRETARY-TREASURER PART-TIME

EXEC. DIRECTOR PART-TIME

DIRECTOR

PART-TIME DIRECTOR

PART-TIME PART-TIME DIRECTOR

PART-TIME DIRECTOR

INC

STATEMENT

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FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

SOUTHWEST MISSOURI STATE UNIV FOUNDATION

43-1234200

NAME AND ADDRESS

DEVOTED TO POSITION TITLE AND TIME

> SPRINGFIELD, MO 65801 MR. W. BRYAN MAGERS MAGERS LODGING P.O. BOX 9122

PRESIDENT PART-TIME

> 911 ST. ANDREWS CIRCLE SPRINGFIELD, MO 65809 MR. JAMES P. FERGUSON

PART-TIME DIRECTOR

CITY UTILITIES OF SPRINGFIELD MR. ROBERT E. ROUNDTREE P.O. BOX 551

PART-TIME DIRECTOR

SPRINGFIELD, MO 65801

65802 930 N. FARM ROAD 185 DR. MARION L. WOLF SPRINGFIELD, MO

PART-TIME DIRECTOR

> 65804 DR. JOHN H. KEISER SPRINGFIELD, MO 901 S. NATIONAL SMSU PRESIDENT

EX OFFICIO PART-TIME

> 4598 EAST CULLODEN LANE MR. FRED M MCQUEARY

PART-TIME DIRECTOR

> 62809 SPRINGFIELD, MO.

V-PRESIDENT PART-TIME

WHEATON, IL 60187-4037 MR. GRANT W. LAWSON 614 WEST FRANKLIN

STATEMENT

FORM 990; PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

SOUTHWEST MISSOURI STATE UNIV FOUNDATION

TITLE AND TIME	DEVOTED TO POSITION	
	NAME AND ADDRESS	
	AND	1
	NAME	

NAME AND ADDRESS	DEVOTED TO 1
AR. ALVIN CLIFTON	DIRECTOR
DARK MOUNTAIN INTERIORS	PART-TIME
1010 WEST CHESTNUT STREET	
SPRINGFIELD, MO 65802	

MRS. JACOUIE DOWDY	DIRECTOR
JOHN Q. HAMMONS INDUSTRIES	PART-TIME
300 JOHN Q. HAMMONS PKWY	
SUITE 900	
SPRINGFIELD, MO 65806	
MR. T. EDWARD PINEGAR, JR.	DIRECTOR
5308 SOUTH KISSICK AVENUE	PART-TIME
SPRINGFIELD, MO 65804	-

DIKECTOR	PART-TIME		DIRECTOR	PART-TIME
. T. EDWAKD FINEGAK, OK.	08 SOUTH KISSICK AVENUE	RINGFIELD, MO 65804	MEYER A MEYER	39 EAST KENSINGTON DRIVE
Z Z	M M	ď	A	呂
^ 기의 기의	SOUTE	GFIEI	ANAT	EAST
-	80	RIN	V.	. ტ

DIRECTOR	VE PART-TIME	er.	ASSIS SECR	ENT PART-TIME		
MRS. JANE A. MEYER	3639 EAST KENSINGTON DRIVE	SPRINGFIELD, MO 65802	CINDY R. BUSBY	SMSU UNIVERSITY ADVANCEMENT	901 SOUTH NATIONAL	SPRINGFIELD, MO 65804

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HYD	24
AM DEJ	4087 ELD,
\vdash	XH
WILLIAM ICAN DE	BOX
Ω.	A. H.
MR.	P.O. BOX 40 SPRINGFIELD

H	CLUB DRIVE
GARST	CLUB
ROBERT M.	RACOTET
MR.	2759

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

MR. THOMAS G. STRONG THE STRONG LAW FIRM, PC 901 EAST BATTLEFIELD SPRINGFIELD, MO 65807 DR. BERNICE S. WARREN 821 SOUTH ROGERS AVENUE SPRINGFIELD, MO 65804

TITLE AND TIME DEVOTED TO POSITION

DIRECTOR PART-TIME

DIRECTOR PART-TIME GRAND TOTALS

STATEMENT

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93A .	SERVES TO ATTRACT AND GENERATE SUPPORT FOR THE UNIVERSITY, ALLOWING IT TO ACHIEVE GOALS NOT ORDINARILY POSSIBLE THROUGH STATE OR OTHER SOURCES.
103	SERVES TO ATTRACT AND GENERATE SUPPORT FOR THE UNIVERSITY, ALLOWING IT TO ACHIEVE GOALS NOT ORDINARILY POSSIBLE THROUGH STATE OR OTHER SOURCES.

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

THE UNIVERSITY BASES SCHOLARSHIP DISBURSEMENTS ON NEED AND EDUCATIONAL ACHIEVEMENTS. IT ENFORCES A NON-DISCRIMINATORY POLICY.

SOUTHWEST MISSOURI STATE UNIVERSITY FOUNDATION #43-1234200 ATTACHMENT TO FORM 990 PART IV, LINE 51a

NOTES RECEIVABLE

Details of the notes receivable at June 30, 2001 are as follows:

Two installment promissory notes, 8 percent, receivable in combined monthly installments of principal and interest of \$275.71, final payment scheduled for August 2003, secured by real estate in Kern County, California.

Installment promissory note, no stated interest, receivable in monthly installments of \$200.00, final payment scheduled for September 2004, unsecured.

Installment promissory note, no stated interest, receivable in monthly installments of \$468.09, final payment scheduled for April 2005, unsecured.

Total

\$ 39,010



NOTE 5: BONDS AND NOTES PAYABLE

Details of Real Estate Revenue bonds and notes, as of June 30, 2001, are as follows:

		Balance				Date Last
Bond Issue/Note	Bonds Series	June 30, 2001	Original Amount	Interest Rate	Due in One Year	Payment Due
Dona Issue/140te	Jenes	2001	Milount	Raic	One lear	Due
Office Building—1991	Α	\$ 190,674	\$ 1,400,000	8.5%	\$ 180,000	7/1/02
Office Building-1991	В	900,000	900,000	6.0%		4/1/06
		\$ 1,090,674	\$ 2,300,000		\$ 180,000	

Aggregate annual maturities of long-term debt at June 30, 2001, are as follows: 2002-\$180,000; 2003-\$230,674; 2004-\$240,000; 2005-\$240,000; 2006-\$200,000.

The Office Building Revenue Bonds were issued under the authority of The Industrial Development Authority of Greene County, Missouri, and the debt is secured by a deed of trust on The Alumni Center. For the year ended June 30, 2001, total interest expense on the 1991 office building debt was \$77,220 and is included in rental expenses.

SOUTHWEST MISSOURI STATE UNIVERSITY FOUNDATION #43-1234200 ATTACHMENT TO FORM 990 PART VI OTHER INFORMATION, LINE 82a

The Foundation receives administrative support from the university without charge. The value of these services is not recorded as revenues or expenditures by the Foundation.

FEDERAL FOOTNOTES

SOUTHWEST MISSOURI STATE UNIVERSITY FOUNDATION, INC ATTACHMENT TO 990 06/30/01

PART IV - LINE 57

DESCRIPTION	06/30/00	ADD/DEL	ACC DEPR	06/30/01
ALUMNI CENTER:				
EQUIPMENT \$	62 ,4 96	\$ (648)	\$ 60,007	\$ 61,848
BUILDINGS	2,460,224		1,031,206	2,460,224
REAL ESTATE-LAND	120,000	1		120,000
REMODELING-TENANT	174,270	61,000	121,365	235,269
REAL ESTATE-PUTNAM	30,188		, , ,	30,188
REAL ESTATE-RICHARDS	0	428,260	• . ·	428,260
\$	2,847,178	\$ 488,611	\$1,212,578	\$ 3,335,789

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No. 1545-0092

▶ Attach to Form 1041 (or Form 5227). See the separate instructions for Form 1041 (or Form 5227).

2000

Department of the Treasury Internal Revenue Service

lam	e of estate or trust							Employer identification	n number	
o T	THWEST MISSOU	RT STATE	UNIV FO	UNDATION				43-1234200		
ote	e: Form 5227 filers ne	ed to complet	te only Parts	l and II.					_	
ari					Year	or Less				
	(a) Description of property	(b) Date				(e) Cost or other	hacic	(f) Gain or (Loss)		
	(Example, 100 shares 7%	acquired (mo., day, yr.)	(c) Date soid (mo., day, yr.)	(d) Sales prio	æ .	(see page 27		(col. (d) less col. (e))		
	preferred of "Z" Co.)	(ind., day, yi.)		<u> </u>			•			
-										
_	<u></u>									
-										
-	<u></u>									
_										
	Short-term capital gain	or (loss) from	Forms 4684, 6	252, 6781, and	8824 .		2			
	Net short-term gain or	(loss) from par	tnerships, S co	rporations, and ot	her					
	estates or trusts						3_			
	Short-term capital loss							,		
	1999 Capital Loss Carr	yover Workshe	et				4_			
;	Net short-term gain or	(loss). Combin	e lines 1 throu	gh 4 in column (1). Ent	er •	5			
	here and on line 14 bel						5	l	l.	<u> </u>
ì	Long-Term Cap	ital Gains an	d Losses - As	sets Held Mor	e Tha	n One Year				
	(a) Description of property	(b) Date	(c) Date sold			(e) Cost or other	basis	(f) Gain or (Loss)	(g) 28% Rate or (Loss)	
	(Example, 100 shares 7% preferred of "Z" Co.)	acquired (mo., day, yr.)	(mo., day, yr.)	(d) Sales price		(see page 27	')	(col. (d) less col. (e))	*(see instr. be	
_	SEE STATEMENT	1		294,2	50.	335,0	00.	-40,750.	N	ON:
								<u> </u>		
_						:				
		<u> </u>	<u> </u>		. <u></u>					
				204 2050 2704		9994	7			
7	Long-term capital gain	or (loss) from	Forms 2439, 4		i, and	totos er trusts	8			
3	Net long-term gain or (loss) from part	nersnips, 5 co	rporations, and or	1101 63	states of trusts	9			
)	Capital gain distribution						10		_	
)	Gain from Form 4797, Long-term capital loss	corprover Ent	er in both colum	ons (f) and (a) the	amot					
İ	if any, from line 14, of	the 1999 Canit	al Loss Carryo	ver Worksheet			11	(k	
	Combine lines 6 through	ah 11 in columt) (a)				12			
2	Net long-term gain or	(loss) Combine	lines 6 throug	h 11 in column (f). En	ter				
3	here and on line 15 be	low		, , , , , , , , , , , , , , , , , , ,		<u> ▶</u>	13	-40,750.		
					;		ae inc	tructions) and up to 5	in%	
28	% rate gain or loss inclune eligible gain on qualifi	des all "collecti ed small busine	bies gains and ess stock (see	page 26 of the in	istruct	n page 20 of a ions).	16 1115	and up to o	0 70	
	The eligible gain on qualifi							(0) Fatatala	1	
	t III Summary of P	arts I and II				(1) Beneficia (see page 2		(2) Estate's or trust's	(3) Total	i
_			- F - b - (-)		14	(see page 2		0, 4,40,0		
4	Net short-term gain o		ne o above)		14					
5	Net long-term gain or	(1055):	hova\		15a				1	
ð	a 28% rate gain or (loss) (nom line 12 a	line 17 of the	worksheet	"					
1	Unrecaptured section	t∠ou gain (see	anie i/ Oi die	HOLKSHOOL	15b	}				
	on page 29)				15c				-40,7	50
	Total for year (from lift Total net gain or (loss	1 Combine line	s 14 and 15c	· · · · · · · · · · · · · · · · · · ·	16				-40,7	50
6	Total net gain or (loss e: If line 16, column (3), is	a net gain enter	the gain on Form	1041, line 4. If lines		nd 16, column (2) are	net gains, go to Part V,		
of	e: If line 16, column (3), is complete Part IV. If line 16,	column (3) ice m	et loss complete	Part IV and the Ca	pital Lo	ss Carryover Wo	<u>rks</u> he	et, as necessary.		<u>.</u>
10t	complete Part IV. IT III 16,	Notice con the	Instructions for	Form 1041				Schedu	ile D (Form 104	1) 20

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Par	t IV Capital Loss Limitation	
17	Enter here and enter as a (loss) on Form 1041, line 4, the smaller of:	
	a The loss on line 16, column (3) or	
	b \$3,000	
	e loss on line 16, column (3), is more than \$3,000, or if Form 1041, page 1, line 22, is a loss	, complete the Capital Loss
Can	yover Worksheet on page 30 of the instructions to determine your capital loss carryover.	
Par	Tax Computation Using Maximum Capital Gains Rates (Complete this pa	irt only if both lines 15c and
	16 in column (2) are gains, and Form 1041, line 22 is more than zero.)	
18	Enter taxable income from Form 1041, line 22	
19	Enter the smaller of line 15c or 16 in column (2) If you are filing Form 4952, enter the amount from Form 4952, line 4e 20	
20	Subtract line 20 from line 19. If zero or less, enter -0-	
21	Combine lines 14 and 15a, column (2). If zero or less, enter -0-	
22	Enter the smaller of line 15a, column (2), or line 22, but not less than zero 23	
23 24	Enter the amount from line 15b, column (2)	
25	Add lines 23 and 24	
26	Subtract line 25 from line 21. If zero or less, enter -0-	26
27	Subtract line 26 from line 18. If zero or less, enter -0-	
28	Enter the smaller of line 18 or \$1,750	
29	Enter the smaller of line 27 or line 28	
30	Subtract line 21 from line 18. If zero or less, enter -0	
31	Enter the larger of line 29 or line 30	
32	Tax on amount on line 31 from the 2000 Tax Rate Schedule	32
	Note: If the amounts on lines 28 and 29 are the same, skip lines 33 through 36 and go to lines	ne 37.
33	Enter the amount from line 28	
34	Enter the amount from line 27	
35	Subtract line 34 from line 33. If zero or less, enter -0	
	·	
36	Multiply line 35 by 10% (.10)	36
	Note: If the amounts on lines 18 and 28 are the same, skip lines 37 through 50 and go to lines 18.	ne 51.
37	Enter the smaller of line 18 or line 26	
38	Enter the amount from line 35	
39	Subtract line 38 from line 37. ▶ 39	
40	Multiply line 39 by 20% (.20)	40
40	Note: If line 25 is zero or blank, skip lines 41 through 50 and go to line 51.	
44	Enter the smaller of line 21 or line 24	
42	Add lines 21 and 31	
43	Enter the amount from line 18	
44	Subtract line 43 from line 42. If zero or less, enter -0	
45	Subtract line 44 from line 41. If zero or less, enter -0	
46	Multiply line 45 by 25% (.25)	46
	Note: If line 23 is zero or blank, skip lines 47 through 50 and go to line 51.	
47	Enter the amount from line 18	
48	Add lines 31, 35, 39, and 45	
49	Subtract line 48 from line 47	
50	Multiply line 49 by 28% (.28)	
51	Add lines 32, 36, 40, 46, and 50	
52	Tax on the amount on line 18 from the 2000 Tax Rate Schedule	52
53	Tax on all taxable income (including capital gains). Enter the smaller of line 51 or line 52	here 53
-	and on line 1a of Schedule G, Form 1041	Schedule D (Form 1041) 2000
		Screaule D (Form 1041) 2000

southwest Missouki state univ Founbation Schedule D Detail of Long-term Capital Gains and Losses

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPITAL GAINS (LOSSES) FROM OTHER ASSETS					
LAND	VAR	04/13/2001	294,250.	335,000.	-40,750.
TOTAL CAPITAL GAINS (LOSSES) FROM OTHER ASSETS	SETS		294,250.	335,000.	-40,750.
					,
		-			
} (
	-				
Totals			294,250.	335,000.	-40,750.

YSA

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