

Return of Organization Exempt From Income Tax

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.

A For the 2003 calendar year, or tax year beginning 07/01, 2003, and ending 06/30/2004

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	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <u>SOUTHWEST MISSOURI STATE UNIV FOUNDATION</u> Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>901 S NATIONAL</u> City or town, state or country, and ZIP + 4 <u>SPRINGFIELD, MO 65804</u>	D Employer identification number <u>43-1234200</u> E Telephone number <u>(417) 836-5632</u> F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: ▶ N/A

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

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.**

H and **I** are not applicable to section 527 organizations.

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

I Group Exemption Number ▶

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 ▶ 15,557,771.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

	1	Contributions, gifts, grants, and similar amounts received: STMT 1										
	a	Direct public support	1a	8,832,951.								
	b	Indirect public support	1b									
	c	Government contributions (grants)	1c									
	d	Total (add lines 1a through 1c) (cash \$ <u>8,579,056.</u> noncash \$ <u>253,895.</u>)	1d	8,832,951.								
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	277,702.								
	3	Membership dues and assessments	3									
	4	Interest on savings and temporary cash investments	4									
	5	Dividends and interest from securities	5	466,402.								
	6a	Gross rents	6a	736,645.								
	b	Less: rental expenses	6b	587,894.								
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	148,751.								
	7	Other investment income (describe ▶)	7	5,036,117.								
	8a	Gross amount from sales of assets other than inventory	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">(A) Securities</td> <td style="width: 50%; text-align: center;">(B) Other</td> </tr> <tr> <td>8a</td> <td style="text-align: right;">27,391.</td> </tr> <tr> <td>8b</td> <td style="text-align: right;">30,000.</td> </tr> <tr> <td>8c</td> <td style="text-align: right;">-2,609.</td> </tr> </table>		(A) Securities	(B) Other	8a	27,391.	8b	30,000.	8c	-2,609.
(A) Securities	(B) Other											
8a	27,391.											
8b	30,000.											
8c	-2,609.											
	b	Less: cost or other basis and sales expenses	8b	30,000.								
	c	Gain or (loss) (attach schedule)	8c	-2,609.								
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	-2,609.								
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>										
	a	Gross revenue (not including \$ <u>229,779.</u> of STMT 3 contributions reported on line 1a)	9a	157,055.								
	b	Less: direct expenses other than fundraising expenses	9b	108,879.								
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	48,176.								
	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	23,508.								
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	14,830,998.								
	13	Program services (from line 44, column (B))	13	7,685,787.								
	14	Management and general (from line 44, column (C))	14	305,939.								
	15	Fundraising (from line 44, column (D))	15	611,170.								
	16	Payments to affiliates (attach schedule)	16									
	17	Total expenses (add lines 16 and 44, column (A))	17	8,602,896.								
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	6,228,102.								
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	44,885,753.								
	20	Other changes in net assets or fund balances (attach explanation)	20									
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	51,113,855.								

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 page 22 of the instructions.)

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 \$ 1,139,308 noncash \$)	22 1,139,308.	1,139,308.		
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 NONE			
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 5	43a 7,463,588.	6,546,479.	305,939.	611,170.
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44 8,602,896.	7,685,787.	305,939.	611,170.

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 page 25 of the instructions.)

What is the organization's primary exempt purpose? <input type="checkbox"/>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a STMT 6	
(Grants and allocations \$ 1,139,308.)	7,685,787.
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).	7,685,787.

Part IV Balance Sheets (See page 25 of the instructions.)

Note: 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	
Assets	45 Cash - non-interest-bearing		45		
	46 Savings and temporary cash investments	8,845,338.	46	10,684,644.	
	47a Accounts receivable	47a 25,478.			
	b Less: allowance for doubtful accounts	47b	47c 24,925.	25,478.	
	48a Pledges receivable	48a 4,871,915.			
	b Less: allowance for doubtful accounts	48b	48c 5,555,578.	4,871,915.	
	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 7 51a 6,258.			
	b Less: allowance for doubtful accounts	51b	51c 15,403.	6,258.	
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53 4,282.	2,045.	
	54 Investments - securities (attach schedule)	STMT 8 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	29,216,918.	54	35,180,645.
	55a Investments - land, buildings, and equipment: basis	55a			
	b Less: accumulated depreciation (attach schedule)	55b	55c		
56 Investments - other (attach schedule)	STMT 9	363,792.	56	427,029.	
57a Land, buildings, and equipment: basis	57a 3,114,155.				
b Less: accumulated depreciation (attach schedule)	STMT 22 57b 1,646,813.	1,594,966.	57c	1,467,342.	
58 Other assets (describe)	STMT 10	779,725.	58	921,396.	
59 Total assets (add lines 45 through 58) (must equal line 74)		46,400,927.	59	53,586,752.	
Liabilities	60 Accounts payable and accrued expenses	72,747.	60	319,922.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	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 11	680,000.	64b	440,000.
	65 Other liabilities (describe)	STMT 12	762,427.	65	1,712,975.
66 Total liabilities (add lines 60 through 65)		1,515,174.	66	2,472,897.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	4,070,816.	67	3,233,926.	
	68 Temporarily restricted	22,489,126.	68	27,317,413.	
	69 Permanently restricted	18,325,811.	69	20,562,516.	
	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; column (B) must equal line 21)		44,885,753.	73	51,113,855.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		46,400,927.	74	53,586,752.	

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 VI Other Information (See page 28 of the instructions.)

	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	76	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.	77	X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a 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?	80a	X
b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a Enter direct and indirect political expenditures. See line 81 instructions.	81a	
b Did the organization file Form 1120-POL for this year?	81b	X
82a 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? <u>\$400 + 23</u>	82a	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	NONE
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	N/A
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 on line 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 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
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>N/A</u> ; section 4912 <u>N/A</u> ; section 4955 <u>N/A</u>		
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		N/A
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A
90a List the states with which a copy of this return is filed <u>N/A</u>		
b Number of employees employed in the pay period that includes March 12, 2003 (See instructions)	90b	NONE
91 The books are in care of <u>SOUTHWEST MO STATE UNIVERSITY</u> Telephone no. <u>417-836-5632</u> Located at <u>901 S NATIONAL SPRINGFIELD, MO</u> ZIP + 4 <u>65804</u>		
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 <u>92</u>	92	N/A

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

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 MISCELLANEOUS					277,702.
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	327.	14	466,075.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	148,751.	
98 Net rental income or (loss) from personal property					
99 Other Investment income			14	5,036,117.	
100 Gain or (loss) from sales of assets other than inventory			14	-2,609.	
101 Net income or (loss) from special events					48,176.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b CSV LIFE INSURANCE			14	23,508.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		327.		5,671,842.	325,878.
105 Total (add line 104, columns (B), (D), and (E))					5,998,047.

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 page 34 of the instructions.)

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 19

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (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 _____ Date _____ Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. W) P00425176

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)

Department of the Treasury
Internal Revenue Service

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.)

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

OMB No. 1545-0047

2003

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
DONALD A. CAMPBELL & COMPANY		
ONE E WACKER DR, STE 2525, CHICAGO, IL	PROF. FUND RAISER	50,188.
HAMMOND ASSOCIATES		
101 S HANLEY, THIRD FLOOR, ST LOUIS, MO	CONSULTING	56,256.
Total number of others receiving over \$50,000 for professional services	NONE	

Part III Statements About Activities (See page 2 of the instructions.) Yes No

<p>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? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)</p> <p>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.</p>	1		X
<p>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.)</p>			
<p>a Sale, exchange, or leasing of property?</p>	2a		X
<p>b Lending of money or other extension of credit?</p>	2b		X
<p>c Furnishing of goods, services, or facilities?</p>	2c		X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d		X
<p>e Transfer of any part of its income or assets?</p>	2e		X
<p>3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)</p>	3a	X	
<p>b Do you have a section 403(b) annuity plan for your employees?</p>	3b		X
<p>4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p>	4		X

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

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) 2002, (b) 2001, (c) 2000, (d) 1999, (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; 21 Value of services or facilities furnished; 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.

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) **NOT APPLICABLE**

	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

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
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	9,314,531.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	9,314,531.
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			615,727.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	153,932.
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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total	
45	Lobbying nontaxable amount	615,727.	567,546.	656,657.	473,048.	2,312,978.
46	Lobbying ceiling amount (150% of line 45(e))					3,469,467.
47	Total lobbying expenditures	NONE	NONE	NONE	NONE	NONE
48	Grassroots nontaxable amount	153,932.	141,887.	164,164.	118,262.	578,245.
49	Grassroots ceiling amount (150% of line 48(e))					867,368.
50	Grassroots lobbying expenditures	NONE	NONE	NONE	NONE	NONE

Part VI-B Lobbying Activity by Nonelecting Public Charities

(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			
l 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 - EXCLUDED CONTRIBUTIONS

DESCRIPTION

AMOUNT

-----	-----
OPT AUCTION	96,235.
ALL SPORTS AUCTION	133,544.
BARRY HINSON GOLF TOURNEY	
LADY BEARS GOLF TOURNEY	

TOTAL	<u>229,779.</u>

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
OPT AUCTION	6,436.	3,087.	3,349.
ALL SPORTS AUCTION	24,800.	51,232.	-26,432.
BARRY HINSON GOLF TOURNEY	96,799.	36,186.	60,613.
LADY BEARS GOLF TOURNEY	29,020.	18,374.	10,646.
TOTALS	157,055.	108,879.	48,176.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
CAPITAL PROJECTS - SMSU	1,738,241.	1,738,241.		
INSTITUTIONAL EXPENSES - SMSU	305,939.		305,939.	
STUDENT SERVICES - SMSU	1,986,577.	1,986,577.		
INSTR. & ACADEMIC PROGRAM-SMSU	2,318,387.	2,318,387.		
FUNDRAISING	611,170.			611,170.
COSTS OF DIRECT BENEFITS TO DONORS	314,171.	314,171.		
UNCOLLECTIBLE PLEDGES REC.	189,103.	189,103.		
TOTALS	7,463,588.	6,546,479.	305,939.	611,170.

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
1) ATTRACT AND GENERATE PRIVATE FUNDS FOR THE UNIVERSITY ALLOWING IT TO ACHIEVE GOALS NOT ORDINARILY POSSIBLE THROUGH STATE OR OTHER SOURCES.	1,139,308.	7,685,787.
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.		
TOTAL	1,139,308.	7,685,787.

FORM 990, PART IV - OTHER NOTES AND LOANS RECEIVABLE

BORROWER: TENANT

BEGINNING BALANCE DUE	10,298.
ENDING BALANCE DUE	4,681.

BORROWER: MISCELLANEOUS OTHER

BEGINNING BALANCE DUE	5,105.
ENDING BALANCE DUE	1,577.

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE	15,403.
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TOTAL ENDING OTHER NOTES AND LOANS RECEIVABLES	6,258.
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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	1,266,902.	1,629,956.
REALTY INVESTORS INC	468,126.	234,841.
SPRINGFIELD TRUST CO-EQUITIES	3,350,040.	3,345,383.
BOND FUND	1,184,654.	1,194,332.
INTERNATIONAL FUND	1,364,561.	1,992,175.
RORER ASSET MGT - EQUITIES	1,746,652.	1,943,282.
TRUST CO OF OZARKS - EQUITIES	1,295,675.	1,270,585.
FUNDS HELD IN TRUST	1,093,736.	1,105,177.
RORER ASSET MGT-BALANCED FUND	263,116.	235,667.
CS-VANGUARD VALUE	1,763,307.	2,132,276.
CS-DEA US 4-10 VALUE	1,428,667.	1,793,903.
CS-MSDW INST. INTNAT'L SMALL C	1,943,434.	2,053,774.
CS-SSGA EMERGING MARKETS	1,707,397.	2,253,882.
WESTRIDGE CAPITAL MANAGMENT	1,721,165.	
PIMCO	1,935,750.	2,366,779.
HARRIS AURORA	1,108,542.	1,470,073.
SCUDDER RREEF REAL ESTATE	1,195,487.	1,632,291.
AXA. ROSENBERG U.S. SMALL CAP	1,309,481.	
LOTSOFF CAPITAL MGMT FUND	1,472,089.	1,572,458.
CADOGAN ALTERNATIVE STRATEGIES	1,000,000.	1,346,018.
VANGUARD MID CAP INDEX	594,637.	759,730.
VANGUARD 500 INDEX ADMIRAL		3,233,076.
LAUDUS U.S. SMALL CAP		1,611,487.
TOTALS	----- 29,216,918. -----	----- 35,180,645. -----

FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
CSV LIFE INS POLICIES	363,792.	427,029.
TOTALS	----- 363,792. -----	----- 427,029. -----

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
PROPERTY RECEIVED & HELD FOR RESALE	779,725.	921,396.
TOTALS	<u>779,725.</u>	<u>921,396.</u>

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

LENDER: OFFICE BUILDING REVENUE BONDS SERIES 91B
ORIGINAL AMOUNT: 900,000.
INTEREST RATE: 3.500000
DATE OF NOTE: 06/28/1991
MATURITY DATE: 04/01/2006
REPAYMENT TERMS: MONTHLY PAYMENTS \$20,000 OF PRINCIPAL AND INTEREST
SECURITY PROVIDED: DEED OF TRUST ON ALUMNI CENTER
PURPOSE OF LOAN: PURCHASE OF ALUMNI CENTER

BEGINNING BALANCE DUE	680,000.
ENDING BALANCE DUE	440,000.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	680,000.
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TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	440,000.
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FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
FUNDS MANAGED FOR SMSU	199,762.	199,762.
ANNUITY OBLIGATIONS	562,665.	567,544.
PLEDGES PAYABLE		945,669.
TOTALS	762,427.	1,712,975.

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.	-587,894.
CHANGE IN VALUE OF SPLIT- INTEREST AGREEMENTS IS NETTED WITH REVENUES ON FORM 990 AND IS LISTED WITH EXPENSES ON THE AUDITED FINANCIAL STATEMENTS.	-14,862.
SPECIAL EVENTS EXPENSES ARE NETTED WITH INCOME ON FORM 990 BUT ARE INCL. WITH FUNDRAISING EXPENSE ON THE FINANCIAL STMT.	-108,879.

TOTAL	<u><u>-711,635.</u></u>

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.	587,894.
CHANGE IN VALUE OF SPLIT- INTEREST AGREEMENTS IS NETTED WITH REVENUES ON FORM 990 AND IS LISTED WITH EXPENSES ON THE AUDITED FINANCIAL STATEMENTS.	14,862.
SPECIAL EVENTS EXPENSES ARE NETTED WITH INCOME ON FORM 990 BUT ARE INCL. WITH FUNDRAISING EXPENSE ON THE FINANCIAL STMT.	108,879.

TOTAL	<u>711,635.</u>

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MR. TOM BLACK 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. GREGORY P. ONSTOT 901 S NATIONAL SPRINGFIELD, MO 65804	EXEC DIRECTOR PART-TIME	NONE	NONE	NONE
MR. JAMES R. CRAIG 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. AL R. ELLISON 901 S NATIONAL SPRINGFIELD, MO 65804	PRESIDENT PART-TIME	NONE	NONE	NONE
MR. JAMES P. FERGUSON 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
DR. JOHN H. KEISER SMSU PRESIDENT 901 S NATIONAL SPRINGFIELD, MO 65804	EX OFFICIO PART-TIME	NONE	NONE	NONE
MR. FRED M MCQUEARY 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. T. EDWARD PINEGAR, JR. 901 S NATIONAL	VICE PRESIDENT PART-TIME	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SPRINGFIELD, MO 65804				
MS. CINDY R. BUSBY 901 S NATIONAL SPRINGFIELD, MO 65804	ASSIS SECRETARY PART-TIME	NONE	NONE	NONE
MR. WILLIAM H. DARR SMSU BOARD OF GOVERNORS 901 S NATIONAL SPRINGFIELD, MO 65804	EX OFFICIO PART-TIME	NONE	NONE	NONE
MR. ROBERT M. GARST 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. THOMAS G. STRONG 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
DR. BERNICE S. WARREN 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. W. WAYNE BISCHLER 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. GREGORY L. CURL 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. CHRISTOPHER T. FULDNER	DIRECTOR PART-TIME	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
901 S NATIONAL SPRINGFIELD, MO 65804				
MR. JAY R. PADGETT 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. RICHARD A. SEAGRAVE, JR., M.D. 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. KENT KAY 901 S NATIONAL SPRINGFIELD, MO 65804	TREASURER PART-TIME	NONE	NONE	NONE
MS. NILA B HAYES 901 S NATIONAL SPRINGFIELD, MO 65804	ASSIS TREASURER PART-TIME	NONE	NONE	NONE
MS. JUDITH A. SMITH 901 S NATIONAL SPRINGFIELD, MO 65804	SECRETARY PART-TIME	NONE	NONE	NONE
MS. PAT L. SECHLER 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE
MR. JOSEPH W. TURNER 901 S NATIONAL SPRINGFIELD, MO 65804	DIRECTOR PART-TIME	NONE	NONE	NONE

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

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
		NONE	NONE	NONE
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.
101	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 3A

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

FEDERAL FOOTNOTES

SOUTHWEST MISSOURI STATE UNIVERSITY FOUNDATION, INC
 #43-1234200
 ATTACHMENT TO 990
 PART IV - LINE 57
 06/30/04

DESCRIPTION	06/30/03	ADD/DEL	ACC DEPR	06/30/04
ALUMNI CENTER:				
EQUIPMENT	\$ 63,271	\$	\$ 61,767	\$ 63,271
BUILDINGS	2,475,614		1,352,503	2,475,614
REAL ESTATE-LAND	120,000			120,000
REMODELING-TENANT	235,269		223,832	235,269
REAL ESTATE-RICHARDS	220,001		8,711	220,001
	<u>\$ 3,114,115</u>	<u>\$ NONE</u>	<u>\$ 1,646,813</u>	<u>\$ 3,114,155</u>

FEDERAL FOOTNOTES

SOUTHWEST MISSOURI STATE UNIVERSITY FOUNDATION, INC
#43-1234200
ATTACHMENT TO 990
PART VI OTHER INFORMATION, LINE 82A
06/30/2004

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.