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

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

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

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

C Name of organization
Oklahoma State University Foundation

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
PO Box 1749

City or town, state or country, and ZIP + 4
Stillwater, OK 74076

D Employer identification number
73-6097060

E Telephone number
(405) 385-5100

G Gross receipts $ 254,584,831

F Name and address of Principal Officer
Kirk Jewell
PO Box 1749
Stillwater, OK 74076

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

H(b) **Are all affiliates included?** ☐ Yes ☐ No
(If "No," attach a list See instructions)

H(c) Group Exemption Number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Web site: ▶ www osugiving com

K Type of organization ☑ Corporation ☐ trust ☐ association ☐ other ▶

L Year of Formation 1961 **M** State of legal domicile OK

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
UNITING DONOR AND UNIVERSITY PASSIONS AND PRIORITIES TO ACHIEVE EXCELLENCE

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5	Total number of employees (Part V, line 2a)	5	228
6	Total number of volunteers (estimate if necessary)	6	100
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-3,241

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	250,271,841	73,555,878
	9	Program service revenue (Part VIII, line 2g)	19,911,018	21,290,081
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	38,143,946	-64,728,865
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,139,434	1,178,406
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	310,466,239	31,295,500
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	45,032,032	8,800,527
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	4,220,768	7,053,078
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		351,496
	b	(Total fundraising expenses, Part IX, column (D), line 25 9,451,412)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	56,100,474	82,169,153
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	105,353,274	98,374,254
	19	Revenue less expenses Subtract line 18 from line 12	205,112,965	-67,078,754

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	846,132,380	653,733,743
	21	Total liabilities (Part X, line 26)	267,900,535	271,770,373
	22	Net assets or fund balances Subtract line 21 from line 20	578,231,845	381,963,370

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here

****** | 2010-05-17
Signature of officer | Date

Donna Koeppe VP & Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-empolyed ▶ ☐	Preparer's PTIN (See Gen Inst)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KPMG LLP 210 Park Ave Suite 2850 Oklahoma City, OK 73102			EIN ▶ Phone no ▶ (405) 239-6411

May the IRS discuss this return with the preparer shown above? (See instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission

UNITING DONOR AND UNIVERSITY PASSIONS AND PRIORITIES TO ACHIEVE EXCELLENCE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 32,842,999 including grants of $) (Revenue $)

INTERCOLLEGIATE ATHLETICS INCLUDES THE EXPENDITURES OF FUNDS DONATED FOR THE BENEFIT OF MEN'S AND WOMEN'S ATHLETIC PROGRAMS AT OKLAHOMA STATE UNIVERSITY, INCLUDING ACADEMIC ENRICHMENT FOR STUDENT ATHLETES, BUDGET SUPPORT FOR SPECIFIC TEAM SPORTS AND GENERAL BUDGET SUPPORT FOR THE INTERCOLLEGIATE ATHLETIC DEPARTMENT

4b (Code) (Expenses $ 19,512,021 including grants of $) (Revenue $ 18,374,881)

OSUF PHASE III STUDENT HOUSING LLC IS A SINGLE MEMBER LLC CREATED IN FEB 2002 FOR THE BENEFIT OF OKLAHOMA STATE UNIVERSITY FOUNDATION THE PURPOSE WAS TO FINANCE, CONSTRUCT, AND EQUIP STUDENT HOUSING FACILITIES, REMODEL CERTAIN EXISTING DORMITORIES, REFINANCE CERTAIN EXISTING BOND INDEBTEDNESS AND CONSTRUCT APPROPRIATE DINING FACILITIES ON THE UNIVERSITY CAMPUS IN STILLWATER

4c (Code) (Expenses $ 13,598,792 including grants of $) (Revenue $)

FACILITIES AND EQUIPMENT INCLUDED THE EXPENDITURE OF FUNDS DONATED FOR CAPITAL AND EQUIPMENT ON THE OKLAHOMA STATE UNIVERSITY CAMPUS INCLUDING THE REIMBURSEMENT TO OSU FOR FUNDS EXPENDED TO CONSTRUCT NEW FACILITIES, RENOVATE EXISTING FACILITIES, FURNISH FACILITIES AND PURCHASE NECESSARY CLASSROOM EQUIPMENT SUCH AS LAB EQUIPMENT AND COMPUTERS

4d Other program services (Describe in Schedule O)

(Expenses $ 19,975,260 including grants of $ 8,800,527) (Revenue $)

4e Total program service expenses $ 85,929,072 *Must equal Part IX, Line 25, column (B).*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17	Yes	
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No

Part IV Checklist of Required Schedules *(Continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35**	Yes	
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	1a	190			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	228			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? **Note:** *If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.*			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
4a	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)?			4a		No
b	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.*					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, *Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?*			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	*Organizations that may receive deductible contributions under section 170(c).*					
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of $75 or more?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	2			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	Yes	
8	*Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		No
9	*Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.*					
a	Did the organization make any taxable distributions under section 4966?			9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		No
10	*Section 501(c)(7) organizations.* Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	*Section 4947(a)(1) non-exempt charitable trusts.* Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Part VI **Governance, Management, and Disclosure** *(Sections A, B, and C request information about policies not required by the Internal Revenue Code.)*

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

			Yes	No
1a	Enter the number of voting members of the governing body . . 1a 24			
b	Enter the number of voting members that are independent . . 1b 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	the governing body?	8a	Yes	
b	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No", go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
a	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed OK

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ own website ☐ another's website ☑ upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

DONNA KOEPPE TREASURER
PO BOX 1749
Stillwater, OK 74076
(405) 385-5100

Part VII Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed

* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations

* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations

* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

Part VII Continued

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total . . . . ▶								1,504,090	0	254,058

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶10

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**	Yes	
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
LIPMAN HEARN INC	CONSULTING	713,326
BLACKBAUD INC	COMPUTER/CONSULTING	423,657
RAUSCH PRODUCTIONS INC	CONSULTING	315,382
RONALD D CONNER	CONSTRUCTION	246,977
WASHINGTON SPEAKERS BUREAU	SPEAKER	245,870

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization . . . . ▶ 13

Part VIII **Statement of Revenue**

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . . 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	431,773				
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	73,124,105				
	g	Noncash contributions included in lines 1a-1f $ 2,434,556					
	h	**Total (Add lines 1a-1f)** . . . . ▶		73,555,878			
Program Service Revenue			Business Code				
	2a	HOUSING RENTAL INCOME	532,000	19,534,476	19,534,476		
	b	ADMIN & LLC MGMT FEES	561,000	1,755,605	1,755,605		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total. Add lines 2a-2f** . . . . ▶ $ 21,290,081					
Other Revenue	3	Investment income (including dividends, interest other similar amounts) . . . . ▶		4,638,767			4,638,767
	4	Income from investment of tax-exempt bond proceeds . . ▶		-8,222,806			-8,222,806
	5	Royalties . . . . ▶		416,958			416,958
			(i) Real / (ii) Personal				
	6a	Gross Rents	368,598 /				
	b	Less rental expenses	169,616 /				
	c	Rental income or (loss)	198,982 /				
	d	Net rental income or (loss) . . . . ▶		198,982			198,982
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	161,743,115 /				
	b	Less cost or other basis and sales expenses	222,887,941 /				
	c	Gain or (loss)	-61,144,826 /				
	d	Net gain or (loss) . . . . ▶		-61,144,826			-61,144,826
	8a	Gross income from fundraising events (not including $ 128,222 of contributions reported on line 1c) See Part IV, line 18 *Attach Schedule G if total exceeds $15,000* . . . . a	431,773				
	b	Less direct expenses . . . b	231,774				
	c	Net income or (loss) from fundraising events . . ▶		-103,552	-103,552		
	9a	Gross income from gaming activities See part IV, line 19 *Complete Schedule G if total exceeds $15,000* a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS INCOME	900,099	666,018	666,018		
	b						
	c						
	d	All other revenue					
	e	**Total. Add lines 11a-11d**	$ 666,018				
	12	**Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . . ▶		31,295,500	21,852,547		-64,112,925

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	8,800,527	8,800,527		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,604,615		369,586	1,235,029
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	4,073,976			3,267,959
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	398,564		93,431	305,133
9	Other employee benefits	582,611		147,103	435,508
10	Payroll taxes	393,312		78,551	314,761
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	31,947		18,391	13,556
c	Accounting	133,979		132,152	1,827
d	Lobbying	0			
e	Professional fundraising *See Part IV, line 17* . .	351,496			351,496
f	Investment management fees	0			
g	Other	802,850		28,515	774,335
12	Advertising and promotion	336,640		118,709	217,931
13	Office expenses	695,486		204,726	490,760
14	Information technology	448,719		114,858	333,861
15	Royalties . .	0			
16	Occupancy	161,729		51,698	110,031
17	Travel	700,893		100,946	599,947
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	244,772		77,502	167,270
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	575,296		575,296	
23	Insurance	77,759		76,289	1,470
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	INTERCOLLEGIATE ATHLETICS	32,842,999	32,842,999		
b	OSUF PHASE III HOUSING	19,512,021	19,512,021		
c	FACILITIES AND EQUIPMENT	13,598,792	13,598,792		
d	GENERAL UNIVERSITY SUPPORT	5,806,278	5,806,278		
e	LIBRARY, RESEARCH, MISC	3,949,269	3,118,731		830,538
f	All other expenses	2,249,724	2,249,724		
25	**Total functional expenses.** Add lines 1 through 24f	98,374,254	85,929,072	2,993,770	9,451,412
26	**Joint Costs.** Check ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		29,019,471	1	4,886,052
	2	Savings and temporary cash investments		36,787	2	37,380
	3	Pledges and grants receivable, net		48,666,427	3	38,434,924
	4	Accounts receivable, net		4,445,159	4	4,921,138
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties *Complete Part II of Schedule L*			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) *Complete Part II of Schedule L*			6	
	7	Notes and loans receivable, net		0	7	28,807,323
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		84,542	9	22,854
	10a	Land, buildings, and equipment cost basis	10a 202,868,884			
	b	Less accumulated depreciation *Complete Part VI of Schedule D*	10b 32,884,527	174,588,897	10c	169,984,357
	11	Investments—publicly traded securities		540,666,360	11	347,076,891
	12	Investments—other securities See Part IV, line 11 *Complete Part VII of Schedule D*		28,698,654	12	33,284,942
	13	Investments—program-related See Part IV, line 11 *Complete Part VIII of Schedule D*		4,615,227	13	5,217,583
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11 *Complete Part IX of Schedule D*		15,310,856	15	21,060,299
	16	**Total assets.** *Add lines 1 through 15 (must equal line 34)*		846,132,380	16	653,733,743
Liabilities	17	Accounts payable and accrued expenses		7,271,614	17	6,693,530
	18	Grants payable			18	
	19	Deferred revenue		10,128,505	19	10,073,360
	20	Tax-exempt bond liabilities		214,215,000	20	211,095,000
	21	Escrow account liability *Complete Part IV of Schedule D*		0	21	1,408,736
	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		14,291,052	23	13,640,572
	24	Unsecured notes and loans payable			24	
	25	Other liabilities *Complete Part X of Schedule D*		21,994,364	25	28,859,175
	26	**Total liabilities.** *Add lines 17 through 25*		267,900,535	26	271,770,373
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		116,034,887	27	22,754,688
	28	Temporarily restricted net assets		115,059,446	28	63,168,071
	29	Permanently restricted net assets		347,137,512	29	296,040,611
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		578,231,845	33	381,963,370
	34	Total liabilities and net assets/fund balances		846,132,380	34	653,733,743

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ cash ☑ accrual ☐ other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b		No
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

1 ☐ A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i).**

2 ☐ A school described in **Section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii).** (Attach Schedule H)

4 ☐ A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ 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 exempt 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).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **Section 509(a)(4).** (See instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally Integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(See Instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document? Yes	No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	No	**(vii)** Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	71,567,341	120,811,389	103,924,756	270,182,859	73,555,878	640,042,223
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add line 1-3	71,567,341	120,811,389	103,924,756	270,182,859	73,555,878	640,042,223
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						175,771,817
6 **Public Support** subtract line 5 from line 4						464,270,406

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	71,567,341	32,772,921	103,924,756	270,182,859	73,555,878	640,042,223
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,598,948	32,772,921	13,950,838	38,143,946	-43,572,660	45,893,993
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	841,467	1,525,355	1,575,936	2,139,434	1,312,282	7,394,474
11 **Total Support** (Add lines 7 through 10)						693,330,690

12 Gross receipts from related activities, etc (See instructions) | 12 | 90,868,766

13 **First Five Years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ☐

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f)) | 14 | **66.962 %**

15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f | 15 | **71.881 %**

16a **33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☑

b **33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% Facts and Circumstances Test - 2008.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

b **10% Facts and Circumstances Test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

18 **Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2004	**(b)** 2005	**(c)** 2006	**(d)** 2007	**(e)** 2008	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total** Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Total of lines 7a and 7b						
8 **Public Support** (Substract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2004	**(b)** 2005	**(c)** 2006	**(d)** 2007	**(e)** 2008	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total Support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	**16**	

Computation of Investment Income Percentage

17 Investment Income Percentage for **2008** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment Income Percentage from **2007** Schedule A, Part IV-A, line 27h	**18**	

19a **33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test
OTHER INCOME INCLUDED GROSS PROFIT ON SALE OF INVENTORY, CROP INCOME, AND RECOVERY OF ALLOWANCE ON UNCOLLECTED PLEDGES

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	10	
2	Aggregate Contributions to (during year)	90,200	
3	Aggregate Grants from (during year)	316,000	
4	Aggregate value at end of year	1,777,919	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☑ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☑ No

b If "Yes," explain why in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☑ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	459,430,797				
b Contributions	18,340,364				
c Investment earnings or losses	-113,014,420				
d Grants or scholarships	5,545,444				
e Other expenditures for facilities and programs	7,195,441				
f Administrative expenses	5,656,779				
g End of year balance	346,359,077				

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 8 %

b Permanent endowment ▶ 92 %

c Term endowment ▶ 0 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		0		
b Buildings		161,689,406	30,710,949	130,978,457
c Leasehold improvements		37,462,156	152,487	37,309,669
d Equipment		3,717,322	2,021,091	1,696,231
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				169,984,357

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other INVESTMENTS WITH BOND TRUSTEES	33,281,942	F
Other STOCK INVESTMENTS	3,000	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	33,284,942	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
FUNDS HELD ON BEHALF OF OSU	2,710,378
OBLIGATIONS UNDER SPLIT INTEREST	10,284,004
DERIVITIVE INSTRUMENTS	15,864,793
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	28,859,175

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
EXPLANATION OF ESCROW ARRANGEMENT	PART IV, LINE 2B	FUNDS HELD IN ESCROW REPRESENT PREPAID INTEREST ON LOAN RECEIVABLE
INTENDED USES OF ENDOWMENT FUNDS	PART V, LINE 4	ENDOWMENTS PRIMARILY SUPPORT OKLAHOMA STATE UNIVERSITY PROGRAMS THROUGH ANNUAL SPENDING ALLOCATION AND LONG TERM GROWTH
FIN 48 FOOTNOTE	PART X, ACCOUNTING FOR CERTAIN TAX POSITIONS	IN JUNE 2006, THE FASB ISSUED INTERPRETATION NO 48 ("FIN 48") ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES FIN 48 PROVIDES DETAILED GUIDANCE FOR THE FINANCIAL STATEMENT RECOGNITION, MEASUREMENT AND DISCLOSURE OF UNCERTAIN TAX POSITIONS RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS IN ACCORDANCE WITH SFAS NO 109, ACCOUNTING FOR INCOME TAXES FIN 48 REQUIRES AN ENTITY TO RECOGNIZE THE FINANCIAL STATEMENT IMPACT OF A TAX POSITION WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION ON DECEMBER 30, 2008, THE FASB ISSUED FASB STAFF POSITION FIN 4803 WHICH DEFERRED THE EFFECTIVE IMPLEMENTATION DATE OF FIN 48 TO THE FOUNDATION'S ANNUAL FINANCIAL STATEMENTS ENDING ON JUNE 30, 2010 AND THE FOUNDATION HAS ELECTED TO DEFER APPLICATION OF FIN 48 THE FOUNDATION DOES NOT EXPECT THAT THE ADOPTION OF FIN 48 WILL HAVE A MATERIAL EFFECT ON ITS FINANCIAL POSITION, RESULTS OF OPERATIONS, OR CASH FLOWS

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than $15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☑ Mail solicitations
- **b** ☑ Email solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☑ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
BENTZ WHALEY FLESSNER	CAMPAIGN FEASIBILITY		No	0	190,402	-190,402
GRENZEBACH GLIER AND ASSOCIATES	WEALTH SCREENING		No	0	90,194	-90,194
BOBBY CURTIS HAMM	CONSULTING		No	0	70,900	-70,900
Total ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AZ,AR,CA,CO,FL,KS,MO,NM,NY,OK,TN,TX

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

			(a) Event #1 WINE FORUM (event type)	(b) Event #2 CHEF SERIES (event type)	(c) Other Events 5 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	160,300	104,820	294,875	559,995
	2	Less Charitable contributions	104,150	79,155	248,468	431,773
	3	Gross revenue (line 1 minus line 2)	56,150	25,665	46,407	128,222
Direct Expenses	4	Cash Prizes	0	0	0	0
	5	Non-cash Prizes	0	0	0	0
	6	Rent/Facility costs	26,705	0	3,700	30,405
	7	Other direct expenses	59,872	55,056	86,442	201,370
	8	Direct expense summary Add lines 4 through 7 in column (d) ▶				231,775
	9	Net income summary Combine lines 3 and 8 in column (d). ▶				-103,553

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities ____			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

				Yes	No
13	Indicate the percentage of gaming activity operated in				
a	The organization's facility	**13a**			
b	An outside facility	**13b**			
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records Name ▶ Address ▶				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		**15a**		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________				
c	If "Yes," enter name and address Name ▶ Address ▶				
16	Gaming manager information Name ▶ Gaming manager compensation ▶ $ ____________ Description of services provided ▶ ☐ Director/officer ☐ Employee ☐ Independent contractor				
17	Mandatory distributions				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		**17a**		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $				

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 if additional space is needed . . . ▶ ☐

1(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
OKLAHOMA STATE UNIVERSITY207A WHITEHURST HALL STILLWATER, OK 73078	73-6017987	115	8,800,527				SCHOLARSHIPS

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 1

3 Enter total number of other organizations . . . ▶ 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Identifier	**Return Reference**	**Explanation**
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS	PART I, LINE 2	THE OSU FOUNDATION PROVIDES SCHOLARSHIP REIMBURSEMENTS TO OKLAHOMA STATE UNIVERSITY TO REIMBURSE EXPENSES ACCORDING TO DONOR INTENT ADEQUATE DOCUMENTATION OF EXPENDITURES IS REQUIRED PRIOR TO DISBURSEMENT OF FUNDS RECORDS OF THESE TRANSACTIONS ARE MAINTAINED AT THE OSU FOUNDATION

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First class or charter travel ☐ Housing allowance or residence for personal use ☑ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other compensation				
KIRK JEWELL	(i)	218,124	50,000	18,366	32,968	19,009	338,467	186,876
	(ii)	0	0	0	0	0	0	0
DONNA KOEPPE	(i)	106,268	22,420	5,152	16,417	16,432	166,689	81,813
	(ii)	0	0	0			0	
DEBORAH ENGLE	(i)	145,786	3,300	3,237	0	5,023	157,346	37,334
	(ii)	0	0	0	0	0	0	0
MARLO DUFFY TURNER	(i)	100,278	24,512	5,223	15,152	9,634	154,799	61,376
	(ii)	0	0	0	0		0	
JASON CANIGLIA	(i)	109,909	26,401	5,486	16,319	7,071	165,186	65,271
	(ii)	0	0	0	0		0	
CRAIG CLEMONS	(i)	153,770	64,997	13,640	26,845	17,153	276,405	152,748
	(ii)	0	0	0	0	0	0	0
ROBERT CLYNE	(i)	54,726	37,200	37,427	13,303	3,453	146,109	114,811
	(ii)	0	0	0	0	0	0	0
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
COMPANION TRAVEL & SOCIAL CLUB DUES	PART 1, LINE 1A	TRAVEL FOR COMPANIONS IS AUTHORIZED FOR OFFICERS AND DEVELOPMENT PERSONNEL FOR FUNDRAISING AND DONOR CULTIVATION PURPOSES ALL RELATED TRAVEL OF COMPANIONS IS INCLUDED IN TAXABLE COMPENSATION SOCIAL CLUB DUES AND EXPENSES ARE ALLOWED FOR QUALIFIED ENTERTAINMENT FOR DONOR CULTIVATION PURPOSES ANY PERSONAL USE IS INCLUDED IN TAXABLE COMPENSATION

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Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.
Provide descriptions, explanations, and any additional information in Schedule O.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Bond Issues *(Required for 2008)*

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No
A	PAYNE COUNTY ECONOMIC DEVELOPMENT AUTHORITY	73-1546914	704389AJ9	03-17-2005	59,885,000	STUDENT HOUSING		X		X

Part II Proceeds *(Optional for 2008)*

		A	B	C	D	E
1	Total Proceeds of Issue					
2	Gross Proceeds in Reserve Funds					
3	Proceeds in Refunding or Defeasance Escrows					
4	Other Unspent Proceeds					
5	Issuance Costs from Proceeds					
6	Working Capital Expenditures from Proceeds					
7	Capital Expenditures from Proceeds					
8	Year of Substantial Completion					

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9	Were the bonds issued as part of a current refunding issue?										
10	Were the bonds issued as part of an advance refunding issue?										
11	Has the final allocation of proceeds been made?										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use *(Optional for 2008)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2	Are there any lease arrangements with respect to the financed property which may result in private business use?										

Part III Private Business Use *(Continued)*

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

Part IV Arbitrage *(Optional for 2008)*

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?										
6	Did the bond issue qualify for an exception to rebate?										

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	9	1,769	APPRAISAL
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		70,870	COST
5 Clothing and household goods				
6 Cars and other vehicles	X	19	288,750	FAIR MARKET VALUE
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	42	1,373,614	HIGH/LOW MARKET AVG
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (describe EQUIPMENT)	X	38	208,924	COST
26 Other (describe HORSES)	X	27	420,750	APPRAISAL
27 Other (describe EVENT TICKETS)	X	15	10,616	COST
28 Other (describe MISCELLANEOUS)	X	55	59,263	COST

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, *Part IV, Donee Acknowledgement*	29	2	
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes", describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes	
b	If "Yes", describe in Part II			
33	If the organization did not report revenues in Column (c) for a type of property for which Column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	ReturnReference	Explanation
USE OF THIRD PARTIES TO ADMINISTER NONCASH CONTRIBUTIONS	PART I, LINE 32B	THE OSU FOUNDATION UTILIZES JP MORGAN/CHASE TO ACT AS AN AGENT WITH REGARD TO THE ADMINISTRATION OF MINERAL INTERESTS DONATED TO THE FOUNDATION

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Identifier	Return Reference	Explanation
GENERAL STATEMENT 1	PART III, LINE 4D	OTHER PROGRAM SERVICES INCLUDE ALL FUNDS EXPENDED AND RAISED FOR GENERAL UNIVERSITY SUPPORT, ENDOWED FACULTY AND LECTURESHIP PROGRAMS, LIBRARY, RESEARCH, AND OSUF OKMULGEE STUDENT HOUSING, LLC

Identifier	Return Reference	Explanation
GENERAL STATEMENT 2	PART IV, LINE 12 & PART XI, LINE 2B	AN OUTSIDE ACCOUNTING FIRM PERFORMS AN ANNUAL AUDIT OVER THE CONSOLIDATED FINANCIAL STATEMENTS OF OSU FOUNDATION AND THE FOUNDATION FOR ENGINEERING AT OSU

Identifier	Return Reference	Explanation
GENERAL STATEMENT 3	PART VI, LINE 7A	THE OSU FOUNDATION HAS MEMBERS THAT ARE REFERRED TO IN THE ORGANIZATION'S BYLAWS AS GOVERNORS ANY INDIVIDUAL PAST OR CURRENT DONOR TO THE OSU FOUNDATION MAY BE ELECTED AS A GOVERNOR OF THE OSU FOUNDATION SUGGESTIONS FOR NOMINATIONS OF A GOVERNOR CANDIDATE SHALL BE SUBMITTED BY THE GOVERNANCE COMMITTEE TO THE FULL BOARD OF TRUSTEES, A MAJORITY VOTE OF THE TRUSTEES SHALL BE REQUIRED FOR A NOMINEE TO BE ELECTED AS GOVERNOR AN ANNUAL MEETING OF THE GOVERNORS SHALL BE HELD IN THE FALL OF EACH YEAR ON A DATE TO BE FIXED BY THE BOARD OF TRUSTEES AT EACH MEETING, TRUSTEES SHALL BE ELECTED BY THE GOVERNORS, REPORTS OF AFFAIRS OF THE CORPORATION SHALL BE CONSIDERED, AND ANY OTHER BUSINESS MAY BE TRANSACTED WHICH IS WITHIN THE POWERS OF THE GOVERNORS TO TRANSACT

Identifier	Return Reference	Explanation
GENERAL STATEMENT 4	PART VI, LINE 10	THE OSU FOUNDATION PROVIDES AN ELECTRONIC COPY OF THE FORM 990 TO EACH MEMBER OF ITS GOVERNING BODY VIA EMAIL PRIOR TO A REGULARLY SCHEDULED AUDIT COMMITTEE MEETING A PRINCIPAL PURPOSE OF THE MEETING IS A REVIEW AND DISCUSSION OF THE FORM 990 AND ATTACHMENTS BEFORE THE FORM 990 IS DISTRIBUTED TO THE GOVERNING BODY A FINAL COPY OF FORM 990 IS PROVIDED TO THE GOVERNING BODY PRIOR TO FILING FORM 990 ADDITIONALLY, THE FOUNDATION'S FORM 990 IS REVIEWED BY AN OUTSIDE ACCOUNTING FIRM PRIOR TO FILING

Identifier	Return Reference	Explanation
GENERAL STATEMENT 5	PART VI, LINE 12C	ANNUALLY, ALL MEMBERS OF THE BOARD OF DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE A QUESTIONNAIRE THAT IS USED TO IDENTIFY RELATIONSHIPS AND CIRCUMSTANCES THAT COULD GIVE RISE TO A CONFLICT OF ITNEREST THE AUDIT COMMITTE HAS THE RESPONSIBIBLTY FOR OVERSIGHT OF THE PROCESS SET OUT IN THE CONFLICT OF INTEREST POLICY, INCLUDING (I) ANNUALLY MONITORING RESPONSES TO THE CONFLICT OF INTEREST QUESTIONNAIRE (II) COMMUNICATING POTENTIAL CONFLICTS OF INTERST TO THE MANAGEMENT OF THE GOVERNING BODY AS APPROPRIATE AND (III) COMMUNICATING TO THE ORGANIZATION'S GOVERNANCE COMMITTEE ANY SUGGESTED CHANGES TO THE CONFLICT OF INTEREST POLICY

Identifier	Return Reference	Explanation
GENERAL STATEMENT 6	PART VI, LINE 15A & 15B	THE COMPENSATION COMMITTEE (COMMITTEE) IS REPSONSIBLE FOR ENGAGING AN OUTSIDE COMPENSATION AND BENEFITS CONSULTANT TO DETERMINE THE COMPENSATION OF THE ORGANIZATION'S CEO, OTHER OFFICERS, AND EMPLOYEES THE COMMITTEE RECEIVES THE COMPENSATION REPORTS DIRECTLY THE COMMITTEE RELIES PRIMARILY ON MARKET DATA PROVIDED BY ITS CONSULTANTS IN ASSESSING COMPENSATION FOR SENIOR OFFICERS THE REVIEW BEGINS IN EARLY SPRING BY HOLDING A MEETING TO ENGAGE A CONSULTANT TO GATHER COMPARABLE COMPENSATION DATA THE COMMITTEE IS AUTHORIZED TO ENGAGE AND TERMINATE ANY LEGAL, COMPENSATION, OR OTHER ADVISORS NECESSARY TO PROVIDE ADVICE AND INFORMATION IN CONNECTION WITH CARRYING OUT ITS RESPONSIBILITIES AND HAS SOLE AUTHORITY TO APPROVE SUCH ADVISOR'S FEES THE COMMITTEE SHALL ALSO ASSURE THAT THE CONSULTANT IS INDEPENDENT (I E DOES NOT WORK FOR MANAGEMENT OR THE FOUNDATION IN ANY OTHER CAPACITY) THE COMMITTEE SHALL CONSIDER ALL ELEMENTS OF COMPENSATION, INCLUDING CONTRACTUAL BENEFITS THAT ARE NOT PART OF THE COMPENSATION PROCESS, DEFERRED COMPENSATION PLANS AND OTHER BENEFITS TO ENSURE THAT COMPENSATION IS REASONABLE AND DOES NOT CONSTITUTE "EXCESS BENEFITS" THE COMMITTEE ALSO REVIEWS AND APPROVES OTHER TYPES OF BENEFITS PROVIDED TO SENIOR OFFICERS IN A MANNER THAT QUALIFIES FOR THE REBUTTABLE PRESUMPTION OF REASONABLENESS UNDER THE SANCTIONS RULES THE COMMITTEE REVIEWS THE GOALS AND OBJECTIVES THAT MAY BE RELEVANT TO THE COMPENSATION OF THE FOUNDATION'S CEO AND ASSURES THE FORMAL AND TIMELY EVALUATION OF THE CEO'S COMPENSATION BASED ON THE RECOMMENDATION OF THE EXECUTIVE COMMITTEE THE COMMITTEE ALSO REVIEWS AND APPROVES THE RECOMMENDATIONS OF THE CEO WITH REGARD TO THE COMPENSATION OF THE VICE PRESIDENTS OF THE FOUNDATION, OTHER THAN THE CEO THE COMMITTEE MEETS IN JUNE OF EACH CALENDAR YEAR TO MAKE DECISION REGARDING COMPENSATION THE ACTIONS OF THE COMMITTEE ARE RECORDED IN WRITTEN MINUTES THAT ARE CIRCULATED TO ALL MEMBERS OF THE COMMITTEE THE MINUTES CONTAIN ANY DELIBERATION AND THE FINAL DECISION MADE BY THE COMMITTEE

Identifier	Return Reference	Explanation
GENERAL STATEMENT 7	PART VI, LINE 19	ALL GOVERNING DOCUMENTS INCLUDING THE ORGANIZATION'S BY-LAWS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE ON ITS WEBSITE

Identifier	Return Reference	Explanation
GENERAL STATEMENT 8	SCHEDULE K, PART I, LINE A(G)	ALL OUTSTANDING BONDS WERE REDEEMED ON AUGUST 5, 2009

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Oklahoma State University Foundation

Employer identification number
73-6097060

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
OSUF Okmulgee Student Housing LLC PO Box 1749 Stillwater, OK 74076 73-6097060	Stdnt Housing	OK	2,825,461	15,559,002	N/A
OSUF Phase III Student Housing LLC PO Box 1749 Stillwater, OK 74076 73-6097060	Stdnt Housing	OK	-9,413,385	192,130,470	N/A
Ranchers Dining LLC H103 SU Stillwater, OK 74078 73-6097060	Dining Svcs	OK	58,951	39,393	N/A

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
FOUNDATION FOR ENGINEERING AT OSU PO BOX 1749 STILLWATER, OK74076 26-1124834	PRGM SUPPORT	OK	501(C)(3)	LINE 11 - I	NA

Part III **Identification of Related Organizations Taxable as a Partnership**

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust**

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**		No
b	Gift, grant, or capital contribution to other organization(s)	**1b**		No
c	Gift, grant, or capital contribution from other organization(s)	**1c**		No
d	Loans or loan guarantees to or for other organization(s)	**1d**		No
e	Loans or loan guarantees by other organization(s)	**1e**		No
f	Sale of assets to other organization(s)	**1f**		No
g	Purchase of assets from other organization(s)	**1g**		No
h	Exchange of assets	**1h**		No
i	Lease of facilities, equipment, or other assets to other organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets from other organization(s)	**1j**		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	**1k**		No
l	Performance of services or membership or fundraising solicitations by other organization(s)	**1l**		No
m	Sharing of facilities, equipment, mailing lists, or other assets	**1m**		No
n	Sharing of paid employees	**1n**		No
o	Reimbursement paid to other organization for expenses	**1o**		No
p	Reimbursement paid by other organization for expenses	**1p**		No
q	Other transfer of cash or property to other organization(s)	**1q**		No
r	Other transfer of cash or property from other organization(s)	**1r**		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(A) Name of other organization(s)	**(B)** Transaction type(a-r)	**(C)** Amount Involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Additional Data

Software ID:
Software Version:
EIN: 73-6097060
Name: Oklahoma State University Foundation

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position: Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MONTY BUTTS , CHAIRMAN	1 0	X						0	0	0
BARRY POLLARD , VICE-CHAIR	1 0	X						0	0	0
KEN GREINER , INTERMEDIATE PAST CHAIR	1 0	X						0	0	0
GENE BATCHELDER , TRUSTEE	1 0	X						0	0	0
JOHN CLERICO , TRUSTEE	1 0	X						0	0	0
BRYAN CLOSE , TRUSTEE	1 0	X						0	0	0
CHARLIE EITEL , TRUSTEE	1 0	X						0	0	0
ELLEN FLEMMING , TRUSTEE	1 0	X						0	0	0
MICHAEL GREENWOOD , TRUSTEE	1 0	X						0	0	0
JENNIFER GRIBSBY , TRUSTEE	1 0	X						0	0	0
DAVID HOLSTED , TRUSTEE	1 0	X						0	0	0
REX HORNING , TRUSTEE	1 0	X						0	0	0
DON HUMPHREYS , TRUSTEE	1 0	X						0	0	0
JUDY JOHNSON , TRUSTEE	1 0	X						0	0	0
GRIFFIN JONES , TRUSTEE	1 0	X						0	0	0
JOHN LINEHAN , TRUSTEE	1 0	X						0	0	0
ROSS MCKNIGHT , TRUSTEE	1 0	X						0	0	0
BOND PAYNE JR , TRUSTEE	1 0	X						0	0	0
SCOTT SEWELL , TRUSTEE	1 0	X						0	0	0
LARRY SHELL , TRUSTEE	1 0	X						0	0	0
WILLIAM S SPEARS , TRUSTEE	1 0	X						0	0	0
JACK STUTEVILLE , TRUSTEE	1 0	X						0	0	0
KIM WATSON , TRUSTEE	1 0	X						0	0	0
DENNIS WHITE , TRUSTEE	1 0	X						0	0	0
KIRK JEWELL , PRESIDENT AND CEO	50 0			X				286,490	0	51,977
DONNA KOEPPE , VP ADMINISTRATION & TREASURER	50 0			X				133,840	0	32,849
BRANDON MEYER , VP AND GENERAL COUNSEL	50 0			X				52,862	0	2,354
DEBORAH ENGLE , SENIOR VP DEVELOPMENT	50 0			X				152,323	0	5,023
PAT MOLINE , SENIOR VP DEVELOPMENT	50 0			X				28,045	0	3,251
MARLO DUFFY TURNER , ASST VP - DEVELOPMENT	50 0					X		130,013	0	24,786

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JASON CANIGLIA , ASST VP - DEVELOPMENT	50 0					X		141,796	0	23,390
CRAIG CLEMONS , ASSOC VP - DEVELOPMENT	50 0					X		232,407	0	43,998
JOE HANEY , ASSOC VP - DEVELOPMENT	50 0					X		110,251	0	26,032
GEORGE WENDT , ASSOC VP - DEVELOPMENT	50 0					X		106,710	0	23,642
ROBERT CLYNE , VP - DEVELOPMENT	0 0			X			X	129,353	0	16,756