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Return of Organization Exempt from Income Tax

OMB No 1545-0047

2001

Department of the Treasury
Internal Revenue ServiceUnder Section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)Open to Public
Inspection

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

A For the 2001 calendar year, or tax year beginning 6/01, 2001, and ending 5/31, 20 02

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use
IRS label
or print
or type.
See
specific
instruc-
tions

PHI SIGMA KAPPA NORTHERN ILLINOIS UNIV
 ALUMNI CORP
 PO BOX 38
 NEW LENOX, IL 60451-0038

D Employer Identification Number

23-7125212

E Telephone number

(815) 722-1111

F Accounting method:

☒ Cash ☐ Accrual☐ Other (specify) ▶

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

H and I are not applicable to Section 527 organizations

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

H (b) If 'yes,' enter number of affiliates ▶

H (c) Are all affiliates included? ☐ Yes ☐ No

(If 'no,' attach a list. See instructions.)

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

I Enter 4-digit group GEN ▶

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

G Web site: ▶ N/A

J Organization type
(check only one)☒ 501(c) 7 (insert no.) ☐ 4947(a)(1) or ☐ 527

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 259,288.

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

1 Contributions, gifts, grants, and similar amounts received					
a Direct public support		1a			
b Indirect public support		1b			
c Government contributions (grants)		1c			
d Total (add lines 1a through 1c) (cash \$ noncash \$)		1d		0.	
2 Program service revenue including government fees and contracts (from Part VII, line 93)		2		247,882.	
3 Membership dues and assessments		3		6,330.	
4 Interest on savings and temporary cash investments		4		5,076.	
5 Dividends and interest from securities		5			
6a Gross rents		6a			
b Less rental expenses		6b			
c Net rental income or (loss) (subtract line 6b from line 6a)		6c			
7 Other investment income (describe ▶)		7			
8a Gross amount from sales of assets other than inventory		(A) Securities		(B) Other	
b Less cost or other basis and sales expenses		8a			
c Gain or (loss) (attach schedule)		8b			
d Net gain or (loss) (combine line 8c, columns (A) and (B))		8c			
9 Special events and activities (attach schedule)		8d			
a Gross revenue (not including \$ of contributions reported on line 1a)		9a			
b Less direct expenses other than fundraising expenses		9b			
c Net income or (loss) from special events (subtract line 9b from line 9a)		9c			
10a Gross sales of inventory, less returns and allowances		10a			
b Less cost of goods sold		10b			
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c			
11 Other revenue (from Part VII, line 103)		11			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12		259,288.	
13 Program services (from line 44, column (B))		13		181,594.	
14 Management and general (from line 44, column (C))		14		20,874.	
15 Fundraising (from line 44, column (D))		15			
16 Payments to affiliates (attach schedule)		16			
17 Total expenses (add lines 16 and 44, column (A))		17		202,468.	
18 Excess or (deficit) for the year (subtract line 17 from line 12)		18		56,820.	
19 Net assets or fund balances at beginning of year (from line 73, column (A))		19		379,630.	
20 Other changes in net assets or fund balances (attach explanation)		20			
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21		436,450.	

Part III Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch) See Stm 1 (cash \$ 5,076. non-cash \$)	22	5,076.	5,076.		
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25				
26 Other salaries and wages	26				
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31	3,253.	3,253.		
32 Legal fees	32	1,082.	1,082.		
33 Supplies	33	3,917.	3,917.		
34 Telephone	34	802.	802.		
35 Postage and shipping	35	1,402.	1,402.		
36 Occupancy	36	128,058.	128,058.		
37 Equipment rental and maintenance	37	289.	289.		
38 Printing and publications	38	3,367.	3,367.		
39 Travel	39	3,759.	3,759.		
40 Conferences, conventions, and meetings	40	10,572.	10,572.		
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	20,874.		20,874.	
43 Other expenses not covered above (itemize)					
a ALUMNI FUNCTIONS	43a	17,170.	17,170.		
b BANK CHARGES	43b	2,847.	2,847.		
c	43c				
d	43d				
e	43e				
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	202,468.	181,594.	20,874.	0.

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If 'Yes,' enter (i) the aggregate amount of these joint costs \$, (ii) the amount allocated to program services

\$, (iii) the amount allocated to management and general \$, and (iv) the amount allocated to fundraising \$

Part III Statement of Program Service AccomplishmentsWhat is the organization's primary exempt purpose? ☒ UNIVERSITY/COLLEGE FRATERNITY

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) & (4) organizations & section 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and
(4) organizations and
4947(a)(1) trusts, but
optional for others.)

a OPERATION OF COLLEGE FRATERNITY HOUSE, SUPERVISION OF UNDERGRADUATE ACTIVITIES. ALLOCATIONS MADE FROM SET ASIDE OF INTEREST INCOME FOR SCHOLARSHIPS AND EDUCATIONAL RELATED ACTIVITIES. (Grants and allocations \$ 5,076.)	138,571.
b MANAGING FUNCTIONS AND ACTIVITIES FOR ALUMNI FRATERNITY MEMBERS IN CONJUNCTION WITH NATIONAL FRATERNITY ORGANIZATION (Grants and allocations \$)	43,023.
c	
d	
e Other program services (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44, column (B), program services)	181,594.

Part IV Balance Sheets (See instructions)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash — non-interest-bearing	11,406.	45	40,391.
	46 Savings and temporary cash investments	66,409.	46	86,409.
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes & loans receivable (attach sch)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments — securities (attach schedule)	☐ Cost ☐ FMV	54	
	55a Investments — land, buildings, & equipment basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
56 Investments — other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a 654,605.			
b Less: accumulated depreciation (attach schedule) Statement 2	57b 344,955.	301,815.	57c	309,650
58 Other assets (describe ☐)			58	
59 Total assets (add lines 45 through 58) (must equal line 74)		379,630.	59	436,450.
LIABILITIES	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ☐)		65	
	66 Total liabilities (add lines 60 through 65)		0.	66
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	313,221.	67	350,041.
	68 Temporarily restricted	66,409.	68	86,409.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	379,630.	73	436,450.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	379,630.	74	436,450.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Part IV-A **Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See instructions.)

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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a Total revenue, gains, and other support per audited financial statements	a N/A	a Total expenses and losses per audited financial statements	a N/A
b Amounts included on line a but not on line 12, Form 990 (1) Net unrealized gains on investments \$ _____ (2) Donated services and use of facilities \$ _____ (3) Recoveries of prior year grants \$ _____ (4) Other (specify) _____ _____ \$ _____ Add amounts on lines (1) through (4)	b	b Amounts included on line a but not on line 17, Form 990: (1) Donated services and use of facilities \$ _____ (2) Prior year adjustments reported on line 20, Form 990 \$ _____ (3) Losses reported on line 20, Form 990 \$ _____ (4) Other (specify) _____ _____ \$ _____ Add amounts on lines (1) through (4)	b
c Line a minus line b	c	c Line a minus line b	c
d Amounts included on line 12, Form 990 but not on line a : (1) Investment expenses not included on line 6b, Form 990 \$ _____ (2) Other (specify) _____ _____ \$ _____ Add amounts on lines (1) and (2)	d	d Amounts included on line 17, Form 990 but not on line a : (1) Investment expenses not included on line 6b, Form 990 \$ _____ (2) Other (specify) _____ _____ \$ _____ Add amounts on lines (1) and (2)	d
e Total revenue per line 12, Form 990 (line c plus line d)	e	e Total expenses per line 17, Form 990 (line c plus line d)	e

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

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?

If 'Yes,' attach schedule — see instructions

► ☐ Yes

☒ No

Part VI Other Information (See specific instructions.)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b If 'Yes,' enter the name of the organization <u>N/A</u> and check whether it is ☐ exempt or ☐ nonexempt		
81a Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b Did the organization file Form 1120-POL for this year?		X
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A
83a Did the organization comply with the public inspection requirements for returns and exemption applications?		X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		X
84a Did the organization solicit any contributions or gifts that were not tax deductible?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	85g	N/A
h If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	0
b Gross receipts, included on line 12, for public use of club facilities	86b	0.
87 501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations Sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88	X
89a 501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under: Section 4911 <u>N/A</u> , Section 4912 <u>N/A</u> , Section 4955 <u>N/A</u>		
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any Section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b	N/A
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958		N/A
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A
90a List the states with which a copy of this return is filed <u>None</u>		
b Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b	0
91 The books are in care of <u>GLENN ROBY, TREASURER</u> Telephone number <u>(312) 288-7129</u> Located at <u>PO BOX 92141, ELK GROVE VILLAGE</u> ZIP + 4 <u>60009</u>		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year <u>N/A</u>	92	N/A

Part VII Analysis of Income-Producing Activities (See instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Rent Fraternity Members					234,533.
b Alumni Services Revenue					13,349.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					6,330.
95 Interest on savings & temporary cash investments			25	5,076.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop.					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				5,076.	254,212.
105 Total (add line 104, columns (B), (D), and (E))					259,288.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	Room and Board income from fraternity members living in house while attending Northern Illinois University. The alumni own the house and provide up-keep, maintenance, and capital improvements to occupants. See Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

N/A

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

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

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

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

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of Officer <i>Glenn Roby</i>	Date 04/15/03
Paid Preparer's Use Only	Type or Print Name and Title Glenn Roby, Treasurer	
	Preparer's Signature <i>Patricia L Brown CPA</i>	Date 04/15/03
	Firm's name (or yours if self-employed) and address, and ZIP + 4 PATRICIA L BROWN CPA 223 PALMER COURT DE KALB IL 60115-3285	Check if self-employed ☒ Preparer's SSN or PTIN (see General instruction W) P00169047
	EIN 36-3092331	Phone no (815) 758-0906

BAA

TEEA0106 01/01/02

Form 990 (2001)

Part VII Analysis of Income-Producing Activities (See instructions)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a ALUMNI SERVICES REVEN					13,349.
b RENT FRATERNITY MEMBE					234,533.
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					6,330.
95 Interest on savings & temporary cash invmnts			25	5,076.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				5,076.	254,212.
105 Total (add line 104, columns (B), (D), and (E))					259,288.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	See Statement 4

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

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

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

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

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

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of Officer <u>George LaForte</u>		Date <u>Jan 11, 2010</u>	
Paid Preparer's Use Only	Preparer's Signature _____		Date _____	Check if self-employed ☐
	Firm's name (or yours if self-employed) and address, and ZIP + 4 _____		EIN _____	Preparer's SSN or PTIN (see General Instruction W) _____
	Phone no _____			

Statement 1
Form 990, Part II, Line 22
Grants and Allocations

Cash Grants and Allocations

Amount Given: \$ 5,076.

Total Cash Grants and Allocations \$ 5,076.

Total Grants and Allocations \$ 5,076.

Statement 2
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

<u>Category</u>	<u>Basis</u>	<u>Accum. Deprec.</u>	<u>Book Value</u>
Automobiles / Transportation Equipment	\$ 9,479.	\$ 1,644.	\$ 7,835.
Furniture and Fixtures	50,000.	12,480.	37,520.
Machinery and Equipment	545,126.	324,081.	221,045.
Miscellaneous	50,000.	6,750.	43,250.
Total	\$ 654,605.	\$ 344,955.	\$ 309,650.

Statement 3
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
GEORGE LAFORTE	President	\$ 0.	\$ 0.	\$ 0.
GLEN ELLYN, IL 60137	2			
KENT EBERSOLD	Vice President	0.	0.	0.
OAKBROOK TERRACE, IL 60181	1			
TIM SPIEGEL	Secretary	0.	0.	0.
PARK RIDGE, IL 60068	2			
GLENN ROBY	Treasurer	0.	0.	0.
CHICAGO, IL 60619	5			
TONY AMERI	Director	0.	0.	0.
CHICAGO, IL 60641	1			

Statement 3 (continued)
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
RICH DANIELS PARK RIDGE, IL 60068	Director 1	\$ 0.	\$ 0.	\$ 0.
JOHN HARMS BATAVIA, IL 60150	Director 1	0.	0.	0.
DAVE SERVATIUS CHICAGO, IL 60657	Director 1	0.	0.	0.
PAUL GRANE ELK GROVE VILLAGE, IL	Director 1	0.	0.	0.
		Total \$ 0.	\$ 0.	\$ 0.

Statement 4
Form 990, Part VIII
Relationship of Activities to the Accomplishment of Exempt Purposes

<u>Line #</u>	<u>Explanation of Activities</u>
93a	ROOM AND BOARD INCOME FROM FRATERNITY MEMBERS LIVING IN HOUSE WHILE ATTENDING NORTHERN ILLINOIS UNIVERSITY. THE ALUMNI OWN THE HOUSE AND PROVIDE UP-KEEP, MAINTENANCE, AND CAPITAL IMPROVEMENTS TO OCCUPANTS. SEE RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES STATEMENT
93b	INCOME FROM ALUMNI MEMBERS FOR ACTIVITIES CONDUCTED BY AND FOR MEMBERS BOTH GRADUATES AND UNDERGRADUATES
94	DUES OF \$20 PER YEAR FROM ALUMNI MEMBERS FOR NEWSLETTER AND MEETING NOTICES

Depreciation and Amortization
(Including Information on Listed Property)▶ See separate instructions.
▶ Attach to your tax return.**2001****67**Name(s) Shown on Return **PHI SIGMA KAPPA NORTHERN ILLINOIS UNIV
ALUMNI CORP**Identifying Number
23-7125212

Business or Activity to Which This Form Relates

Form **990/990-PF****Part I Election to Expense Certain Tangible Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See instructions for a higher limit for certain businesses	1	\$24,000.
2	Total cost of Section 179 property placed in service (see instructions)	2	
3	Threshold cost of Section 179 property before reduction in limitation	3	\$200,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of Section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2000 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14	Special depreciation allowance for certain property (other than listed property) acquired after September 10, 2001 (see instructions)	14	
15	Property subject to Section 168(f)(1) election (see instructions)	15	
16	Other depreciation (including ACRS) (see instructions)	16	6,750.

Part III MACRS Depreciation (Do not include listed property) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2001	17	12,480.
18	If you are electing under Section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B - Assets Placed in Service During 2001 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		5,080.	5	HY	200DB	1,016.
c 7-year property		4,399.	7	HY	200DB	628.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2001 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions)

21	Listed property Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions	22	20,874.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to Section 263A costs	23	