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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

2008Open to Public
Inspection**A** For the 2008 calendar year, or tax year beginning **7/01/08**, and ending **6/30/09**

- 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 **ALPHA OMICRON PI FRATERNITY INC.**
GROUP RETURN

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

5390 VIRGINIA WAY

City or town, state or country, and ZIP + 4

BRENTWOOD**TN 37027****D** Employer identification number**23-7046541****E** Telephone number**615-370-0920****G** Gross receipts \$ **20,579,352**

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)

See Stmt 1**H(c)** Group exemption number **0190****I** Tax-exempt status ☒ 501(c) (**7**) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **www.alphaomicronpi.org****K** Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐**L** Year of formation**M** State of legal domicile**Part I Summary****1** Briefly describe the organization's mission or most significant activities:

TO ENCOURAGE A SPIRIT OF FRATERNITY & LOVE AMONG ITS MEMBERS; PROMOTE INTEGRITY, DIGNITY, SCHOLARSHIP, & COLLEGE LOYALTY; SUPPORTS THE BEST INTEREST OF THE COLLEGES AND UNIVERSITIES IN WHICH CHAPTERS ARE INSTALLED.

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** **435****4** Number of independent voting members of the governing body (Part VI, line 1b)**4** **396****5** Total number of employees (Part V, line 2a)**5** **148****6** Total number of volunteers (estimate if necessary)**6** **1989****7a** Total gross unrelated business revenue from Part VIII, line 12, column (C)**7a** **97,813****b** Net unrelated business taxable income from Form 990-T, line 34**7b** **59,894****8** Contributions and grants (Part VIII, line 1h)

Prior Year

Current Year

4,270,154 **1,273,407****9** Program service revenue (Part VIII, line 2g)**19,891,685** **18,279,258****10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**824,362** **561,044****11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**83,982** **98,339****12** Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)**25,070,183** **20,212,048****13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**175,403** **899,447****14** Benefits paid to or for members (Part IX, column (A), line 4)**7,390****15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**1,321,966** **1,381,419****16a** Professional fundraising fees (Part IX, column (A), line 11e)**33,365** **43,631****b** Total fundraising expenses (Part IX, column (D), line 25)**19,461,283** **16,909,748****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)**20,992,017** **19,241,635****18** Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)**4,078,166** **970,413****19** Revenue less expenses. Subtract line 18 from line 12**21,446,551** **20,828,069****20** Total assets (Part X, line 16)**33,824,647** **36,732,894****21** Total liabilities (Part X, line 26)**12,378,096** **15,904,825****22** Net assets or fund balances. Subtract line 21 from line 20**21,446,551** **20,828,069****Part II Signature Block**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

Date

Type or print name and title

Paid
Preparer's
Use OnlyPreparer's
signature

Date

Check if
self-
employed ☐Preparer's identifying number
(see instructions)Firm's name (or yours
if self-employed),
address, and ZIP + 4

Puryear Hamilton Hausman & Wood, PLC
1000 Corporate Centre Drive, Suite 200
Franklin, TN 37067

EIN **62-0788068**

Phone
no **615-771-3600**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

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

Form **990** (2008)

912

SCANNED MAR 11 2010 Activities & Governance Expenses Net Assets or Fund Balances

Part III **Statement of Program Service Accomplishments** (see instructions)**1** Briefly describe the organization's mission:

TO ENCOURAGE A SPIRIT OF FRATERNITY & LOVE AMONG ITS MEMBERS; PROMOTE INTEGRITY, DIGNITY, SCHOLARSHIP, & COLLEGE LOYALTY; SUPPORTS THE BEST INTEREST OF THE COLLEGES AND UNIVERSITIES IN WHICH CHAPTERS ARE INSTALLED.

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 501(c)(4) organizations and section 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 \$	including grants of \$) (Revenue \$
TO PROVIDE ROOM & BOARD AND SUPPORT TO THE MEMBERS OF CHAPTER AND HOUSING CORPORATION OF ALPHA OMICRON PI FRATERNITY, INC.		

4b (Code:) (Expenses \$	including grants of \$) (Revenue \$
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4c (Code:) (Expenses \$	including grants of \$) (Revenue \$
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4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **\$** (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		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
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		
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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
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	X	
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
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		X
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		X
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		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
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	X	
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	X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		X
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.		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		
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		
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	X	
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		X

Part IV Checklist of Required Schedules (continued)

- 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
 - b** Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV
 - 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
- 29** Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
- 30** Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- 31** Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I
- 32** Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
- 33** Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I
- 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
- 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
- 36** **Section 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
- 37** Did the organization conduct more than 5% 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

	Yes	No
28a		X
28b		X
28c		X
29	X	
30		X
31		X
32		X
33		X
34	X	
35	X	
36		
37		X

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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 2579	
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	X
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 148	
b	If at least one is reported on line 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. (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X
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	X
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	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to question 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	X
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 more than \$75?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	X
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	
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	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 503,935	
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	

Form 990 (2008)

* Group members file Form 990-T, if applicable.

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

- | | |
|-----------|------------|
| 1a | 435 |
| 1b | 396 |
- 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?
- 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?
- 4** Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?
- 5** Did the organization become aware during the year of a material diversion of the organization's assets?
- 6** Does the organization have members or stockholders?
- 7a** Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
- b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
- 8** Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
- a** The governing body?
- b** Each committee with authority to act on behalf of the governing body?
- 9a** Does the organization have local chapters, branches, or affiliates?
- 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?
- 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
- 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

	Yes	No
2	X	
3		X
4		X
5		X
6	X	
7a	X	
7b	X	
8a	X	
8b	X	
9a	X	
9b	X	
10	X	
11		X

Section B. Policies

- 12a** Does the organization have a written conflict of interest policy? If "No," go to line 13
- b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c** Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done
- 13** Does the organization have a written whistleblower policy?
- 14** Does the organization have a written document retention and destruction policy?
- 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?
- b** Other officers or key employees of the organization?
- Describe the process in Schedule O. (see instructions)
- 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?
- 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?

	Yes	No
12a		X
12b		
12c		
13		X
14		X
15a		X
15b		X
16a		X
16b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **► None**
- 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.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **► BETH BRAGG** **5390 VIRGINIA WAY**

BRENTWOOD

TN 37027

615-370-0920

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), 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, and 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.

[illegible]

Part VII

1b Total

2 Total number of incidents in the organization ► 0

- | | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | | X |
| 5 | | X |

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.

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

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b 38,619				
	c Fundraising events	1c				
	d Related organizations	1d 33,335				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,201,453				
	g Noncash contributions included in lines 1a-1f. \$	1,092,220				
	h Total. Add lines 1a-1f		1,273,407			
Program Service Revenue	2a ROOM & BOARD	Busn. Code 721310	8,290,279	8,290,279		
	b CHAPTER ACTIVITIES	900099	4,644,520	4,644,520		
	c NATIONAL ASSESSMENT	900099	2,084,152	2,084,152		
	d LEASE INCOME	531110	1,564,779	1,564,779		
	e PARLOR FEES	900099	787,597	787,597		
	f All other program service revenue	900099	907,931	907,931		
	g Total. Add lines 2a-2f		18,279,258			
	3 Investment income (including dividends, interest, and other similar amounts)		90,457	11,853	66,484	12,120
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
Other Revenue	6a Gross Rents	(i) Real 156,377				
	b Less: rental exps	125,471				
	c Rental inc or (loss)	30,906				
	d Net rental income or (loss)		30,906		30,906	
	7a Gross amount from sales of assets other than inventory	(i) Securities 1,716	(ii) Other 661,332			
	b Less: cost or other basis & sales exps	1,293	191,168			
	c Gain or (loss)	423	470,164			
	d Net gain or (loss)		470,587	146,092	423	324,072
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a 113,812				
	b Less: direct expenses	b 48,464				
	c Net income or (loss) from fundraising events		65,348	57,947		7,401
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a 2,993				
	b Less: cost of goods sold	b 908				
	c Net income or (loss) from sales of inventory		2,085	2,085		
	Miscellaneous Revenue		Busn. Code			
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			20,212,048	18,497,235	97,813	343,593

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	888,527			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	10,920			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members	7,390			
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,188,937			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	32,988			
10 Payroll taxes	159,494			
11 Fees for services (non-employees):				
a Management	61,741			
b Legal	49,096			
c Accounting	346,850			
d Lobbying				
e Professional fundraising services. See Part IV, line 17	43,631			
f Investment management fees	6,367			
g Other	105,828			
12 Advertising and promotion	25,031			
13 Office expenses	416,008			
14 Information technology	35,986			
15 Royalties				
16 Occupancy	5,649,225			
17 Travel	69,740			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	233,003			
20 Interest	281,909			
21 Payments to affiliates	2,446,250			
22 Depreciation, depletion, and amortization	1,115,280			
23 Insurance	22,117			
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 RUSH & SOCIAL ACTIVITIES	2,259,748			
b FOOD & SUPPLIES	1,875,338			
c MISCELLANEOUS	827,754			
d BUILDING & FURN MAINTENAN	516,304			
e CHAPTER RELATIONS	308,065			
f All other expenses	258,108			
25 Total functional expenses. Add lines 1 through 24f	19,241,635			
26 Joint Costs. Check here <input type="checkbox"/> 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	2,237,751	1	2,086,446
	2 Savings and temporary cash investments	6,140,625	2	3,872,835
	3 Pledges and grants receivable, net		3	103,095
	4 Accounts receivable, net	1,130,876	4	1,305,733
	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	5,000
	7 Notes and loans receivable, net	100,006	7	
	8 Inventories for sale or use	200	8	200
	9 Prepaid expenses and deferred charges	112,596	9	93,091
	10a Land, buildings, and equipment: cost basis	39,078,320		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10,716,133	10b	
	11 Investments—publicly traded securities	22,805,287	10c	28,362,187
	12 Investments—other securities. See Part IV, line 11	767,694	11	335,005
	13 Investments—program-related. See Part IV, line 11	265,006	12	
	14 Intangible assets		13	332,295
	15 Other assets. See Part IV, line 11	264,606	14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	33,824,647	15	237,007	
Liabilities	17 Accounts payable and accrued expenses	979,266	16	36,732,894
	18 Grants payable		17	616,181
	19 Deferred revenue		18	2,500
	20 Tax-exempt bond liabilities	81,452	19	153,714
	21 Escrow account liability. Complete Part IV of Schedule D		20	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	58,000
	24 Unsecured notes and loans payable	10,560,954	23	12,853,010
	25 Other liabilities. Complete Part X of Schedule D		24	730,629
	26 Total liabilities. Add lines 17 through 25	756,424	25	1,490,791
	Net Assets or Fund Balances	27 Unrestricted net assets	21,382,551	26
28 Temporarily restricted net assets		64,000	27	20,533,445
29 Permanently restricted net assets			28	294,624
30 Capital stock or trust principal, or current funds			29	
31 Paid-in or capital surplus, or land, building, or equipment fund			30	
32 Retained earnings, endowment, accumulated income, or other funds			31	
33 Total net assets or fund balances		21,446,551	32	
34 Total liabilities and net assets/fund balances		21,446,551	33	20,828,069
		33,824,647	34	36,732,894

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?		X
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?		
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?		X
b	If "Yes," did the organization undergo the required audit or audits?		

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

**ALPHA OMICRON PI FRATERNITY INC.
GROUP RETURN**

Employer identification number

23-7046541

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		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> 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 section 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 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 the arrangement in Part XIV and complete the following table:

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

	Amount
1c	
1d	
1e	
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 organization answered "Yes" to Form 990, Part IV, line 10.

- 1a Beginning of year balance
 b Contributions
 c Investment earnings or losses
 d Grants or scholarships
 e Other expenditures for facilities and programs
 f Administrative expenses
 g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
1b					
1c					
1d					
1e					
1f					

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

- a Board designated or quasi-endowment ☐ _____ %
 b Permanent endowment ☐ _____ %
 c Term endowment ☐ _____ %

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

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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		3,576,331		3,576,331
1b Buildings		17,098,225	5,673,173	11,425,052
1c Leasehold improvements		9,377,927	903,843	8,474,084
1d Equipment		2,630,683	2,073,632	557,051
1e Other		6,395,154	2,065,485	4,329,669
Total. Add lines 1a–1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				28,362,187

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 IV, 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.

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 KAPPA TAU-STRIK (event type)	(b) Event #2 ZETA PSI (event type)	(c) Other Events 4 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	11,873	8,785	25,898	46,556
	2 Less: Charitable contributions				
	3 Gross revenue (line 1 minus line 2)	11,873	8,785	25,898	46,556
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes	31		335	366
	6 Rent/facility costs	1,075		1,933	3,008
	7 Other direct expenses	1,573	500	18,663	20,736
	8 Direct expense summary. Add lines 4 through 7 in column (d)				24,110
9 Net income summary. Combine lines 3 and 8 in column (d)					22,446

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	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> 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)					

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?

b If "No," Explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain:

11 Does the organization operate gaming activities with nonmembers?

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?

	Yes	No
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in:

- a** The organization's facility
- b** An outside facility

13a	%
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?

- 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?
- 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 ► \$

Yes No

15a

17a

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2008

**Open to Public
Inspection.**

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

Name of the organization

**ALPHA OMICRON PI FRATERNITY INC.
GROUP RETURN**

Employer identification number
23-7046541

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?

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

☒ Yes ☐ No

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 (Form 990) 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
	ALPHA OMICRON PI FOUNDATION 5390 VIRGINIA WAY BRENTWOOD TN 37027	58-1343315	3	9,655				ARTHRITIS RESEARCH
	ALPHA OMICRON PI FOUNDATION 5390 VIRGINIA WAY BRENTWOOD TN 37027	58-1343315	3	36,500				ENDOWMENT SCHOLARSHI
	ALPHA OMICRON PI FOUNDATION 5390 VIRGINIA WAY BRENTWOOD TN 37027	58-1343315	3	7,805				SCHOLARSHIPS
	ALPHA OMICRON PI FOUNDATION 5390 VIRGINIA WAY BRENTWOOD TN 37027	58-1343315	3	20,987				SUPPORTING FOUNDATIO
	ALPHA OMICRON PI FOUNDATION 5390 VIRGINIA WAY BRENTWOOD TN 37027	58-1343315	3	16,259				SUPPORTING FOUNDATIO
	ALPHA OMICRON PI PROPERTIES, INC. 5390 VIRGINIA WAY BRENTWOOD TN 37027	51-0426239	7		722,600 FMV		HOUSE	TRANSFER PROPERTIES
	OTHER VARIOUS ORGANIZATIONS SEE SCH I PART IV FOR ADD'L INFO							VARIOUS
	SIGMA CHI FRATERNITY ROW UNIVERSITY MS 38677	15-0572089	7	5,850				PHILANTHROPIC SUPPOR

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
WKU STUDENT SCHOLARSHIPS	28	5,470			
SCHOLARSHIPS-KAPPA TAU	2	650			
SCHOLARSHIPS-NU BETA	60	3,000			
PI DELTA		1,800			

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

OTHER VARIOUS GRANTS AND ASSISTANCE TO GOVERNMENTS AND ORGANIZATIONS IN THE UNITED STATES CONSISTS OF ASSISTANCE GIVEN BY SEVERAL COMBINED CHAPTERS AND CORPORATIONS FOR THE GROUP RETURN. NO ONE RECIPIENT RECEIVED MORE THAN \$5,000 OTHER THAN THE AMOUNTS SPECIFICALLY LISTED IN PART II.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Attach to Form 990 or Form 990-EZ.
▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

2008

Open To Public
Inspection

Name of the organization **ALPHA OMICRON PI FRATERNITY INC.**
GROUP RETURN

Employer identification number
23-7046541

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$

Part II Loans to and/or From Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
DELTA SIGMA-CHARLENE MURRAY	X		30,000	30,000		X		X	X	
DELTA SIGMA-TRACIE BILLS	X		18,000	18,000		X		X		X
DELTA SIGMA-CHARLENE MURRAY	X		10,000	10,000		X		X		X
LAMBDA SIGMA-MARY GANNON GUNN		X	5,000	5,000		X	X		X	
Total				▶ \$ 63,000						

Part III Grants or Assistance Benefitting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org revenues?	
				Yes	No

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No 1545-0047

2008

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990.

Name of the organization **ALPHA OMICRON PI FRATERNITY INC.
GROUP RETURN**

Employer identification number
23-7046541

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				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	1	230,624	MARKET VALUE
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	X	2	860,514	PROPERTY TAX RECORDS
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 ► (CURIO CABINETS)	X	1	1,082	COST
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

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

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?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash
contributions?

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.

	Yes	No
30a		X
31		X
32a		X

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.

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 **ALPHA OMICRON PI FRATERNITY INC.**
GROUP RETURN

Employer identification number
23-7046541

Form 990, Part VI, Line 2 - Related Party Information Among Officers

MANDY DOYLE

MELANIE LAMPERTZ

TREASURER

SECRETARY

MOTHER-IN-LAW/DAUGHTER IN-LAW

GAYLE ROBINSON MILLER

TRACY MILLER

PRESIDENT

BOARD MEMBER

MOTHER/DAUGHTER

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

**THE ORGANIZATION HAS ONLY ONE CLASS OF MEMBERS WHO ALL HAVE THE SAME
RIGHTS.**

Form 990, Part VI, Line 7a - Election of Members and Their Rights

**ALL MEMBERS OF EACH CHAPTER OR CORPORATION HAVE THE RIGHT TO VOTE IN THE
ELECTION OF THE GOVERNING BODY FOR THEIR SPECIFIC CHAPTER OR CORPORATION.**

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

**ALL DECISIONS OF THE EXECUTIVE BOARD AND LOCAL COLLEGIATE CHAPTERS AND
CORPORATIONS ARE SUBJECT TO THE APPROVAL OF ITS MEMBERS.**

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990

**PRIOR TO SUBMITTING AOPi FRATERNITY, INC. GROUP RETURN IRS FORM 990, THE
ORGANIZATION'S CONTROLLER FORWARDS A COPY OF THE FORM TO EACH MEMBER OF
THE EXECUTIVE BOARD OF THE GOVERNING BODY FOR THEIR REVIEW. BOARD MEMBERS**

Name of the organization

ALPHA OMICRON PI FRATERNITY INC.

Employer identification number

23-7046541

ARE ENCOURAGED TO CONTACT THE CONTROLLER WITH ANY QUESTIONS THEY MAY HAVE
CONCERNING INFORMATION PRESENTED WITHIN THE FORM AND ATTACHED SCHEDULES.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
AVAILABLE TO THE MEMEBERS UPON REQUEST

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

ALPHA OMICRON PI FRATERNITY INC.
GROUP RETURN

Employer identification number

23 - 7046541

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

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

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) Dispro- portionate alloc ?		(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?
							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.

1 During the tax year, did the organization 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**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)**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)	ALPHA OMICRON PI FRATERNITY, INC	n	132,869
(2)	EPSILON CORPORATION	d	100,780
(3)	SIGMA ALPHA CORPORATION	d	56,308
(4)	XI CORPORATION	d	93,428
(5)	XI OMICRON CORPORATION	d	220,000
(6)	CHI ALPHA CORPORATION	c	368,538

Schedule R (Form 990) 2008

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

	(A) Name of other organization	(B) Transaction type (a-f)	(C) Amount involved
(7)	IOTA SIGMA CORPORATION	c	722,600
(8)	BETA PHI CORPORATION	i	423,360
(9)	IOTA CORPORATION	i	167,076
(10)	KAPPA OMEGA CORPORATION	i	121,716
(11)	OMEGA UPSILON CORPORATION	i	153,132
(12)	PI DELTA CORPORATION	i	98,400
(13)	XI CORPORATION	i	171,999
(14)	XI OMICRON CORPORATION	i	174,060
(15)	ALPHA OMICRON PI FRATERNITY, INC.	l	135,104
(16)	ALPHA OMICRON PI PROPERTIES, INC.	e	470,516
(17)	ALPHA OMICRON PI PROPERTIES, INC.	j	1,309,743
(18)	ALPHA OMICRON PI PROPERTIES, INC.	b	722,600
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

DAA

23-7046541

Federal Statements

Statement 1 - Form 990, Page 1, Line H(b) - Affiliated Group Return Information

Business Name

Address

EIN

SEE ATTACHED

ALPHA OMICRON PI FRATERNITY, INC - GROUP RETURN
ATTACHMENT TO 990 - GROUP RETURN
I.D.# 23-7046541
FYE 06/30/09

STATEMENT 1

LISTED BELOW ARE NAMES, LOCATIONS AND FEDERAL EIN NUMBERS OF CHAPTERS
INCLUDED IN THE GROUP RETURN:

ALPHA CHI CHAPTER	BOWLING GREEN, KY 42101	61-6037498
ALPHA CHI CORPORATION	BOWLING GREEN, KY 42101	31-0980375
ALPHA DELTA CHAPTER	TUSCALOOSA, AL 35403	23-7139197
ALPHA DELTA CORPORATION	TUSCALOOSA, AL 35403	63-0518914
ALPHA GAMMA CHAPTER	PULLMAN, WA 99163	91-6054199
ALPHA GAMMA CORPORATION	PULLMAN, WA 99163	91-6035164
ALPHA LAMBDA CHAPTER	STATESBORO, GA 30458	58-1759562
ALPHA LAMBDA CORPORATION	STATESBORO, GA 30458	58-1813179
ALPHA PHI CORPORATION	BOZEMAN, MT 59715	81-6014300
ALPHA PSI CHAPTER	TOLEDO, OH 43623	91-2125355
ALPHA PSI CORPORATION	TOLEDO, OH 43623	34-1612736
BETA GAMMA CHAPTER	EAST LANSING, MI 48823	38-2887807
BETA GAMMA CORPORATION	EAST LANSING, MI 48823	38-2830113
BETA PHI CHAPTER	BLOOMINGTON, IN 47406	35-0867577
BETA PHI CORPORATION	BLOOMINGTON, IN 47406	35-6007534
CHI EPSILON CHAPTER	COLUMBUS, OH 43201	31-1376016
CHI EPSILON CORPORATION	COLUMBUS, OH 43201	31-1363913
CHI LAMBDA CHAPTER	EVANSVILLE, IN 47714	23-7025674
CHI PSI CHAPTER	SAN LUIS OBISPO, CA 93401	77-0095808
CHI PSI CORPORATION	SAN LUIS OBISPO, CA 93401	77-0149941
DELTA CHAPTER	WINCHESTER, MA 01890	04-2908707
DELTA BETA CHAPTER	LAFAYETTE, LA 70505	72-6027675
DELTA BETA CORPORATION	LAFAYETTE, LA 70505	23-7446818
DELTA DELTA CHAPTER	AUBURN, AL 36849	63-6050521
DELTA DELTA CORPORATION	AUBURN, AL 36849	63-0772064
DELTA EPSILON CHAPTER	JACKSONVILLE, AL 36265	63-1011097
DELTA OMEGA CHAPTER	MURRAY, KY 42071	61-6034662
DELTA PI CHAPTER	WARRENSBURG, MO 64093	43-6051568
DELTA SIGMA CHAPTER	SAN JOSE, CA 95112	77-0289117
DELTA SIGMA CORPORATION	SAN JOSE, CA 95112	77-0167938
DELTA THETA CHAPTER	DENTON, TX 76204	75-2041588
EPSILON CORPORATION	ITHACA, NY 14850	16-1416176
EPSILON ALPHA CHAPTER	UNIVERSITY PARK, PA 16802	23-2110212
EPSILON CHI CHAPTER	ELON COLLEGE, NC 27244	56-1536463
EPSILON GAMMA CHAPTER	GREELEY, CO 80633	84-1535755
EPSILON GAMMA CORPORATION	GREELEY, CO 80631	
EPSILON OMEGA CHAPTER	RICHMOND, KY 40475	61-1202412
GAMMA ALPHA CHAPTER	FAIRFAX, VA 22030	54-1174926
GAMMA DELTA CHAPTER	MOBILE, AL 36688	23-7026776

ALPHA OMICRON PI FRATERNITY, INC - GROUP RETURN
ATTACHMENT TO 990 - GROUP RETURN
I.D.# 23-7046541
FYE 06/30/09

STATEMENT 1

LISTED BELOW ARE NAMES, LOCATIONS AND FEDERAL EIN NUMBERS OF CHAPTERS
INCLUDED IN THE GROUP RETURN:

GAMMA OMICRON CHAPTER	GAINESVILLE, FL 32601	59-0651128
GAMMA OMICRON CORPORATION	GAINESVILLE, FL 32601	59-6169196
GAMMA SIGMA CHAPTER	ATLANTA, GA 30301	58-6043611
GAMMA THETA CHAPTER	TAMPA, FL 33620	65-0334813
IOTA CHAPTER	URBANA, IL 61801	37-0670564
IOTA CORPORATION	URBANA, IL 61801	37-6034025
IOTA SIGMA CHAPTER	AMES, IA 50010	42-0947006
IOTA SIGMA CORPORATION	AMES, IA 50010	23-7137535
KAPPA ALPHA CHAPTER	TERRE HAUTE, IN 47809	35-6065243
KAPPA CHI CHAPTER	NATCHITOCHES, LA 71497	72-1337094
KAPPA GAMMA CHAPTER	LAKELAND, FL 33802	59-6144062
KAPPA KAPPA CHAPTER	MUNCIE, IN 47304	35-6041571
KAPPA OMEGA CHAPTER	LEXINGTON, KY 40508	54-1199586
KAPPA OMEGA CORPORATION	LEXINGTON, KY 40508	31-1040166
KAPPA OMICRON CHAPTER	MEMPHIS, TN 38112	62-6047311
KAPPA RHO CHAPTER	KALAMAZOO, MI 49006	38-2659930
KAPPA RHO CORPORATION	KALAMAZOO, MI 49006	38-2703146
KAPPA TAU CHAPTER	HAMMOND, LA 70402	72-6027722
KAPPA TAU CORPORATION	HAMMOND, LA 70402	23-7164965
LAMBDA BETA CHAPTER	LONG BEACH, CA 90804	95-2397136
LAMBDA BETA CORPORATION	LONG BEACH, CA 90804	46-0474128
LAMBDA ETA CHAPTER	ALLENDALE, MI 49401	38-2798519
LAMBDA SIGMA CHAPTER	ATHENS, GA 30605	58-0585827
LAMBDA SIGMA CORPORATION	ATHENS, GA 30605	58-1598179
LAMBDA TAU CHAPTER	MONROE, LA 71201	72-6022463
LAMBDA UPSILON CHAPTER	BETHLEHAM, PA 18015	23-2301038
MU LAMBDA CHAPTER	WINTERPARK, FL 32789	03-0416890
NU BETA CHAPTER	OXFORD, MS 38655	64-0413632
NU BETA CORPORATION	OXFORD, MS 38655	64-0820041
NU OMICRON CHAPTER	NASHVILLE, TN 37212	62-0998415
NU OMICRON CORPORATION	NASHVILLE, TN 37212	62-0112853
OMEGA CHAPTER	CINCINNATI, OH 45206	31-6050641
OMEGA OMICRON CHAPTER	JACKSON, TN 38305	62-6046772
OMEGA UPSILON CHAPTER	ATHENS, OH 45701	31-1227005
OMEGA UPSILON CORPORATION	ATHENS, OH 45701	31-1237595
OMICRON CHAPTER	KNOXVILLE, TN 37916	62-6051674
OMICRON CORPORATION	KNOXVILLE, TN 37916	62-6044153
PHI SIGMA CHAPTER	KEARNEY, NE 68847	23-7086675
PHI SIGMA CORPORATION	KEARNEY, NE 68847	51-0211350
PI ALPHA CHAPTER	LOUISVILLE, KY 40292	31-1038534
PI DELTA CHAPTER	COLLEGE PARK, MD 20740	52-0856415
PI DELTA CORPORATION	COLLEGE PARK, MD 20740	52-0597976
PI THETA CHAPTER	MIAMI, FL 33265	59-3688651
RHO BETA CHAPTER	RICHMOND, VA 23284	32-0211454
RHO OMICRON CHAPTER	MURFREESBORO, TN 37132	62-1235379

ALPHA OMICRON PI FRATERNITY, INC. - GROUP RETURN
ATTACHMENT TO 990 - GROUP RETURN
I D # 23-7046541
FYE 06/30/09

STATEMENT 1

LISTED BELOW ARE NAMES, LOCATIONS AND FEDERAL EIN NUMBERS OF CHAPTERS INCLUDED IN THE GROUP RETURN:

RHO OMICRON CORPORATION	MURFREESBORO, TN 37132	62-1213381
SIGMA CHAPTER	BERKELEY, CA 94704	94-6101862
SIGMA ALPHA CHAPTER	MORGANTOWN, WV 26505	55-0658678
SIGMA ALPHA CORPORATION	MORGANTOWN, WV 26505	55-0675824
SIGMA CHI CORPORATION	ONEONTA, NY 13820	16-6052202
SIGMA DELTA CHAPTER	MONTGOMERY, AL 36106	63-0698283
SIGMA GAMMA CHAPTER	BOONE, NC 28607	36-4641700
SIGMA OMICRON CHAPTER	STATE UNIVERSITY, AR 72467	71-6057354
SIGMA PHI CHAPTER	NORTHRIDGE, CA 91325	95-2461032
SIGMA PHI CORPORATION	NORTHRIDGE, CA 91325	95-6206232
SIGMA TAU CHAPTER	CHESTERTOWN, MD 21620	52-6070830
TAU CHAPTER	MINNEAPOLIS, MN 55455	41-0120314
TAU CORPORATION	MINNEAPOLIS, MN 55455	36-3585969
TAU DELTA CHAPTER	BIRMINGHAM, AL 35254	63-6045609
TAU OMICRON CHAPTER	MARTIN, TN 38238	38-6118732
TAU OMICRON CORPORATION	MARTIN, TN 38238	62-0984564
THETA BETA CHAPTER	TOWSON, MD 21093	52-1535839
THETA OMEGA CHAPTER	FLAGSTAFF, AZ 86001	86-6052457
THETA PI CHAPTER	STATEN ISLAND, NY 10301	23-7306840
THETA PSI CHAPTER	TOLEDO, OH 43606	34-6556112
UPSILON LAMBDA CHAPTER	SAN ANTONIO, TX 78240	31-0983063
XI CHAPTER	NORMAN, OK 73072	73-1651030
XI CORPORATION	NORMAN, OK 73072	71-0885775
XI OMICRON CHAPTER	FAYETTEVILLE, AR 72702	77-0665311
XI OMICRON CORPORATION	FAYETTEVILLE, AR 72702	83-0474870
ZETA CHAPTER	LINCOLN, NE 68506	47-0090410
ZETA CORPORATION	LINCOLN, NE 68506	47-6030295
ZETA PI CHAPTER	BIRMINGHAM, AL 35216	63-0966009
ZETA PSI CHAPTER	GREENVILLE, NC 27858	56-0816303
ZETA PSI CORPORATION	GREENVILLE, NC 27858	58-1373398

THE FOLLOWING RETURN WAS ALSO INCLUDED IN THE GROUP RETURN. ALPHA OMICRON PROPERTIES, INC PROVIDES HOUSING FOR THE CHAPTERS OF ALPHA OMICRON PI FRATERNITY, INC.

ALPHA OMICRON PI PROPERTIES, INC BRENTWOOD, TN 37027	51-0426239
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ALPHA OMICRON PI FRATERNITY, INC. - GROUP RETURN
ATTACHMENT TO 990 - GROUP RETURN
I.D # 23-7046541
FYE 06/30/09

STATEMENT 1

THE FOLLOWING CHAPTERS HAD TOTAL REVENUES OF LESS THAN \$25,000, THEIR FIGURES WERE NOT REQUIRED

ALPHA PHI CHAPTER	BOZEMAN, MT 59715	81-0105370
ALPHA THETA CHAPTER	CEDAR RAPIDS, IA 52402	23-7086679
ALPHA THETA CORPORATION	CEDAR RAPIDS, IA 52402	42-1051931
CHI LAMBDA CORPORATION	EVANSVILLE, IN 47714	35-6042299
CHI PHI CHAPTER	AIKEN, SC 29801	68-0621496
CHI PHI CORPORATION	AIKEN, SC 29801	03-0603547
CHI THETA CHAPTER	TAHLEQUAH, OK 74464	73-1517555
CHI THETA CORPORATION	TAHLEQUAH, OK 74464	73-1529301
DELTA CORPORATION	WINCHESTER, MA 01890	04-2998098
DELTA EPSILON CORPORATION	JACKSONVILLE, AL 36265	63-1023489
DELTA KAPPA CHAPTER	CLAYTON, MO 63105	30-0534200
DELTA KAPPA CORPORATION	CLAYTON, MO 63105	30-0553478
DELTA LAMBDA CHAPTER	COLUMBIA, GA 31908	35-2312647
DELTA LAMBDA CORPORATION	COLUMBIA, GA 31908	35-2312633
DELTA OMEGA CORPORATION	MURRAY, KY 42071	61-0847225
DELTA PI CORPORATION	WARRENSBURG, MO 64093	23-7116888
DELTA PSI CHAPTER	ALBANY, NY 12222	91-1923726
DELTA RHO CHAPTER	CHICAGO, IL 60614	36-4080691
DELTA THETA CORPORATION	LEWISVILLE, TX 75067	75-1973652
DELTA UPSILON CHAPTER	DURHAM, NC 27708	58-1380776
DELTA UPSILON CORPORATION	DURHAM, NC 27708	58-1431198
DELTA XI CHAPTER	TERRE HAUTE, IN 47803	35-2271579
DELTA XI CORPORATION	TERRE HAUTE, IN 47803	36-4603709
EPSILON CHAPTER	ITHACA, NY 14853	22-3002543
EPSILON ALPHA CORPORATION	UNIVERSITY PARK, PA 16802	23-7115303
EPSILON CHI CORPORATION	ELON COLLEGE, NC 27244	56-1560713
EPSILON OMEGA CORPORATION	RICHMOND, KY 40475	61-1117830
EPSILON SIGMA CHAPTER	QUINCY, IL 62301	37-1383689
EPSILON SIGMA CORPORATION	QUINCY, IL 62301	37-1390535
GAMMA CHAPTER	ORONO, ME 04473	01-6019037
GAMMA CORPORATION	PORTLAND, ME 04104	01-0345989
GAMMA ALPHA CORPORATION	FAIRFAX, VA 22030	56-1244888
GAMMA DELTA CORPORATION	MOBILE, AL 36607	63-1052001
GAMMA SIGMA CORPORATION	ATLANTA, GA 30301	23-7384699
GAMMA THETA CORPORATION	VALRECO, FL 33594	65-0176027
KAPPA ALPHA CORPORATION	TERRE HAUTE, IN 47809	35-6022575
KAPPA CHI CORPORATION	NATCHITOCHES, LA 71497	04-3621433
KAPPA GAMMA CORPORATION	LAKELAND, FL 33802	65-0350928
KAPPA KAPPA CORPORATION	MUNCIE, IN 47304	35-6037105
KAPPA OMICRON CORPORATION	MEMPHIS, TN 38112	62-6046636
KAPPA SIGMA CHAPTER	RIVER FALLS, WI 54022	39-1711427
KAPPA SIGMA CORPORATION	RIVER FALLS, WI 54022	52-1830878
LAMBDA ALPHA CHAPTER	LAVERNE, CA 91750	38-3752879
LAMBDA ALPHA CORPORATION	LAVERNE, CA 91750	83-0474525
LAMBDA CHI CHAPTER	LAGRANGE, GA 30241	23-7360815
LAMBDA CHI CORPORATION	LAGRANGE, GA 30241	58-1750325
LAMBDA ETA CORPORATION	ALLENDALE, MI 49401	38-2912240
LAMBDA IOTA CORPORATION	LA JOLLA, CA 92037	95-3263646
LAMBDA OMICRON CHAPTER	LEBANON, TN 37087	62-1799350
LAMBDA OMICRON CORPORATION	LEBANON, TN 37088	62-1817904

ALPHA OMICRON PI FRATERNITY, INC - GROUP RETURN
ATTACHMENT TO 990 - GROUP RETURN
I D.# 23-7046541
FYE 06/30/09

STATEMENT 1

THE FOLLOWING CHAPTERS HAD TOTAL REVENUES OF LESS THAN \$25,000, THEIR FIGURES WERE NOT REQUIRED

LAMBDA TAU CORPORATION	MONROE, LA 71201	23-7368057
LAMBDA UPSILON CORPORATION	BETHLEHEM, PA 18015	91-1923724
MU LAMBDA CORPORATION	WINTERPARK, FL 32789	04-3631875
OMEGA CORPORATION	CINCINNATI, OH 45213	31-0360591
OMEGA OMICRON CORPORATION	JACKSON, TN 38305	
PHI BETA CHAPTER	E. STROUSBERG, PA 18301	23-7062590
PHI BETA CORPORATION	E. STROUSBERG, PA 18301	23-7356480
PHI CHI CHAPTER	ELMHURST, IL 60126	36-3377896
PHI CHI CORPORATION	ELMHURST, IL 60126	36-3459586
PHI DELTA CORPORATION	WAWWATOSA, WI 53222	39-1532918
PHI UPSILON CORPORATION	WEST LAFAYETTE, IN 47906	35-6065247
PI ALPHA CORPORATION	LOUISVILLE, KY 40292	91-1923722
PI THETA CORPORATION	MIAMI, FL 33265	58-2614249
RHO BETA CORPORATION	RICHMOND, VA 23284	35-2311160
RHO DELTA CHAPTER	BIRMINGHAM, AL 35209	63-1145420
RHO DELTA CORPORATION	BIRMINGHAM, AL 35209	63-1154738
SIGMA BETA CHAPTER	PHILADELPHIA, PA 19131	52-2454465
SIGMA BETA CORPORATION		51-0577197
SIGMA CHI CHAPTER	ONEONTA, NY 13820	15-0572089
SIGMA DELTA CORPORATION	MONTGOMERY, AL 36106	63-0885066
SIGMA GAMMA CORPORATION	BOONE, NC 28608	32-0278627
SIGMA OMICRON CORPORATION	STATE UNIVERSITY, AR 72467	71-6066577
SIGMA RHO CHAPTER	SLIPPERY ROCK, PA 16057	23-7004114
SIGMA RHO CORPORATION	SLIPPERY ROCK, PA 16057	23-7425246
SIGMA TAU CORPORATION	CHESTERTOWN, MD 21620	52-1067065
TAU DELTA CORPORATION	BIRMINGHAM, AL 35254	23-7327007
TAU GAMMA CHAPTER	CHENEY, WA 99004	91-1618250
TAU GAMMA CORPORATION	CHENEY, WA 99004	91-1440036
TAU LAMBDA CHAPTER	YORK, PA 17404	25-1502007
TAU LAMBDA CORPORATION	YORK, PA 17404	31-1127750
TAU OMEGA CHAPTER	LEXINGTON, KY 40508	61-1152003
TAU OMEGA CORPORATION	LEXINGTON, KY 40508	61-1102879
THETA BETA CORPORATION	TOWSON, MD 21093	25-1532804
THETA CHI CHAPTER	SIOUX CITY, IA 51106	42-6090024
THETA CHI CORPORATION	SIOUX CITY, IA 51106	
THETA OMEGA CORPORATION	PHOENIX, AZ 85013	86-0712496
THETA PI CORPORATION	STATEN ISLAND, NY 10301	13-6162700
THETA PSI CORPORATION	TOLEDO, OH 43606	34-6609166
UPSILON LAMBDA CORPORATION	SAN ANTONIO, TX 78240	47-0814205
ZETA PI CORPORATION	BIRMINGHAM, AL 35216	63-1075612

STATEMENT 1

LISTED BELOW ARE NAMES, LOCATIONS AND FEDERAL EIN NUMBERS OF CHAPTERS NOT INCLUDED IN THE GROUP RETURN

SIGMA CORPORATION	BERKELEY, CA 94704	94-0276950
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ALPHA OMICRON PI FRATERNITY, INC. - GROUP RETURN
ATTACHMENT TO 990 - GROUP RETURN
I.D.# 23-7046541
FYE 6/30/09

PART IX, PAGE 10, LINE 22, DEPRECIATION AND
FORM 4562, PART III, LINE 17, MACRS DEDUCTIONS FOR ASSETS
PLACED IN SERVICE IN TAX YEARS BEGINNING BEFORE 2008

<u>CHAPTER</u>	<u>DEPRECIATION</u>
ALPHA CHI	6,609
ALPHA DELTA	71,982
ALPHA GAMMA	57,025
ALPHA LAMBDA	29,659
ALPHA PHI	4,556
BETA GAMMA	1,936
BETA PHI	3,860
DELTA BETA	1,569
DELTA DELTA	528
DELTA SIGMA	64,910
GAMMA OMICRON	45,101
IOTA	67,740
IOTA SIGMA	661
KAPPA OMEGA	7,262
KAPPA RHO	1,907
LAMBDA SIGMA	50,324
NU BETA	138,706
NU OMICRON	41,892
OMEGA UPSILON	1,942
PHI SIGMA	3,195
RHO OMICRON	1,009
SIGMA ALPHA	1,711
SIGMA CHI	3,806
TAU	25,017
XI	1,789
XI OMICRON	6,542
ZETA PSI	4,106
AOII PROPERTIES, INC.	469,936
	<u>1,115,280</u>