

Return of Organization Exempt From Income Tax

2001

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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 Inspection

A For the 2001 calendar year, or tax year beginning 07/01, **2001, and ending** 06/30/2002

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SOUTHWEST MISSOURI STATE UNIV FOUNDATION	D Employer identification number 43-1234200
	Please use IRS label or print or type. See Specific Instructions. Number and street (or P.O. box if mail is not delivered to street address) Room/suite 901 S NATIONAL	E Telephone number () - -
	City or town, state or country, and ZIP + 4 SPRINGFIELD, MO 65804	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

G Web site: ▶

J Organization type (check only one) 501(c) (3) (insert no.) 4947(a)(1) or 527

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? (If "No," attach a list. See instructions.) Yes No

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

I Enter 4-digit GEN ▶

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **12,099,730.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16.)

Revenue	1 Contributions, gifts, grants, and similar amounts received: STMT 1			
	a Direct public support	1a	10,558,842.	
	b Indirect public support	1b		
	c Government contributions (grants)	1c		
	d Total (add lines 1a through 1c) (cash \$ 10,558,842. noncash \$)	1d		10,558,842.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		1,179,257.
	3 Membership dues and assessments	3		
	4 Interest on savings and temporary cash investments	4		
	5 Dividends and interest from securities	5		745,552.
	6a Gross rents	6a	749,649.	
	b Less: rental expenses	6b	646,163.	
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c		103,486.
7 Other investment income (describe ▶)	7		-1,317,804.	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	8a		163,365.	
	b Less: cost or other basis and sales expenses	8b	201,215.	
	c Gain or (loss) (attach schedule)	8c	-37,850.	
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		-37,850.	
9 Special events and activities (attach schedule)	a Gross revenue (not including \$ of contributions reported on line 1a)	9a		
	b Less: direct expenses other than fundraising expenses	9b		
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
10a Gross sales of inventory, less returns and allowances	10a			
	b Less: cost of goods sold	10b		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
11 Other revenue (from Part VII, line 103)	11		20,869.	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		11,252,352.	
Expenses	13 Program services (from line 44, column (B))	13	8,301,171.	
	14 Management and general (from line 44, column (C))	14	199,194.	
	15 Fundraising (from line 44, column (D))	15	729,693.	
	16 Payments to affiliates (attach schedule)	16		
	17 Total expenses (add lines 16 and 44, column (A))	17		9,230,058.
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	2,022,294.	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	41,806,561.	
	20 Other changes in net assets or fund balances (attach explanation) STMT 2	20	-206,061.	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		43,622,794.

COPY

For Paperwork Reduction Act Notice, see the separate instructions.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22 1,090,463.	1,090,463.		
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25			
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33			
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42			
43	Other expenses not covered above (itemize): STMT 3	43a 8,139,595.	7,210,708.	199,194.	729,693.
	b	43b			
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 through 43). <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15.</i>	44 9,230,058.	8,301,171.	199,194.	729,693.

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24.)

What is the organization's primary exempt purpose? ▶	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a STMT 4 ----- ----- ----- (Grants and allocations \$ _____)	8,301,171.
b ----- ----- ----- (Grants and allocations \$ _____)	
c ----- ----- ----- (Grants and allocations \$ _____)	
d ----- ----- ----- (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	8,301,171.

Part IV Balance Sheets (See Specific Instructions on page 24.)

		(A)		(B)
		Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				
Assets	45 Cash - non-interest-bearing		45	
	46 Savings and temporary cash investments	8,169,167.	46	7,973,356.
	47a Accounts receivable	47a 10,026.		
	b Less: allowance for doubtful accounts	47b	81,565.	47c 10,026.
	48a Pledges receivable	48a 5,389,800.		
	b Less: allowance for doubtful accounts	48b	3,326,585.	48c 5,389,800.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule) . STMT. 17	51a 27,357.		
	b Less: allowance for doubtful accounts	51b	39,010.	51c 27,357.
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		1,531.	53 906.
	54 Investments - securities (attach schedule) STMT. 5 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV		29,677,533.	54 29,153,718.
	55a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b		55c
56 Investments - other (attach schedule) STMT. 6		343,895.	56 349,359.	
57a Land, buildings, and equipment: basis	57a 3,379,162.			
b Less: accumulated depreciation (attach schedule) . . . STMT. 19	57b 1,390,023.	2,123,211.	57c 1,989,139.	
58 Other assets (describe <input type="checkbox"/> STMT. 7)		918,048.	58 653,970.	
59 Total assets (add lines 45 through 58) (must equal line 74)		44,680,545.	59 45,547,631.	
Liabilities	60 Accounts payable and accrued expenses		60 192,779.	225,529.
	61 Grants payable		61	
	62 Deferred revenue		764,588.	62 NONE
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule) STMT. 18		1,090,674.	64b 910,674.
	65 Other liabilities (describe <input type="checkbox"/> STMT. 8)		825,943.	65 788,634.
66 Total liabilities (add lines 60 through 65)		2,873,984.	66 1,924,837.	
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
Net Assets or Fund Balances	67 Unrestricted		67 3,223,444.	3,995,486.
	68 Temporarily restricted		25,701,208.	68 23,389,924.
	69 Permanently restricted		12,881,909.	69 16,237,384.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
70 Capital stock, trust principal, or current funds		70		
71 Paid-in or capital surplus, or land, building, and equipment fund		71		
72 Retained earnings, endowment, accumulated income, or other funds		72		
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19; and column (B) must equal line 21).		41,806,561.	73 43,622,794.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		44,680,545.	74 45,547,631.	

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.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26.)

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	11,949,378.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify): _____ \$		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	11,949,378.
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify): _____ \$		
	<u>STMT 9</u> \$ -697,026.		
	Add amounts on lines (1) and (2) ▶	d	-697,026.
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	11,252,352.

a	Total expenses and losses per audited financial statements ▶	a	10,133,145.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$ 206,061.		
(4)	Other (specify): _____ \$		
	<u>STMT 10</u> \$ 697,026.		
	Add amounts on lines (1) through (4) . . ▶	b	903,087.
c	Line a minus line b ▶	c	9,230,058.
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify): _____ \$		
	Add amounts on lines (1) and (2) . . ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	9,230,058.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific Instructions on page 26.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 13		-0-	-0-	-0-

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶ Yes No
If "Yes," attach schedule - see Specific Instructions on page 27.

Part VI Other Information (See Specific Instructions on page 27.)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . .		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		X
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81 a Enter direct or indirect political expenditure. See line 81 instructions 81a		
b Did the organization file Form 1120-POL for this year?		X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? STAT 20	X	
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b		
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> N/A ; section 4912 <input type="checkbox"/> N/A ; section 4955 <input type="checkbox"/> N/A		
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> N/A		
d Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> N/A		
90 a List the states with which a copy of this return is filed <input type="checkbox"/> N/A		
b Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	NONE
91 The books are in care of <input type="checkbox"/> SOUTHWEST MO STATE UNIVERSITY Telephone no. <input type="checkbox"/> 417-836-5632 Located at <input type="checkbox"/> 901 S NATIONAL SPRINGFIELD, MO ZIP + 4 <input type="checkbox"/> 65804		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92 <input type="checkbox"/> N/A		

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a <u>MISCELLANEOUS</u>					1,179,257.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments . . .					
95 Interest on savings and temporary cash investments .					
96 Dividends and interest from securities . .	900000	448.	14	745,104.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	103,486.	
98 Net rental income or (loss) from personal property . .					
99 Other investment income			14	-1,317,804.	
100 Gain or (loss) from sales of assets other than inventory			18	-37,850.	
101 Net income or (loss) from special events .					
102 Gross profit or (loss) from sales of inventory . .					
103 Other revenue: a _____					
b <u>CSV LIFE INSURANCE</u>			14	20,869.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E)) . .		448.		-486,195.	1,179,257.
105 Total (add line 104, columns (B), (D), and (E))					693,510.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here

Signature of officer _____ Date _____

Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature: Kimberly S. Haman Date: 11-12-02 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. W): 499-82-7424

Firm's name (or yours if self-employed), address, and ZIP + 4: BKD, LLP
901 E ST LOUIS #1000/PO BOX 1190
SPRINGFIELD, MO 65801-1190 EIN: 44-0160260 Phone no.: 417 865-8701

**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.)

OMB No. 1545-0047

2001

Department of the Treasury
Internal Revenue Service

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

Name of the organization

SOUTHWEST MISSOURI STATE UNIV FOUNDATION

Employer identification number

43-1234200

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "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	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	NONE	

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

Schedule A (Form 990 or 990-EZ) 2001

Part III Statements About Activities (See page 2 of the instructions.)

	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 legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amount on line 38, Part VI-A, or line i or Part VI-B.) 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.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	X	
4 Do you have a section 403(b) annuity plan for your employees?		X
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments. STMT 15		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The 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.)
- 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 name, city, and state ► _____
- 10 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.)
- 11a 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.)
- 12 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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations 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). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above
SOUTHWEST MISSOURI STATE UNIVERSITY	10

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Table with columns: Calendar year (or fiscal year beginning in), (a) 2000, (b) 1999, (c) 1998, (d) 1997, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished to the organization by a governmental unit; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	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?		
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 admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy 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, 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?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	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, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

Check a if the organization belongs to an affiliated group.
 Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	10,133,145.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	10,133,145.
41	Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 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	41	656,657.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	164,164.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount	656,657.	473,048.	488,149.	449,440.	2,067,294.
46 Lobbying ceiling amount (150% of line 45(e))					3,100,941.
47 Total lobbying expenditures	NONE	NONE	NONE	NONE	NONE
48 Grassroots nontaxable amount	164,164.	118,262.	122,037.	112,360.	516,823.
49 Grassroots ceiling amount (150% of line 48(e))					775,235.
50 Grassroots lobbying expenditures	NONE	NONE	NONE	NONE	NONE

Part VI-B Lobbying Activity by Nonelecting Public Charities **NOT APPLICABLE**
 (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION	AMOUNT
UNREALIZED LOSS ON REAL ESTATE HELD FOR RESALE	206,061.
TOTAL	206,061.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
EQUIPMENT & FURNITURE	2,268,124.	2,268,124.		
INSTITUTIONAL EXPENSES	199,194.		199,194.	
STUDENT SERVICES	1,767,590.	1,767,590.		
INSTRUCTION & ACADEMIC PROGRAM	2,749,029.	2,749,029.		
FUNDRAISING	729,693.			729,693.
COSTS OF DIRECT BENEFITS TO DONORS	271,542.	271,542.		
UNCOLLECTIBLE PLEDGES REC	154,423.	154,423.		
TOTALS	8,139,595.	7,210,708.	199,194.	729,693.

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.
- 2) ENLIST THE INTEREST, SUPPORT, AND EFFORTS OF AS MANY VOLUNTEERS AS POSSIBLE IN ATTEMPTS TO OBTAIN FUNDS FOR THE UNIVERSITY.
- 3) PROVIDE FLEXIBILITY IN THE HANDLING, RECEIVING, DISBURSING, AND INVESTING OF MONEY FROM PRIVATE SOURCES.

FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
HICKORY HILLS C.C. STOCK	3,500.	3,500.
HIGHLAND INVESTORS LP-EQUITIES	1,693,515.	1,473,159.
REALTY INVESTORS INC	794,172.	550,620.
SPRINGFIELD TRUST CO-EQUITIES	3,296,491.	3,473,328.
BOND FUND	3,016,782.	1,114,019.
INTERNATIONAL FUND	1,543,194.	1,426,408.
RORER ASSET MGT - EQUITIES	2,131,086.	1,822,492.
TRUST CO OF OZARKS - EQUITIES	1,257,064.	1,302,779.
FUNDS HELD IN TRUST	1,135,466.	1,085,283.
RORER ASSET MGT-BALANCED FUND	261,693.	246,643.
CS-VANGUARD VALUE	2,172,841.	1,776,357.
CS-MAS SMALL CAP	3,162,171.	
CS-DFA US 4-10 VALUE	1,691,208.	1,841,359.
CS-MSDW INST. INTNAT'L SMALL C	2,217,583.	2,212,256.
CS-SSGA EMERGING MARKETS	1,988,714.	1,844,970.
CS-COLUMBIA REAL ESTATE	1,230,420.	1,358,734.
WESTRIDGE CAPITAL MANAGMENT	2,081,633.	1,713,465.
PIMCO		2,143,542.
RUSSELL 2000 INDEX FUND		2,737,630.
HARRIS AURORA		1,027,174.
TOTALS	29,677,533.	29,153,718.

FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
CSV LIFE INS POLICIES	343,895.	349,359.
TOTALS	343,895.	349,359.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
PROPERTY RECEIVED & HELD FOR RESALE	918,048.	653,970.
TOTALS	----- 918,048. =====	----- 653,970. =====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
FUNDS MANAGED FOR SMSU	199,762.	199,762.
ANNUITY OBLIGATIONS	626,181.	588,872.
TOTALS	----- 825,943. =====	----- 788,634. =====

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.	-646,163.
REALIZED LOSS IS NETTED WITH REVENUE ON FORM 990 AND IS LISTED WITH EXPENSES ON THE AUDITED FINANCIAL STATEMENTS.	-37,850.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS IS NETTED WITH REVENUES ON FORM 990 AND IS LISTED WITH EXPENSES ON THE AUDITED FINANCIAL STATEMENTS.	-13,013.
TOTAL	-697,026.

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.	646,163.
REALIZED LOSS IS NETTED WITH REVENUE ON FORM 990 AND IS LISTED WITH EXPENSES ON THE AUDITED FINANCIAL STATEMENTS.	37,850.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS IS NETTED WITH REVENUES ON FORM 990 AND IS LISTED WITH EXPENSES ON THE AUDITED FINANCIAL STATEMENTS.	13,013.
TOTAL	----- 697,026. =====

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

TITLE AND TIME
DEVOTED TO POSITION

NAME AND ADDRESS

DIRECTOR PART-TIME

MR. TOM BLACK
6204 HARDING ROAD
NASHVILLE, TN 37205

SECRETARY PART-TIME

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

EXEC DIREC PART-TIME

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

DIRECTOR PART-TIME

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

DIRECTOR PART-TIME

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

DIRECTOR PART-TIME

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

EX OFFICIO PART-TIME

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

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

NAME AND ADDRESS

TITLE AND TIME
DEVOTED TO POSITION

MR. FRED M MCQUEARY DIRECTOR PART-TIME

4598 EAST CULLODEN LANE
SPRINGFIELD, MO. 65809

MR. GRANT W. LAWSON PRESIDENT

140 INLET WAY #113
PALM BEACH SHORES, FL 33404

MR. ALVIN CLIFTON DIRECTOR PART-TIME

6307 SOUTH MEADOWVIEW
OZARK, MO 65721

MRS. JACQUIE DOWDY VICE PRESIDENT

1962 EAST CANTERBURY
SPRINGFIELD, MO 65804

MR. T. EDWARD PINEGAR, JR. DIRECTOR PART-TIME

5308 SOUTH KISSICK AVENUE
SPRINGFIELD, MO 65804

CINDY R. BUSBY ASSIS SECR PART-TIME

SMSU UNIVERSITY ADVANCEMENT
901 SOUTH NATIONAL
SPRINGFIELD, MO 65804

MR. WILLIAM H. DARR EX-OFFICIOPART-TIME

2951 WHITE OAK DRIVE
SPRINGFIELD, MO 65809

MR. ROBERT M. GARST DIRECTOR PART-TIME

2759 RACQUET CLUB DRIVE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION
MIDLAND, TX 79705	

MR. THOMAS G. STRONG 3967 EAST EAGLESLIFFE DRIVE SPRINGFIELD, MO 65809	DIRECTOR PART-TIME
--	--------------------

DR. BERNICE S. WARREN 821 SOUTH ROGERS AVENUE SPRINGFIELD, MO 65804	DIRECTOR PART-TIME
---	--------------------

MR. W. WAYNE BISCHLER 600 GRAND VIEW DRIVE SUNRISE BEACH, MO 65079	DIRECTOR PART-TIME
--	--------------------

MR. GREGORY I. CURL 2100 DELPOND LANE CHARLOTTE, NC 28226	DIRECTOR PART-TIME
---	--------------------

MR. CHRISTOPHER T. FULDNER 626 FARM ROAD 2240 MONETT, MO 65708	DIRECTOR PART-TIME
--	--------------------

MR. JAY R. PADGETT 1205 COUNTRY CLUB DRIVE WEST PLAINS, MO 65775	DIRECTOR PART-TIME
--	--------------------

RICHARD A. SEAGRAVE, JR., M.D. 5544 SOUTH CASTLEBAY DRIVE SPRINGFIELD, MO 65809	DIRECTOR PART-TIME
---	--------------------

GRAND TOTALS

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, 2002 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

\$27,357

2001-2002 FINANCIAL REPORT
SOUTHWEST MISSOURI STATE UNIVERSITY
FOUNDATION

NOTE 5: BONDS AND NOTES PAYABLE

Details of Real Estate Revenue bonds and notes, as of June 30, 2002, are as follows:

Bond Issue/Note	Bonds Series	Balance June 30, 2002	Original Amount	Interest Rate	Due in One Year	Date Last Payment Due
Office Building—1991	A	\$ 10,674	\$ 1,400,000	8.5%	\$ 10,674	7/1/02
Office Building—1991	B	900,000	900,000	6.0%	220,000	4/1/06
		<u>\$ 910,674</u>	<u>\$ 2,300,000</u>		<u>\$ 230,674</u>	

Aggregate annual maturities of long-term debt at June 30, 2002, are as follows: 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, 2002, total interest expense on the 1991 office building debt was \$61,920 and is included in rental expenses.

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	\$ 61,848	\$ 1,423	\$ 60,612	\$ 63,271
BUILDINGS	2,460,224	15,390	1,140,461	2,475,614
REAL ESTATE-LAND	120,000			120,000
REMODELING-TENANT	235,269		166,993	235,269
REAL ESTATE-PUTNAM	30,188	(30,188)		0
REAL ESTATE-RICHARDS	428,260	56,748	21,957	485,008
	-----	-----	-----	-----
	\$ 3,335,789	\$ 43,373	\$ 1,390,023	\$ 3,379,162
	=====	=====	=====	=====

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.