

**Return of Organization Exempt from Income Tax**

**2002**

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

Open to Public Inspection

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 2002 calendar year, or tax year beginning Jul 1, 2002, and ending Jun 30, 2003

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C** Name of organization: **MARSHALL UNIVERSITY FOUNDATION INC**  
 Number street (or P O box if mail is not delivered to street addr) Room/suite  
**400 HAL GREER BOULEVARD 323**  
 City town or country State ZIP code + 4  
**HUNTINGTON WV 25755**

**D** Employer identification number: **55-6011111**

**E** Telephone number: **(304) 696-2826**

**F** Accounting method:  Cash  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

**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?  Yes  No  
 (If No attach a list See instructions)  
**H (d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4-digit GEN: \_\_\_\_\_

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

**G** Web site: \_\_\_\_\_

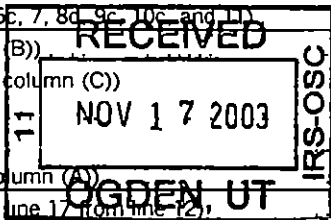
**J** Organization type (check only one):  501(c) 3 (insert no)  4947(a)(1) or  527

**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.

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: **43,581,910**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See instructions)

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	9,449,135		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ <u>9,085,045</u> noncash \$ <u>364,090</u> )	1d		9,449,135	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		51,615	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
5	Dividends and interest from securities	5		2,170,091	
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe _____)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities	31,897,423	8a	
b	Less cost or other basis and sales expenses		33,236,940	8b	
c	Gain or (loss) (attach schedule) See L-8 Stmt		-1,339,517	8c	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	-1,339,517
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	13,646		
b	Less cost of goods sold	10b	988		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		12,658	
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		10,343,982	
13	Program services (from line 44, column (B))	13		4,438,250	
14	Management and general (from line 44, column (C))	14		1,013,923	
15	Fundraising (from line 44, column (D))	15		941,192	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		6,393,365	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		3,950,617	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		67,841,137	
20	Other changes in net assets or fund balances (attach explanation)	20		-328,399	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		71,463,355	



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**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

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 (att sch) (cash \$ _____ non cash \$ _____)	22			
23 Specific assistance to individuals (att sch)	23			
24 Benefits paid to or for members (att sch)	24			
25 Compensation of officers, directors, etc	25	78,216	0	78,216
26 Other salaries and wages	26	1,046,691	574,835	287,247
27 Pension plan contributions	27	17,144	0	17,144
28 Other employee benefits	28	123,708	90,460	33,248
29 Payroll taxes	29	24,520	17,654	6,866
30 Professional fundraising fees	30			
31 Accounting fees	31	5,657	15	5,642
32 Legal fees	32	56,844	106	56,188
33 Supplies	33	43,064	17,199	9,995
34 Telephone	34	24,291	9,843	6,448
35 Postage and shipping	35	40,085	12,279	5,309
36 Occupancy	36			
37 Equipment rental and maintenance	37	510,584	426,932	21,871
38 Printing and publications	38	176,471	102,967	7,766
39 Travel	39	264,879	205,968	5,594
40 Conferences, conventions, and meetings	40	89,402	73,895	8,369
41 Interest	41	65,628	25,984	39,644
42 Depreciation, depletion, etc (attach schedule)	42	50,349	0	50,349
43 Other expenses not covered above (itemize)				
a ADVERTISING	43a	47,563	24,771	335
b REFUNDS	43b	11,489	11,439	50
c CONSULTING	43c	49,883	0	49,883
d HOSPITALITY	43d	330,855	134,895	8
e See Other Expenses Stmt	43e	3,336,042	2,709,008	323,751
44 Total functional expenses (add lines 22-43) Organizations completing columns (B) - (D), carry these totals to lines 13-15	44	6,393,365	4,438,250	1,013,923

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**

What is the organization's primary exempt purpose? <u>SUPPORT TO MARSHALL UNIVERSITY</u> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
a <u>SUPPORT TO VARIOUS MARSHALL UNIVERSITY DEPARTMENTS, FACULTY AND STUDENTS</u>  (Grants and allocations \$ 0 )	4,438,250
b _____  (Grants and allocations \$ _____ )	
c _____  (Grants and allocations \$ _____ )	
d _____  (Grants and allocations \$ _____ )	
e Other program services (Grants and allocations \$ _____ )	
f Total of Program Service Expenses (should equal line 44, column (B), program services)	4,438,250

**Part IV Balance Sheets** (See Instructions)

Note		(A)		(B)			
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year			
ASSETS	45	Cash – non interest bearing		1,288,905	45	2,350,274	
	46	Savings and temporary cash investments		1,880,373	46	7,138,279	
	47a	Accounts receivable	47a				
		b Less allowance for doubtful accounts	47b		47c		
	48a	Pledges receivable	48a	6,318,104			
		b Less allowance for doubtful accounts	48b	189,978	4,756,711	48c	6,128,126
	49	Grants receivable			49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50		
	51a	Other notes & loans receivable (attach sch)	51a	1,077,456			
		b Less allowance for doubtful accounts	51b		1,167,658	51c	1,077,456
	52	Inventories for sale or use			52		
	53	Prepaid expenses and deferred charges			53		
	54	Investments – securities (attach schedule)	L-54 Stmt	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	55,843,908	54	52,245,970
	55a	Investments – land, buildings, & equipment basis	55a				
		b Less accumulated depreciation (attach schedule)	55b			55c	
56	Investments – other (attach schedule)	L-56 Stmt		986,352	56	726,936	
57a	Land, buildings, and equipment basis	57a	1,789,837				
	b Less accumulated depreciation (attach schedule)	L-57 Stmt	57b	393,432	1,419,023	57c	1,396,405
58	Other assets (describe ▶ See Line 58 Stmt )		2,262,651	58	2,160,182		
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)		69,605,581	59	73,223,628		
LIABILITIES	60	Accounts payable and accrued expenses		267,851	60	253,150	
	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)		1,144,356	64b	979,565	
	65	Other liabilities (describe ▶ See Line 65 Stmt )		352,237	65	527,558	
66	<b>Total liabilities</b> (add lines 60 through 65)		1,764,444	66	1,760,273		
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		12,585,095	67	13,456,265	
	68	Temporarily restricted		16,374,936	68	17,638,699	
	69	Permanently restricted		38,881,106	69	40,368,391	
	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	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		67,841,137	73	71,463,355	
	74	<b>Total liabilities and net assets/fund balances</b> (add lines 66 and 73)		69,605,581	74	73,223,628	

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.

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions)		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	Total expenses and losses per audited financial statements
	10,501,766	a	6,879,548
b	Amounts included on line a but not on line 12, Form 990	b	Amounts included on line a but not on line 17, Form 990
(1)	Net unrealized gains on investments \$	(1)	Donated services and use of facilities \$ 485,195
(2)	Donated services and use of facilities \$ 485,195	(2)	Prior year adjustments reported on line 20, Form 990 \$
(3)	Recoveries of prior year grants \$	(3)	Losses reported on line 20, Form 990 \$
(4)	Other (specify) COGS 988 \$ 988	(4)	Other (specify) COGS 988 \$ 988
	Add amounts on lines (1) through (4)		Add amounts on lines (1) through (4)
	486,183		486,183
c	Line a minus line b	c	Line a minus line b
	10,015,583		6,393,365
d	Amounts included on line 12, Form 990 but not on line a:	d	Amounts included on line 17, Form 990 but not on line a:
(1)	Investment expenses not included on line 6b, Form 990 \$	(1)	Investment expenses not included on line 6b, Form 990 \$
(2)	Other (specify) UNREALIZED LOSS ON INVESTMENTS \$ 328,399	(2)	Other (specify) \$
	Add amounts on lines (1) and (2)		Add amounts on lines (1) and (2)
	328,399		
e	Total revenue per line 12, Form 990 (line c plus line d)	e	Total expenses per line 17, Form 990 (line c plus line d)
	10,343,982		6,393,365

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see instructions)

(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 and deferred compensation	(E) Expense account and other allowances
STEVEN HATTEN HUNTINGTON, WV	BOD MEMBER	0	0	0
VINCENT G MANZI HUNTINGTON, WV	PRES	0	0	0
ANN SPEER HUNTINGTON, WV	BOD MEMBER	0	0	0
B C MCGINNIS, III HUNTINGTON, WV	BOD MEMBER	0	0	0
EARLEEN AGEE HUNTINGTON, WV	SEC	0	0	0
See List of Officers, Etc. Statement		78,216	18,213	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 instructions

**Part VI Other Information** (See 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		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
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
78b	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
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? b If 'Yes,' enter the name of the organization ▶ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		X
81a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0
81b	b Did the organization file Form 1120-POL for this year?		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?	X	
82b	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	485,195
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		
85b	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		
85c	c Dues, assessments, and similar amounts from members	85c	
85d	d Section 162(e) lobbying and political expenditures	85d	
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
85h	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	
86a	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	
86b	b Gross receipts, included on line 12, for public use of club facilities	86b	
87a	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
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 ▶ 0, section 4912 ▶ 0, section 4955 ▶ 0		
89b	b 501(c)(3) and 501(c)(4) organizations 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		0
	d Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed ▶ WEST VIRGINIA		
90b	b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	8
91	The books are in care of ▶ SANDRA BARNES-WILMOTH Telephone number ▶ (304) 696-2826 Located at ▶ 400 HAL GREER BOULEVARD, ROOM 321 HUNTINGTON WV ZIP + 4 ▶ 25755		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax exempt interest received or accrued during the tax year	92	<input type="checkbox"/>

**Part VII Analysis of Income-Producing Activities** (See 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 RENT INCOME			16	51,615	
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	2,170,091	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-1,667,916	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory	421000	1,160	3	11,498	
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		1,160		565,288	
105 Total (add line 104, columns (B), (D), and (E))					566,448

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 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)

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See instructions) N/A

(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 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.

Date 11/14/03

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Organization Exempt Under  
Section 501(c)(3)**

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**2002**

Department of the Treasury  
Internal Revenue Service

Supplementary Information — (See separate instructions)

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

Name of the organization

MARSHALL UNIVERSITY FOUNDATION INC

Employer identification number

55-6011111

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See 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 and 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 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
DELL COMPUTER CORP PO BOX 371964, PITTSBURGH, PA 15250-7964	COMPUTERS	81,717
MARSHALL UNIVERSITY BOOKSTORE/FOLLETT MEMORIAL STUDENT CENTER, HUNTINGTON, WV 25701	SUPPLIES	55,108
PHILIPS 540 ALDER DRIVE, MILPITAS, CA 95035	MEDICAL EQUIPMENT	235,608
SODEXHO CAMPUS SERVICES, MARSHALL UNIV, HUNTINGTON, WV 25755	CATERING SERVICES	123,171
STEPTOE & JOHNSON PO BOX 1616, MORGANTOWN, WV 26507-1616	LEGAL SERVICES	64,542

Total number of others receiving over \$50,000 for professional services ▶

5

**Part III Statements About Activities** (See 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 a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities <b>▶ \$</b> _____ (Must equal amounts on line 38, Part VI-A, or line 1 of 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	
<b>Note</b> 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		

**Part IV Reason for Non-Private Foundation Status** (See 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 instructions )

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See 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

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	8,178,513	7,116,804	11,177,197	8,338,513	34,811,027
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
<b>18</b> 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	4,322,176	4,586,844	6,959,405	3,316,438	19,184,863
<b>19</b> Net income from unrelated business activities not included in line 18	11,872	12,039	19,872	36,190	79,973
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
<b>23</b> Total of lines 15 through 22	12,512,561	11,715,687	18,156,474	11,691,141	54,075,863
<b>24</b> Line 23 minus line 17	12,512,561	11,715,687	18,156,474	11,691,141	54,075,863
<b>25</b> Enter 1% of line 23	125,126	117,157	181,565	116,911	

**26 Organizations described on lines 10 or 11** a Enter 2% of amount in column (e), line 24

<b>26a</b>	1,081,517
<b>26b</b>	3,812,100
<b>26c</b>	54,075,863
<b>26d</b>	23,076,936
<b>26e</b>	30,998,927
<b>26f</b>	57.32 %

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.

c Total support for section 509(a)(1) test. Enter line 24, column (e)

d Add Amounts from column (e) for lines

18	19,184,863	19	79,973
22		26b	3,812,100

e Public support (line 26c minus line 26d total)

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))**

**27 Organizations described on line 12:**

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year

(2001) \_\_\_\_\_ (2000) \_\_\_\_\_ (1999) \_\_\_\_\_ (1998) \_\_\_\_\_

b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year

(2001) \_\_\_\_\_ (2000) \_\_\_\_\_ (1999) \_\_\_\_\_ (1998) \_\_\_\_\_

c Add Amounts from column (e) for lines

15	16
17	21
20	

d Add Line 27a total \_\_\_\_\_ and line 27b total \_\_\_\_\_

e Public support (line 27c total minus line 27d total)

f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) **27f** \_\_\_\_\_

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** **27g** \_\_\_\_\_ %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** **27h** \_\_\_\_\_ %

**28 Unusual Grants** For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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

N/A

	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 instructions )  
 (To be completed ONLY by an eligible organization that filed Form 5768)

N/A

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

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
(The term 'expenditures' means amounts paid or incurred )															
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>													
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>													
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>													
<b>39</b>	Other exempt purpose expenditures	<b>39</b>													
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>													
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table --														
	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><b>If the amount on line 40 is --</b></td> <td style="width: 50%;"><b>The lobbying nontaxable amount is --</b></td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	<b>If the amount on line 40 is --</b>	<b>The lobbying nontaxable amount is --</b>	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	<b>41</b>	
<b>If the amount on line 40 is --</b>	<b>The lobbying nontaxable amount is --</b>														
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														
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>													
<b>43</b>	Subtract line 42 from line 36 Enter 0 if line 42 is more than line 36	<b>43</b>													
<b>44</b>	Subtract line 41 from line 38 Enter 0 if line 41 is more than line 38	<b>44</b>													
<b>Caution</b> 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 )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots non taxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities** (See instructions )  
 (For reporting only by organizations that did not complete Part VI-A)

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

- 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 )

Yes	No	Amount
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	

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



▶ Attach to return

Name MARSHALL UNIVERSITY FOUNDATION INC	Employer Identification Number 55-6011111
--	--

**Part I, Line 8, Column (A) Securities**

**Public Securities**

Description	Gross Sales Price	Basis	
		Cost	
Publicly Traded Securities		Selling Expenses	
		Basis	

**Nonpublic Securities**

Description	Date Acquired and Method	Date Sold and to Whom	Gross Sales Price	Cost, other basis or FMV when donated (State which on top)
-----	-----	-----		-----
-----	-----	-----		-----
-----	-----	-----		-----
-----	-----	-----		-----
<b>Total Securities</b>			31,897,423	33,236,940

<b>Gain or (Loss) from Sale of Securities</b>	-1,339,517
---	------------

**Part I, Line 8, Column (B) Other Assets**

Description	Date Acquired and Method	Date Sold and to Whom	Gross Sales Price	Cost, other basis or FMV when donated	
				Cost	
-----	-----	-----		Depreciation	
-----	-----	-----		Basis	
-----	-----	-----		Donation FMV	
-----	-----	-----		Cost	
-----	-----	-----		Depreciation	
-----	-----	-----		Basis	
-----	-----	-----		Donation FMV	
-----	-----	-----		Cost	
-----	-----	-----		Depreciation	
-----	-----	-----		Basis	
-----	-----	-----		Donation FMV	

<b>Total Other Assets</b>				
---------------------------	--	--	--	--

<b>Gain or (Loss) from Sale of Other Assets</b>	
---	--

**Miscellaneous Statement**

FORM 990, PAGE 3 PART IV, LINE 51 OTHER NOTES & RECEIVABLES	BEGINNING OF YEAR	END OF YEAR
LINE 51 - OTHER NOTES		
CASAGRANDE, INC	741	0
ATHLETICS VIDEO BOARD	542,775	462,985
THOMPSON/SAMS PROPERTY	624,142	614,471
Total	<u>1,167,658</u>	<u>1,077,456</u>

Form 990, Page 2, Part II, Line 43

**Other Expenses Stmt**

Other expenses not covered above (itemize)	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
SPECIAL RECOGNITION	166,126	129,576	2,032	34,518
INSURANCE	67,629	7,152	28,556	31,921
PROFESSIONAL FEES	495,546	310,209	26,314	159,023
EDUC/CLASS EXPENSE	2,054,964	1,994,627	75	60,262
UTILITIES	5,491	0	0	5,491
MISCELLANEOUS	27,439	26,749	0	690
TAXES/ROYALTIES, ETS	81,088	0	78,333	2,755
BANK CHARGES	253,909	69,764	182,145	2,000
BAD DEBT EXPENSE	134,086	134,086	0	0
SUBSCRIPTIONS AND DUES	43,754	32,014	5,999	5,741
PARKING	6,010	4,831	297	882
<b>Total</b>	<b><u>3,336,042</u></b>	<b><u>2,709,008</u></b>	<b><u>323,751</u></b>	<b><u>303,283</u></b>

Form 990, Page 3, Part IV, Line 54

**Investments - Securities Statement**

Line 54 – Investments - Securities*	Beginning of Year	End of Year
CORPORATE STOCKS (MARKET VALUE)	32,431,424	21,289,429
U S GOVERNMENT OBLIGATIONS (MARKET VALUE)	23,218,695	28,529,099
OTHER	193,789	2,427,442
<b>Total</b>	<b><u>55,843,908</u></b>	<b><u>52,245,970</u></b>

Form 990, Page 3, Part IV, Line 56

**Investments - Other Statement**

Line 56 – Investments - Other:	Beginning of Year	End of Year
NET INVESTMENT IN DIRECT FINANCING LEASES	986,352	726,936
<b>Total</b>	<b><u>986,352</u></b>	<b><u>726,936</u></b>

Form 990, Page 3, Part IV, Lines 57a &amp; 57b

**Land, Buildings and Equipment Statement**

	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LAND	442,149	0	442,149
BUILDINGS	1,034,275	174,020	860,255
OFFICE EQUIPMENT	313,413	219,412	94,001
<b>Total</b>	<b><u>1,789,837</u></b>	<b><u>393,432</u></b>	<b><u>1,396,405</u></b>

Form 990, Page 3, Part IV, Line 58

**Other Assets Statement**

<b>Line 58 - Other Assets:</b>	<b>Beginning of Year</b>	<b>End of Year</b>
INTEREST RECEIVABLE	211,653	124,510
CASH SURRENDER VALUE - LIFE INSURANCE	130,132	146,867
CONTRIBUTIONS RECEIVABLE FROM REMAINDER TRUSTS	820,339	884,676
ASSETS HELD IN CHARITABLE REMAINDER TRUST	351,727	355,579
PROPERTY ON OPERATING LEASE	748,800	648,550
<b>Total</b>	<b>2,262,651</b>	<b>2,160,182</b>

Form 990, Page 3, Part IV, Line 65

**Other Liabilities Statement**

<b>Line 65 - Other Liabilities:</b>	<b>Beginning of Year</b>	<b>End of Year</b>
ACCRUED INTEREST PAYABLE	1,782	0
ANNUITY PAYMENT LIABILITY	350,455	527,558
<b>Total</b>	<b>352,237</b>	<b>527,558</b>

Form 990, Page 4, Part V

**List of Officers, Etc. Statement**

<b>(A)</b> Name and address	<b>(B)</b> Title and average hours per week devoted to position	<b>(C)</b> Compensation (if not paid, enter -0-)	<b>(D)</b> Contributions to employee benefit plans and deferred compensation	<b>(E)</b> Expense account and other allowances
SHERRY ASBURY EXECUTIVE DIRECTOR	EXEC DIR 40	78,216	18,213	0
WILLIAM B "BART" ABDEWS 11 HUNTINGTON, WV	BOD MEMBER 0	0	0	0
WILLIAM C CAMPBELL HUNTINGTON, WV	BOD MEMBER 0	0	0	0
PHILIP E CLINE HUNTINGTON, WV	TREASURER 0	0	0	0
MONICA J WILTON HATFIELD HUNTINGTON, WV	2ND VP 0	0	0	0
EARL W HEINER,, JR HUNTINGTON, WV	BOD MEMBER 0	0	0	0
PHILIP E CLINE HUNTINGTON, WV	BOD MEMBER 0	0	0	0

Form 990, Page 4, Part V  
List of Officers, Etc Statement

Continued

(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 and deferred compensation	(E) Expense account and other allowances
CHARLES C LANHAM HUNTINGTON, WV	BOD MEMBER 0	0	0	0
A MICHAEL PERRY HUNTINGTON, WV	BOD MEMBER 0	0	0	0
MARSHALL T REYNOLDS HUNTINGTON, WV	BOD MEMBER 0	0	0	0
JOSEPH B TOUMA HUNTINGTON, WV	BOD MEMBER 0	0	0	0
ARTHUR WEISBERG HUNTINGTON, WV	BOD MEMBER 0	0	0	0
JOHN JAY WHITE HUNTINGTON, WV	1ST V/P 0	0	0	0
NANCY FRANCIS HUNTINGTON, WV	BOD MEMBER 0	0	0	0
NOEL COPEN HUNTINGTON, WV	BOD MEMBER 0	0	0	0
STERLING HALL HUNTINGTON, WV	BOD MEMBER 0	0	0	0
STEVE DAY HUNTINGTON, WV	BOD MEMBER 0	0	0	0

Total

78,21618,2130

**Supporting Statement of.**

Form 990 p 1/Line 20

Description	Amount
UNREALIZED LOSSES	-328,399
Total	<u>-328,399</u>

**Supporting Statement of.**

Form 990 p 2/Line 42 column (C)

Description	Amount
BUILDINGS	21,281
OFFICE EQUIP	29,068
Total	<u>50,349</u>

**Miscellaneous Statement**

FORM 990 PAGE 3 LINE 64A & B	BEGINNING OF YEAR	END OF YEAR
FATH UNITED METHODIST CHURCH	40,030	0
DANIEL E WAGNOR TRUST	354,326	329,815
BANK ONE	750,000	649,750
Total	<u>1,144,356</u>	<u>979,565</u>

MARSHALL UNIVERSITY FOUNDATION, INC.  
55-6011111

FORM 990, SCHEDULE A, PAGE 2

PART III, LINE 4: How Organization Determines Who Qualifies for Payments

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Most disbursements in furtherance of the Foundation's exempt programs are made directly to or for Marshall University (an instrumentality of the State of West Virginia) for expenses incurred directly in the active conduct of the activities constituting the exempt purpose or function for which the institution is organized and operated. Otherwise disbursements are made in accordance with procedures or subject to conditions established by the Foundation's Board of Directors designed to insure that individuals and organizations receiving disbursements from the Organization in furtherance of its exempt programs are adequately investigated to insure that they are qualifying recipients. Students receiving scholarships and fellowships are judged worthy by the University's assessments on the basis of academic achievement, financial need, and other similar standards.