

Form **990**

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2005

Open to Public Inspection

A For the 2005 calendar year, or tax year beginning 07-01-2005 and ending 06-30-2006

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
COMMUNITY FOUNDATION OF THE OZARKS INC

Number and street (or P O box if mail is not delivered to street address) Room/suite
425 E TRAFFICWAY

City or town, state or country, and ZIP + 4
SPRINGFIELD, MO 65806

D Employer identification number
23-7290968

E Telephone number
(417) 864-6199

F Accounting method ☐ Cash ☒ Accrual
☐ Other (specify) ☐

G Web site: ☐ CFOZARKS.ORG

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. ☐ 34,554,512

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)											
Revenue	1	Contributions, gifts, grants, and similar amounts received									
	a	Direct public support				1a	19,482,540				
	b	Indirect public support				1b					
	c	Government contributions (grants)				1c					
	d	Total (add lines 1a through 1c) (cash \$ 14,785,210 noncash \$ 4,697,330)						1d	19,482,540		
	2	Program service revenue including government fees and contracts (from Part VII, line 93) .						2			
	3	Membership dues and assessments						3			
	4	Interest on savings and temporary cash investments						4			
	5	Dividends and interest from securities						5	2,077,267		
	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		(B) Other					
Expenses	b	Less cost or other basis and sales expenses		13,405,103	8a						
	c	Gain or (loss) (attach schedule)		☒ 3,319,926	8c						
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))						8d	3,319,926		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ☐						9c			
	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)									
	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			
Net Assets	11	Other revenue (from Part VII, line 103)						11	-410,398		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)						12	24,469,335		
	13	Program services (from line 44, column (B))						13	6,420,919		
	14	Management and general (from line 44, column (C))						14	1,611,967		
	15	Fundraising (from line 44, column (D))						15	38,516		
	16	Payments to affiliates (attach schedule)						16			
	17	Total expenses (add lines 16 and 44, column (A))						17	8,071,402		
	18	Excess or (deficit) for the year (subtract line 17 from line 12)						18	16,397,933		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))						19	78,294,170		
	20	Other changes in net assets or fund balances (attach explanation) ☒						20	-1,613,375		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)						21	93,078,728		

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2005)

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 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 \$ <u>6,420,919</u> noncash \$ <u> </u>) If this amount includes foreign grants, check here  ☐					
	22	6,420,919	6,420,919			
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	184,151		145,635	38,516
26	Other salaries and wages	26	314,035		314,035	
27	Pension plan contributions	27	11,675		11,675	
28	Other employee benefits	28	39,805		39,805	
29	Payroll taxes	29	37,555		37,555	
30	Professional fundraising fees	30				
31	Accounting fees	31	19,120		19,120	
32	Legal fees	32	15,809		15,809	
33	Supplies	33	20,541		20,541	
34	Telephone	34	9,190		9,190	
35	Postage and shipping	35	14,670		14,670	
36	Occupancy	36	66,522		66,522	
37	Equipment rental and maintenance	37	20,424		20,424	
38	Printing and publications	38	50,842		50,842	
39	Travel	39	1,641		1,641	
40	Conferences, conventions, and meetings	40	16,385		16,385	
41	Interest	41	28,705		28,705	
42	Depreciation, depletion, etc (attach schedule)	42				
43	Other expenses not covered above (itemize)					
a	See Additional Data Table	43a				
b		43b				
c		43c				
d		43d				
e		43e				
f		43f				
g		43g				
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	8,071,402	6,420,919	1,611,967	38,516

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 the instructions.)

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.

What is the organization's primary exempt purpose? ► THE FOUNDATION RECEIVES, DISTRIBUTES AND ADMINISTERS FUNDS FOR CHARITABLE AND PUBLIC PURPOSES, PRIMARILY PERMANENT ENDOWED FUNDS FOR THE SPRINGFIELD METROPOLITAN AREA, REGIONAL COMMUNITY FOUNDATIONS AND THE SOUTHERN TIER OF MISSOURI	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
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) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a FOUNDATION RECEIVES, DISTRIBUTES AND ADMINISTERS FUNDS FOR CHARITABLE ANDPUBLIC PURPOSES, PRIMARILY PERMANENT ENDOWED FUNDS FOR THE SPRINGFIELD METROPOLITAN AREA, REGIONAL COMMUNITY FOUNDATIONS AND THE SOUTHERN TIER OF MISSOURI	
(Grants and allocations \$ 6,420,919) If this amount includes foreign grants, check here ► ☐	6,420,919
b	
(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
c	
(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) . . . ►	6,420,919

Part IV Balance Sheets (See 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	2,853,022	46	3,474,163	
	47a	Accounts receivable	47a		47c	
	b	Less allowance for doubtful accounts	47b			
	48a	Pledges receivable	48a	606,903	48c	
	b	Less allowance for doubtful accounts	48b			
	49	Grants receivable		49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
	51a	Other notes and loans receivable (attach schedule)	51a	13,951	51c	
	b	Less allowance for doubtful accounts	51b			
	52	Inventories for sale or use		52		
	53	Prepaid expenses and deferred charges		53		
	54	Investments—securities (attach schedule)	☒ Cost ☒ FMV	82,481,286	54	99,439,286
	55a	Investments—land, buildings, and equipment basis	55a	97,844	55c	
	b	Less accumulated depreciation (attach schedule)	55b			
	56	Investments—other (attach schedule)		56	998,107	
	57a	Land, buildings, and equipment basis	57a	1,615,859	57c	
	b	Less accumulated depreciation (attach schedule)	57b	62,909		
58	Other assets (describe)		113,931	58	1,927,200	
59	Total assets (must equal line 74) Add lines 45 through 58		86,493,728	59	108,110,404	
Liabilities	60	Accounts payable and accrued expenses	165,660	60	34,082	
	61	Grants payable	471,487	61	462,043	
	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)	400,000	64b	364,906	
	65	Other liabilities (describe)	7,162,411	65	14,170,645	
	66	Total liabilities Add lines 60 through 65		8,199,558	66	15,031,676
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted	5,684,875	67	6,774,044	
	68	Temporarily restricted	29,377,328	68	32,722,722	
	69	Permanently restricted	43,231,967	69	53,581,962	
	Organizations that do not follow SFAS 117, check here ☐ 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)		78,294,170	73	93,078,728
	74	Total liabilities and net assets / fund balances Add lines 66 and 73		86,493,728	74	108,110,404

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return <i>(See the instructions.)</i>					
a	Total revenue, gains, and other support per audited financial statements			a	26,859,665
b	Amounts included on line a but not on line 12				
1	Net unrealized gains on investments	b1			
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify) _____	b4	2,390,330		
	Add lines b1 through b4			b	2,390,330
c	Subtract line b from line a			c	24,469,335
d	Amounts included on line 12, but not on line a				
1	Investment expenses not included on line 6b	d1			
2	Other (specify) _____	d2			
	Add lines d1 and d2			d	2,390,330
e	Total revenue (line 12) Add lines c and d ▶			e	24,469,335

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
a	Total expenses and losses per audited financial statements			a	8,890,908
b	Amounts included on line a but not on line 17				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on line 20	b2			
3	Losses reported on line 20	b3			
4	Other (specify) _____	b4	819,506		
	Add lines b1 through b4			b	819,506
c	Subtract line b from line a			c	8,071,402
d	Amounts included on line 17, but not on line a :				
1	Investment expenses not included on line 6b	d1			
2	Other (specify) _____	d2			
	Add lines d1 and d2			d	
e	Total expenses (line 17) Add lines c and d ▶			e	8,071,402

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) <i>(See the instructions.)</i>				
(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 plans	(E) Expense account and other allowances
See Additional Data Table				

Part V-A		Current Officers, Directors, Trustees, and Key Employees (continued)		Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings	21			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) .	75b			No
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization	75c			No
d	Does the organization have a written conflict of interest policy?	75d	Yes		

Part V-B

Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

Part VI		Other Information (See 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			No
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			No
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a			No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b			
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79			No
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			No
b	If "Yes," enter the name of the organization ➤ _____ _____ and check whether it is ☐ exempt or ☐ nonexempt				
81a	Enter direct or indirect political expenditures (See line 81 instructions)	81a			
b	Did the organization file Form 1120-POL for this year?	81b			No

Part VI

Other Information (continued)

Yes

No

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?

82a

No

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

83a

Did the organization comply with the public inspection requirements for returns and exemption applications?

83a

Yes

b

Did the organization comply with the disclosure requirements relating to quid pro quo contributions?

83b

Yes

84a

Did the organization solicit any contributions or gifts that were not tax deductible?

84a

No

b

If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

84b

85

501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?

85a

b

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

85b

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 the prior year.

c

Dues assessments, and similar amounts from members

85c

d

Section 162(e) lobbying and political expenditures

85d

e

Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices

85e

f

Taxable amount of lobbying and political expenditures (line 85d less 85e)

85f

g

Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?

85g

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

86

501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12

86a

b

Gross receipts, included on line 12, for public use of club facilities

86b

87

501(c)(12) orgs. Enter a Gross income from members or shareholders

87a

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

No

89a

501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955

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

No

c

Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.

d

Enter Amount of tax on line 89c, above, reimbursed by the organization.

90a

List the states with which a copy of this return is filed.

b

Number of employees employed in the pay period that includes March 12, 2005 (See instructions).

90b

11

91a

The books are in care of SUSANNE GRAY Telephone no (417) 864-6199

425 E TRAFFICWAY

Located at

SPRINGFIELD, MO

ZIP + 4

65806

b

At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

91b

Yes

No

If "Yes," enter the name of the foreign country.

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c

At any time during the calendar year, did the organization maintain an office outside of the United States?

91c

No

If "Yes," enter the name of the foreign country.

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

Part VII Analysis of Income-Producing Activities (See 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						
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			14	2,077,267	
97	Net rental income or (loss) from real estate					
a	debt-financed property					
b	non debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory			18	3,319,926	
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue a OTHER INCOME					-413,042
b	MANAGEMENT INCOME					2,644
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))				5,397,193	-410,398
105	Total (add line 104, columns (B), (D), and (E))					4,986,795

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 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)
103A	MISCELLANEOUS LOSS RELATED TO EXEMPT PURPOSE

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See 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).

Please Sign Here

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.

Signature of officer

2007-04-15

Date

GARY FUNK PRESIDENT

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

JOE PAGE

Date

Check if self-employed ☐

Preparer's SSN or PTIN (See Gen Inst W)

Firm's name (or yours if self-employed), address, and ZIP + 4

WHITLOCK SELIM & KEEHN LLP
3271 E BATTLEFIELD SUITE 300
SPRINGFIELD, MO 65804

EIN

Phone no (417) 881-0145

Additional Data

Software ID:
Software Version:
EIN: 23-7290968
Name: COMMUNITY FOUNDATION OF THE OZARKS INC

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a EVENTS	43a	14,503		14,503	
b INSURANCE	43b	6,985		6,985	
c MEMBERSHIPS	43c	8,676		8,676	
d MISCELLANEOUS	43d	8,276		8,276	
e CONTRACT LABOR	43e	21,551		21,551	
f OTHER EXPENSES	43f	259,339		259,339	
g PREMIUM EXPENSE	43g	465,971		465,971	
h FINANCIAL SOFTWARE	43h	14,112		14,112	

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
GARY FUNK 1121 S WELLER SPRINGFIELD, MO 65804	PRESIDENT 40 00	105,000	5,250	7,305
SUSANNE GRAY 516 E NORMAL SPRINGFIELD, MO 65807	ASSISTANT SECRETARY 40 00	57,500	2,875	6,221
TOM PEEBLES 1949 E SUNSHINEM 410 SPRINGFIELD, MO 65804	CHAIRMAN 20 00	0	0	0
TODD PARNELL 3939 S FREMONT SPRINGFIELD, MO 65804	CHAIR-ELECT 20 00	0	0	0
RON NEVILLE 3541 E KINGSWOOD DR SPRINGFIELD, MO 65804	TREASURER 20 00	0	0	0
SALLY BAIRD 2928 NATURAL BRIDGE SPRINGFIELD, MO 65809	SECRETARY 20 00	0	0	0
JAMES ANDERSON 202 S JOHN Q HAMMONS SPRINGFIELD, MO 65806	BOARD OF DIRECTORS 2 00	0	0	0
KEVIN AUSBURN PO BOX 4306 SPRINGFIELD, MO 65808	BOARD OF DIRECTORS 2 00	0	0	0
MARGARET CAROLLA 2916 E ALPINE DR SPRINGFIELD, MO 65804	BOARD OF DIRECTORS 2 00	0	0	0
JAMES LEON COMBS 30300 STATE HWY 76 BRADLEYVILLE, MO 65614	BOARD OF DIRECTORS 2 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
JOHN COOPER 605 SHERMAN PARKWAY SPRINGFIELD, MO 65802	BOARD OF DIRECTORS 2 00	0	0	0
PATTI HOLT PO BOX 18 MONETT, MO 65708	BOARD OF DIRECTORS 2 00	0	0	0
JARRY JARED 2870 S INGRAM MIL ROAD SPRINGFIELD, MO 65804	BOARD OF DIRECTORS 2 00	0	0	0
LOU KEMP PO BOX 196 BOLIVAR, MO 64613	BOARD OF DIRECTORS 2 00	0	0	0
YOLANDA LORGE 2747 E VERONA SPRINGFIELD, MO 65804	BOARD OF DIRECTORS 2 00	0	0	0
LISA OFFICER 820 E PRIMROSE SPRINGFIELD, MO 65807	BOARD OF DIRECTORS 2 00	0	0	0
NANCY OREILLY 5538 S FARM ROAD 181 ROGERSVILLE, MO 65742	BOARD OF DIRECTORS 2 00	0	0	0
DR TOM PRATER 1257 S POST OAK SPRINGFIELD, MO 65809	BOARD OF DIRECTORS 2 00	0	0	0
MAURA TAYLOR 1379 S JONES MILL LANE SPRINGFIELD, MO 65809	BOARD OF DIRECTORS 2 00	0	0	0
ROBERT WHEELER 1000 S SECOND STREET CLINTON, MO 64735	BOARD OF DIRECTORS 2 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
SHARON WHITEHILL GRAY 105 SHERMAN WAY STE 108 SPRINGFIELD, MO 65809	BOARD OF DIRECTORS 2 00	0	0	0
MEL SAUNDERS 1720 E BRADFORD PKWY SPRINGFIELD, MO 65804	BOARD OF DIRECTORS 2 00	0	0	0
DAVID POINTER 28 COURT SQUARE GAINSVILLE, MO 65655	BOARD OF DIRECTORS 2 00	0	0	0

SCHEDULE A
(Form 990 or 990EZ)

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 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

2005

Name of the organization
COMMUNITY FOUNDATION OF THE OZARKS INC

Employer identification number
23-7290968

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 ▶				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individual 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 ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page X for instructions.)		
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services ▶		

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, include 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 1 of Part VI-B)	1	No
	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		
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 property?	2a	No
b	Lending of money or other extension of credit?	2b	No
c	Furnishing of goods, services, or facilities?	2c	No
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	No
e	Transfer of any part of its income or assets?	2e	No
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) 🗒	3a	Yes
b	Do you have a section 403(b) annuity plan for your employees?	3b	Yes
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c	No
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	No
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	No

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) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) Check the box that describes the type of supporting organization ► ☐ Type 1 ☐ Type 2 ☐ Type 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
14	☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 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.

Calendar year (or fiscal year beginning in)		(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	11,927,538	11,959,760	7,094,791	7,282,075	38,264,164
16	Membership fees received					0
17	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					0
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,270,538	1,198,051	894,118	717,930	4,080,637
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21	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					0
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					0
23	Total of lines 15 through 22	13,198,076	13,157,811	7,988,909	8,000,005	42,344,801
24	Line 23 minus line 17	13,198,076	13,157,811	7,988,909	8,000,005	42,344,801
25	Enter 1% of line 23	131,981	131,578	79,889	80,000	
26	Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24				26a	846,896
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 2001 through 2004 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts				26b	8,376,290
c	Total support for section 509(a)(1) test Enter line 24, column (e)				26c	42,344,801
d	Add Amounts from column (e) for lines	18 4,080,637	19 0		26d	12,456,927
		22	26 b 8,376,290		26e	29,887,874
e	Public support (line 26c minus line 26d total)				26f	7058 22 %
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					
	(2004)	(2003)	(2002)	(2001)		
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					
	(2004)	(2003)	(2002)	(2001)		
c	Add Amounts from column (e) for lines	15	16		27c	
		17	20	21	27d	
d	Add Line 27a total		and line 27 b total		27e	
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 2001 through 2004, 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 page 7 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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?		Yes	No
		29		
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?			
		30		
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)			
		31		
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	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?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	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?	34a		
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	34b		
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	35		

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)

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	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
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 \$500,00020% 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	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B

Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 11 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		No	
b Paid staff or management (Include compensation in expenses reported on lines c through h .)		No	
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			

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

	Yes	No
(i) Cash		No
(ii) Other assets		No
b Other transactions		
(i) Sales or exchanges of assets with a noncharitable exempt organization		No
(ii) Purchases of assets from a noncharitable exempt organization		No
(iii) Rental of facilities, equipment, or other assets		No
(iv) Reimbursement arrangements		No
(v) Loans or loan guarantees		No
(vi) Performance of services or membership or fundraising solicitations		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		No

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

[illegible]

TY 2005 Cash Grants Paid Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Class of Activity	Recipient's name	Address	Amount	Relationship
SEE ATTACHED SCHEDULE	SEE ATTACHED SCHEDULE		6,420,919	

TY 2005 Gain/Loss from Sale of Public Securities Schedule**Name:** COMMUNITY FOUNDATION OF THE OZARKS INC**EIN:** 23-7290968**Gross Sales Price:** 13,405,103**Basis:** 10,085,177**Sales Expenses:** 0**Total (net):** 3,319,926

TY 2005 Investments - Land Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
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TY 2005 Investments - Other Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Description	Book Value	Cost/FMV
LIMITED LIABILITY COMPANY MEMBERSHIP INTEREST	998,107	C

TY 2005 Investments - Securities Schedule**Name:** COMMUNITY FOUNDATION OF THE OZARKS INC**EIN:** 23-7290968

Description	Book Value	Cost/FMV
US GOVERNMENT SECURITIES	24,324	F
MUTUAL FUNDS	91,093,189	F
COMMON STOCK	213,141	F
BONDS	1,463,631	F
OTHER	6,645,001	F

TY 2005 Land etc. Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
EQUIPMENT	1,615,859	62,909	1,552,950

TY 2005 Officer Compensation Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

GARY FUNK

	Compensation	EE Benefit Plans	Expense Acct
Program Services			
Mgmt & General	70,350	6,394	2,018
Fundraising	34,650	3,149	994

SUSANNE GRAY

	Compensation	EE Benefit Plans	Expense Acct
Program Services			
Mgmt & General	38,525	5,921	174
Fundraising	18,975	2,916	85

TY 2005 Other Assets Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Description	Beginning of Year Amount	End of Year Amount
CASH SURRENDER VALUE	79,536	1,799,394
MISSOURI INCOME TAX CREDIT CERTIFICATE	34,395	127,806

TY 2005 Other Changes in Net Assets Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Description	Amount
UNREALIZED APPRECIATION IN INVESTMENTS	1,570,824
PRIOR PERIOD ADJUSTMENT	-3,184,199

TY 2005 Other Expenses Included Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Description	Amount
MANAGEMENT INCOME	819,506

TY 2005 Other Liabilities Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Description	Beginning of Year Amount	End of Year Amount
AGENCY FUNDS	7,162,411	13,531,278
ANNUITIES PAYABLE		639,367

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2005 Other Notes/Loans
Receivable Long Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC
EIN: 23-7290968

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
DONATED NOTE		255,211	13,951	1991-12	2006-01	\$2446/MO	800 00 %	UNSECURED	DONATED TO FOUNDATION		

TY 2005 Other Revenues Included Schedule

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Description	Amount
MANAGEMENT INCOME	819,506
UNREALIZED GAINS	1,570,824

TY 2005 Scholarship Award Statement

Name: COMMUNITY FOUNDATION OF THE OZARKS INC

EIN: 23-7290968

Statement: THE BYLAWS OF COMMUNITY FOUNDATION REQUIRE THE GRANTS COMMITTEE OF THE BOARD OF DIRECTORS TO REVIEW ALL PROPOSED GRANTS. IN ADDITION, ALL CHARITABLE DISBURSEMENTS ARE VOTED ON BY THE BOARD OF DIRECTORS. ORGANIZATIONS RECEIVING DISBURSEMENTS ARE SEC. 501(C)(3) ORGANIZATIONS, OR HAVE CHARITABLE PURPOSES.