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Form 990-PF

Department of the Treasury

# **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

OMB No. 1545-0052

	Hai Heven	40 0014100	110101 111010111	anon may are				,		, ,			
For	calenda	r year 2009, or tax	k year beginning				, 2	2009, an	d end	ling		, 20	
G Check all that apply: Initial return					1	nıtıal return	of a former	public c	harity		Final retu	rn	
Amended return				turn	- [	Address	change	Γ	Nam	e change			
He	e the IR	S Name of found	ation						•	A Emple	yer Identifi	cation number	
<b>U</b> 3	label.	•	silon Cha	n. De	el1	ta Kap	pa Gam	ma S	oci	_	331950		
Ot	herwise		reet (or P.O. box nur					Room/		+		r (see instructions)	
	print		ain Stree			ienvereu to su	ieet audiess;	1100111/	Juito		) 544-8	•	
	or type.	<del> </del>				· · · <del></del>		_		+ <del></del>	<del></del>	_	
	Specifi		ate, and ZIP code									is pending, check here	_ <u> </u>
		s Robinson										ations, check here	
_		pe of organization:										ons meeting the 85% and attach computation	▶ _
Ш	Section 4	4947(a)(1) nonexen	<del></del>			<del></del>	te foundatio	n			ated under	on status was section	_
I F	aır marke	et value of all asset	s at end of	J Account	ng n	nethod $X$	Cash _	Accrua	al		)(1)(A), chec		▶∟
уe	ear (from	Part II, col. (c), line	e 16)	Other	(spe	ecify)					loundation is lation under	s in a 60-month	_
▶\$	;		89,409	Part I, colui	mn (	d) must be	on cash bas	sis )			)(1)(B), chec		▶
Pa		alysis of Revenue		(a) B		nue and						(d) Disbursemen	ts
	(Th	ne total of amounts		` '		es per	( <b>b</b> ) Net in		nt		sted net	for charitable purposes	
		, & (d) may not ned lounts in column (a		, , .	boo	•	Inco	ome	- 1	inco	ome	(cash basis only	<i>(</i> )
	1 Co	ntributions, gifts, gran											<del></del>
	2 Ch	ttach schedule) heck ▶ X if the foun to attach S	dation is <b>not</b> require	ed	•	,		•			***************************************		
													•••••
		terest on savings and to	,	ts		0 007		2 00	<del>.  </del>		2 007		
	1	vidends and intere				2,897		2,89	,,		2,897	<u>.</u>	
	1	ross rents		·									
р		et rental come or (loss)											
R	1	et gain/(loss) from sale	of assets not on line	10		47		·····					
v	b Gr all	oss sales price for l assets on line 6a	47	_									
Ε	7 Ca	apital gain net income (f	rom Part IV, line 2), ,					4	17				
N	8 Ne	et short-term capita	al gaın		******						0		
U	1	come modifications	=								0		
E	10 a Gr	oss sales less	C	·····				······································				***************************************	
	<b>b</b> Le	ns. & allowancesess Cost of											
		ross profit or (loss)	(attach schodule	<del>.  </del>									
	1	ther income (attach	•	·									
	1	•	•	<u> </u>		2,944		2,94			2,897		*******
ᢐ	Co	otal. Add lines 1 the						2,34	-		2,031		
P	13 dir	rectors, trustees, etc .				0							
E		ther employee sala	•						_				
R		ension plans, empl					<u> </u>						
Î		egal fees (attach sc	•	·		360		36	50		360	36	60
Į.		ccounting fees (atta											
N G	<b>c</b> O	ther professional fe	es (attach sche#@	à [		780		78	30		780	78	80
& &	17 In	terest		. [									
	18 Ta	XES (attach schedule	e) (see instruction#3	3		48		- 4	18		48		48
A D		epreciation (attach s											
M	1	ccupancy											
Į.	1	ravel, conferences,						-	$\neg \dagger$				
N	1	rinting and publicat	<del>-</del>				<u> </u>						
E	1		THE RESERVE OF THE PARTY OF THE			-	-		$\dashv$				
P		ther expenses atte		<b>\</b>					$\dashv$			·	
Ε		otal operating and		1		1 100.		7 76	,		1 100	, , ,	00
N S	ex	xpenses. Add lines	2 Man	<b> </b>		1,188	<del> </del>	1,18	-		1,188	1,18	
E S	1	on Butto NA Day ts. I	13 442	·}		4,252			+	<u> </u>		4,2	
<u>_S</u>		ta exp. & disbursemen		25		5,440	ļ	1,18	38		1,188	5,44	4 U
	27 St	ubtract line 26 tron	Hine 12:15	1									
	ar	ubtract line 25 tron xcess of revenue nd disbursements	X401 'exhanses	<u></u>		-2,496	ļ				****************	·····	) <del>                                      </del>
	b Ne	et investment inco	ome (If neg., enter -	0-)				1,75	6				
_	C A	djusted net incom	e (if neg., enter -0-)								1,709		
For	Privacy	Act and Paperwo	rk Reduction Ac	t Notice, se	e th	ne instructi	ons.					Form <b>990-PF</b> (2	2009

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<b>n</b> -	rt II	Polonee Chapte description column should be for	Beginning of year	Ena c	t year
Pa	ift ji	Balance Sheets description column should be for end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing			
	2	Savings and temporary cash investments	1	1	1
	3	Accounts receivable▶			
		Less allowance for doubtful accts. ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accts. ▶	[		
	5	Grants receivable		··············	
AS	6 7	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions).  Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts			
S E	8	Inventories for sale or use			
T	9	Prepaid expenses and deferred charges			
S	10a	Investments U.S. and state govt obligations (attach sch)			
	b	Investments corporate stock (attach schedule) #4 .	39,770	37,291	37,330
	11 12	Investments corporate bonds (attach schedule) #5.  Investments land, buildings, and equipment basis Less accumulated depreciation (attach schedule)  Investments mortgage loans	50,000	50,000	52,078
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment basis			
	'	Less accumulated depreciation	1		
	15	(attach schedule) ▶ Other assets (describe ▶			
	16	Total assets (to be completed by all filers see the			
	''	Instructions Also, see page 1, item i)	89,771	87,292	89,409
L	17	Accounts payable and accrued expenses	357,7.2	0.7232	33,123
Ĭ	18	Grants payable			
A B	19	Deferred revenue		<del></del>	
L	20	Loans from officers, directors, trustees, and other disqualified persons .			
1	21	Mortgages and other notes payable (attach schedule)			
T	22				
E S	23	Other liabilities (describe ►)  Total liabilities (add lines 17 through 22)	0	0	
<u> </u>	23	Foundations that follow SFAS 117, check here	0		
		and complete lines 24 through 26 and lines 30 and 31.			
ΝF	24	Unrestricted			
E U	25	Temporarily restricted		· · · · · · · · · · · · · · · · · · ·	
, D	26	Permanently restricted			
ŝΒ	20	Foundations that do not follow SFAS 117, ck. here ▶ 🏻			
s A		and complete lines 27 through 31.			
ASSETS	27	Capital stock, trust principal, or current funds	89,771	87,292	
sμ	28	Paid-in or capital surplus, or land, bldg, and equipment fund	35,111	01,232	
OE RS	29	Retained earnings, accumulated income, endowment, or other funds		·	
K S	30	Total net assets or fund balances (see the instructions)	89,771	87,292	
	31	Total liabilities and net assets/fund balances (see the inst )	89,771	87,292	
Pa	rt III			0.7,555	<u> </u>
1		Il net assets or fund balances at beginning of year Part II, colum		e with	
•		-of-year figure reported on prior year's return)	- ·		89,771
2			-2,496		
3		er amount from Part I, line 27a		3	17
4		lines 1, 2, and 3			87,292
5		reases not included in line 2 (itemize) ▶		5	
6		ıl net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), line	30	87,292

37-1331950

JVA

Pŧ	art IV Capital Gains ar	nd Losses for Tax on Inv	estment Income	e		
	(a) List and describe the 2-story brick warehous	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)			
1a	See attachment #					
b						
С						
d						·
е			Ť			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or of plus expens		, ,	n or (loss) ) minus (g)
a						
b						
С						
d						
<u>e</u>				- 40/04/00		
	Complete only for assets showl	ng gain in column (h) and owned	T			. (h) gain minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col. (j)		• • •	less than -0-) or om col. (h))
<u>a</u>						
b		<del></del>				
		<del></del>				
<u>d</u>						
е					<u>-</u>	
2	Capital gain net income or (net	capital loss) If gain, a	lso enter in Part I, lin enter -0- in Part I, lir	e 7 ne 7	2	47
3		oss) as defined in sections 1222( 3, column (c) (see the instructions		\		
	If (loss), enter -0- in Part I, line	8		J ····	3	0
P	art V Qualification Un	der Section 4940(e) for F	Reduced Tax on	Net Investm	nent Income	
(Fo	r optional use by domestic privat	te foundations subject to the sect	ion 4940(a) tax on ne	et investment inc	ome.)	
lf se	ection 4940(d)(2) applies, leave t	his part blank				
	5011011 10 10(d)(L) applies, leave (	and part blank.				
		ction 4942 tax on the distributable alify under section 4940(e) Do n			od?	. Yes X No
1	Enter the appropriate amount in	n each column for each year, see	the instructions befo	ore making any e	ntries	
	(a) Base period years	(b)		(c)		(d)
	Calendar year (or tax year beg in)	Adjusted qualifying distribut	noncha	let value of ritable-use assets	(col. (b)	tribution ratio divided by col. (c))
	2008	5,56		85,69		0.064939
	2007	5,68		89,12		0.063755
	2006	5,56		91,60		0.060750
	2005	5,61		90,12		0.062289
	2004	5,09	93	90,62	0	0.056202
_						0 205025
					<del></del>	0.307935
3	_	e 5-year base period divide tl en in existence if less than 5 year	_	o, or by the numb	1 _ 1	0.061587
4	Enter the net value of nonchar	table-use assets for 2009 from P	art X, line 5		4	87,026
_						
						5,360
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6	18
7	Add lines 5 and 6				7	5,378
8	Enter avalities a distantivities of the				1 1	
-		om Part XII, line 4				5,440

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Form	990-PF(2009) Alpha Upsilon Chap., Delta 37-1331950	_		Р	age 4		
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 se	e the Ir	nstructi	ons)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1						
	Date of ruling or determination letter: (attach copy of ruling letter if necessary see instructions)						
b		1			18		
	here ▶ X and enter 1% of Part I, line 27b						
C	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%						
	of Part I, line 12, col. (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0		
3		3			18		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0		
5	Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0	5			18		
6	Credits/Payments:						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
b	Exempt foreign organizations tax withheld at source 6b						
C	Tax paid with application for extension of time to file (Form 8868)  6c  6c						
d	Backup withholding erroneously withheld						
7		7			0		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			18		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10					
11		11					
	t VII-A Statements Regarding Activities			,			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participal	ıte or	<b></b>	Yes	No		
	Intervene in any political campaign?		1a		X		
b	<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for						
	definition)?		1b		X		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ned					
	or distributed by the foundation in connection with the activities.		•		x		
	c Did the foundation file Form 1120-POL for this year?						
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$	0	. [				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
_	on foundation managers ▶ \$ 0						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	ļ	X		
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			Ì			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	-	X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	4a	N/A			
b E	$\cdot$			11/2	X		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-		<u> </u>		
6	If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
O	By language in the governing instrument, or						
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>						
	conflict with the state law remain in the governing instrument?		6	Х	l		
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & Pa		7	X	<del></del>		
7 8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)	ut AV.	<b>-</b>	<u> </u>			
o a	► IL				1		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or						
D	designate) of each state as required by General Instruction G? If "No," attach explanation		8b	х			
٥		•	OD	_^			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	nnloto		1			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," com-	-	9		x		
10	Did any persons become substantial contributors during tax year? If "Yes," attach a schedule listing their names		-	<u> </u>			
	- · · · · · · · · · · · · · · · · · · ·		10		x		
JVA	and addresses		m <b>990</b> -	PF			

	1990-Fr (2009) Alpha Opsilon Chap., Delta 37-1331930	_	<u> </u>	age 5				
Par	t VII-A Statements Regarding Activities (continued)							
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the							
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	l	X				
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before							
	August 17, 2008?	12		X				
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?							
	Website address ► N/A							
14	The books are in care of ▶See attachment #8  Telephone no. ▶							
	Located at ► ZIP+4 ►							
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			<b>•</b>				
	and enter the amount of tax-exempt interest received or accrued during the year			-				
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		-					
<u> </u>	File Form 4720 If any Item is checked in the "Yes" column, unless an exception applies.	T	Yes	No				
1a			1	<u> </u>				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			-				
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)							
	a disqualified person?							
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?							
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?							
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1				
	for the benefit or use of a disqualified person)?			1				
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			1				
	If the foundation agreed to make a grant to or to employ the official for a period			1				
h	after termination of government service, if terminating within 90 days.)							
b	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?			- T				
	Organizations relying on a current notice regarding disaster assistance check here	1b		X				
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,							
·	that were not corrected before the first day of the tax year beginning in 2009?			·				
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c	ļ	X				
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):							
_				]				
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d			1				
	and 6e, Part XIII) for tax year(s) beginning before 2009?							
<b>b</b>	If "Yes," list the years > 20 , 20 , 20 , 20							
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)							
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			ļ				
_	to all years listed, answer "No" and attach statement see the instructions)	2b	ļ	X				
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			•				
_	▶ 20, 20, 20			ŧ				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business							
	enterprise at any time during the year?							
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation							
	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved			1				
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)			1				
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			1				
_	if the foundation had excess business holdings in 2009.)	3b		X				
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X				
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			•				
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X				
JVA	09 990PF5 TWF 33163 Copyright Forms (Software Only) - 2009 TW Form	aan_	.PF /	(anna)				

		-PF (2009)Alpha Upsilon Chap.			<del></del>			Page 6		
Par	VI	-B Statements Regarding Activ	vities for Which	Form 4720 May Be	Required (continue	ed)				
5 a	Dur	ing the year did the foundation pay or incui	r any amount to							
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?									
	(2) Influence the outcome of any specific public election (see section 4955), or to carry									
	on, directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	(4) Provide a grant to an organization other than a charitable, etc., organization described									
	ın section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)									
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or									
	educational purposes, or for the prevention of cruelty to children or animals? Yes 🔀 No									
b		ny answer is "Yes" to 5a(1)-(5), did any of t		• •				1,,		
	_	gulations section 53.4945 or in a current not	•	,	•	·::·	5b	X		
_		anizations relying on a current notice regard								
С		e answer is "Yes" to question 5a(4), does the		· ·	NI/A Dva D					
		ause it maintained expenditure responsibilities," attach the statement required by Regu			.N/A   Yes	No				
6a		the foundation, during the year, receive an		, ,						
va		a personal benefit contract?	•		Yes 🛛	No		-		
ь		the foundation, during the year, pay premit				""	6b	x		
		es" to 6b, file Form 8870.	arris, directly or indirec	bly, on a personal benefit	Contracti	}	00			
7a		iny time during the tax year, was the founda	ation a party to a proh	ibited tax shelter transact	ıon? ☐ Ves 🏋	No		1		
		es, did the foundation receive any proceeds					7b	x		
Par	<del></del>					aid En				
LTX		and Contractors	<b>,</b>	,	g,g, .			,		
1	List	all officers, directors, trustees, foundati	on managers and the	elr compensation (see ti	ne instructions).		···			
			(b) Title, and avg	(c) Compensation	(d) Contributions to	(e) Ex	pense	account,		
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred comp.	SI''	er allov	•		
Sec	a	ttachment #9					_			
		•								
						1				
						<u> </u>	<del></del> .			
2		npensation of five highest-paid employe	es (other than those	Included on line 1 se	ee the instructions).					
	II n	one, enter "NONE."			(d) Contributions to					
(a	) Na	me and address of each employee paid	(b) Title, and avg.	(2) (2	employee benefit	(e) Ex	pense	account,		
-	-	more than \$50,000	hours per week , devoted to position	(c) Compensation	plans and deferred	oth	er allov	ances		
Sec		ttachment #10			compensation	<del> </del>				
500		ccacimenc #10								
						ļ				
Total	nun	nber of other employees paid over \$50,000					<b></b>	0		

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Part VIII Information About Officers, Directors, Truste	es, Foundation Managers, High	lly Paid Employees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional service		
(a) Name and address of each person paid more than \$50,000 See attachment #11	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year includer of organizations and other beneficiaries served, conferences convened, research papers	relevant statistical information such as the number	▶ Expenses
See attachment #12	produced, etc	
15ee accacimient #12		
		4,252
2		
3		

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
All other program-related investments See the instructions.	
See attachment #13	
otal. Add lines 1 through 3	
VA 09 990PF7 TWF 33165 Copyright Forms (Software Only) ~ 2009 TW	Form <b>990–PF</b> (2009

Pa	rt X   Minimum Investment Return (All domestic foundations must complete this part. Foreign found see the instructions.)	lations	•
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	T	
'			
_	purposes:	4.	00 250
a	Average monthly fair market value of securities	1a	88,350
b	Average of monthly cash balances	1b	1
C	Fair market value of all other assets (see the instructions)	1c	00.251
d	Total (add lines 1a, b, and c).	1d	88,351
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	┦ _	
2	Acquisition indebtedness applicable to line 1 assets	2	22.27
3	Subtract line 2 from line 1d	3	88,351
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	the instructions)	4	1,325
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	87,026
6	Minimum investment return. Enter 5% of line 5	6	4,351
Pa	Titizen Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here ▶ and do not complete this part.)	т.	r
1	Minimum investment return from Part X, line 6	1	4,351
2a	Tax on investment income for 2009 from Part VI, line 5	_	
b	Income tax for 2009 (This does not include the tax from Part VI.)	-	
С	Add lines 2a and 2b	2c	18
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,333
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,333
6	Deduction from distributable amount (see the instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,333
Pa	Qualifying Distributions (see the instructions)		
		<b>,</b>	<del> </del>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	5,440
b	Program-related investments total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,440
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see the instructions)	5	18
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,422
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	he four	ndation
	qualifies for the section 4940(e) reduction of tax in those years.		
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rai	t XIII Undistributed Income (see th	e instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				4,333
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2009				
_	From 2004				
b					
	From 2006				
	From 2007				
	From 2008				
	Total of lines 3a through e	0			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 5,440				
	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required see the instructions)				·····
С	Treated as distributions out of corpus				
_	(Election required see the instructions)				
	Applied to 2009 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009 .	<del></del>			
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	Indicated below:				
	Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				·······
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount see the instructions	·····			
e	Undistributed income for 2008. Subtract				
	line 4a from line 2a. Taxable amount				
	see the instructions				
f	Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2010				4,333
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2004				
	not applied on line 5 or line 7 (see the				
	ınstructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
	Excess from 2005				
b	Excess from 2006 .				
	Excess from 2007 .				
	Excess from 2008				
	Excess from 2009			1	

			Detta 3			Page 10
	rt XIV Private Operating Found If the foundation has received a ruling or				<del>-</del>	
ıa	foundation, and the ruling is effective for				N	/A
ь	Check box to indicate whether the found		-	· · · · · · · · · · · · · · · · · · ·		4942(J)(5)
	Enter the lesser of the adjusted net	Tax year	Jeranny louridation	Prior 3 years	1 4542()(3) 01	4542()(0)
20	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for each	(a) 2009	(b) 2000	(6) 2007	(u) 2000	
h	year listed			+	<del> </del>	<del></del>
		<del> · · · · · · · · · · · · · · · · · · </del>	<del> </del>			
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct exempt act.					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test enter					
	(1) Value of all assets				<u> </u>	
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test enter 2/3 of min investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test enter.					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a) (5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3) (B)(III)					
	(3) Largest amount of support from an exempt organization.					
	(4) Gross investment income		1		<u> </u>	
Pa	t XV Supplementary Informati	on (Complete	this part only i	f the foundation	n had \$5,000 or	more in assets
	at any time during the ye	ear see the	instructions.)			
1	Information Regarding Foundation Mar	nagers:				
а	List any managers of the foundation who	have contributed r	nore than 2% of the	total contributions re	eceived by the found	lation before the
	close of any tax year (but only if they have	e contributed more	than \$5,000) (See	section 507(d)(2).)		
	None					
b	List any managers of the foundation who of a partnership or other entity) of which to None				ally large portion of t	he ownership
2	Information Regarding Contribution, G	rant, Gift, Loan. S	cholarship, etc Pr	ograms:		
	Check here ▶ ☐ If the foundation only		• • •	_	s and does not acce	ept unsolicited
	requests for funds. If the foundation make					
	complete items 2a, b, c, and d.	3 7 3 7	•	•	•	· · · · · · · · · · · · · · · · · · ·
a	The name, address, and telephone numb	er of the person to	whom applications	should be addresse	ed:	
See	e attachment 14					
	The form in which applications should be attachment 14	submitted and info	ormation and mater	als they should inclu	de:	
С	Any submission deadlines		<del></del>			<del></del>
See	e attachment 14					
	Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of in	stitutions, or other fa	actors:
JVA	e attachment 14  09 990PF10 TWF 33156 Copyrig	ht Forms (Software On	nlv) - 2009 TW		En	rm <b>990–PF</b> (2009)

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Du			or Future Payment	γ
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See attachment #15	or substantial contributor			
Total	<u> </u>		▶ 3a	4,252
b Approved for future payment See attachment #16				
Total			▶ 3b	1

Form 990-PF (2009) Alpha Upsilon Chap., Delta 37-1331950

Page 12

inter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income
	Business	Amount	Excl.	Amount	(See the
1 Program service revenue	code		code		ınstructions.)
a					
b					
c					
d					
e		_			
f		_			
g Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	2,897	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property [					<u> </u>
6 Net rental income or (loss) from personal property					
7 Other investment income [					
8 Gain or (loss) from sales of assets other than inventory	_		14	47	
9 Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory , , $$					
11 Other revenue. a					
b					··· •
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		2,944	0
13 Total. Add line 12, columns (b), (d), and (e)				13	2,944

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼ Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.)

See attachment #17

Pe	irt XV	Information F Exempt Orga		ansfers To and	d Transact	tions and	Relationships W	ith Nonchari	table	
1	Did th	<del>_</del>		age in any of the fol	llowing with a	nv other or	ganization described in	section	Yes	No
•		•		•	•	•	to political organization	1	1	1
а	•	fers from the reporting	٠,			_	, ,			
	(1)	Cash						1a(1)		X
								<del></del>		X
b		transactions							1	
	(1) 5	Sales of assets to a non	charitable exemi	ot organization				1b(1)		X
	٠.							<del></del>		X
									T	X
										X
		oans or loan guarantee								X
										X
c			•	_						X
d		=	_				should always show the	·	e of the	<u></u>
2 a	ı İs the	foundation directly or i	ndirectly affiliated	d with, or related to,	, one or more	tax-exemp	ot organizations describ	ed in		
_		on 501(c) of the Code (c		n 501(c)(3)) or ın se	ection 527? , ,			X	es [	No
b	it "Ye	s," complete the follows					/ \ D :			
#1	0	(a) Name of organizat	ion	(b) Type of	f organization	)	(c) Descripti	on of relationship	<del>-</del>	
S	Under p true, co	: angel K Juh	, TRUSTEE	ed this return, including her than taxpayer or fid	accompanying luciary) is based	5/13/10	d statements, and to the bestition of which preparer has	st of my knowledge any knowledge.		
G	▼ Sigi	nature of officer or trust	ee		15	Date	Title	<b>D</b>	4	
N HER	Paid Pre- par- er's	Preparer's signature	ag Ci	Dele	5/4/	2010	Check if self-employed ▶☐	Preparer's identification number (see Signature the instructions)	nature	ın :
Ë	Use	Firm's name (or yours		hillips We			EIN ▶			
	Only	ıf self-employed),	216 S		Stree	t	Phone no.			
		address, and ZIP cod	e' Robin	son. II 62	2454		1(618) 5	44-8661		

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#### SCHEDULE OF LEGAL FEES

Attachment 1: page 1 - 990-PF Page 1, Part I, Line 16a Open to Public Inspection For calendar year 2009, or tax period beginning , and ending **Employer Identification Number** Name of Organization Alpha Upsilon Chap., Delta Kappa Gamma Society Intl Tru37-1331950 Net Investment Adjusted Disbursements for Legal Description **Amount** Income Net Income Charity Cox, Phillips, Weber, et al 360 360 360 360

360

360

Total

360

360

# SCHEDULE OF OTHER PROFESSIONAL FEES

Attachment 2: page 1 - 990-	·PF Page 1, F	art I, Line	16c	
Open to Public				
Inspection For calendar year 2009, or tax	period beginning	, and	ending	•
Name of Organization				tification Number
Alpha Upsilon Chap., Delta	Kappa Gamma			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
First Financial Bank-Trustee Fees	780			
			:	
Total	780	780	780	780
. Ottal		, , , ,		

#### **SCHEDULE OF TAXES PAID**

Attachment	t 3: page 1 - 990-	PF Page 1,	Part I, Line	18	
Open to Public	For calendar year 2009, or tax p	oried beginning	and	ending	
Inspection Name of Organiza		perioa beginning	, and		tification Number
		Kappa Gamma	Society Intl		
		Amount	Income	Net Income	Charity
	Category State Fees	Kappa Gamma Amount 48	Net Investment	Adjusted	Disbursements for
	T-1-1		1.0		
	Total	48	48	48	48

# SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

Attachment 4: page 1 - 990-PF Page 2, Part II, Line 10b

Attachment 4: page 1 - 990-PF Page 2, F	art II, Line	10b	<del></del>
Open to Public Inspection For calendar year 2009, or tax period beginning	, and e	ndina	
Name of Organization	, and e		ntification Number
Alpha Upsilon Chap., Delta Kappa Gamma	Society Intl		
Description of Property	Cost FMV at	Book Value	Fair Market Value
Fed 39 Max Cap	Year End	1,850	964
Fed 151 Mid Cap	X	3,118	3,262
Am 405 Grw Fd Cl F	X	7,042	7,823
Fed 856 Prime Value	X	25,160	25,160
Fed 856 Prime Val II ,	X	121	121
		1	
		1	
	<u> </u>	ł	

Total

37,291

#### SCHEDULE OF INVESTMENTS - CORPORATE BONDS

Attachment 5: page 1 - 990-PF Page 2, Part II, Line 10c Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** Alpha Upsilon Chap., Delta Kappa Gamma Society Intl Tru37-1331950 FMV at Fair Market Value **Description of Property** Cost Book Value Year End McGraw 5.375 111512 X 25,000 26,462 SLMA CD 3.85 121010 Х 25,000 25,616 Total 50,000 52,078

#### SCHEDULE OF OTHER INCREASES

Attachment 6: page 1 - 990- PF Page 2, Part III, Line 3 Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** Alpha Upsilon Chap., Delta Kappa Gamma Society Intl Tru37-1331950 Description of Increase **Total Amount** Adjustment 17 Total 17

#### PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		age 1 - 990-PF Pag	e 3, Part IV	, line 1		
	n to Public					
		ndar year 2009 or tax period beginr	ing	, and end		<u> </u>
	of Organization	han Dalta Kanna	g g:	T M	Employer Identi	
AID		hap., Delta Kappa			d (c) Date acquired	(d) Date sold
	1	cribe the kind(s) of property sold (e.g warehouse; or common stock, 200 s		P Purchase D Donation	(mo., day, yr.)	` '
1		Max Cap Fund	ils. WILC Co )	D Donation P		(mo., day, yr) 12-10-2009
		•				
	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or oth		(h) Gain o	
1	4:	(or allowable)	plus expens	e of sale	(e) plus (f)	minus (g) 4 7
-	(I) F.M V as of 12/31/69	s showing gain in column (h) and ov			(I) Gains (Col. (I	
	(1) F.IVI V 45 UI 12/31/09	as of 12/31/69	(k) Excess if	• • • • • • • • • • • • • • • • • • • •	col (k), but not l	·
1		as of 12/31/69	over col (j	o, if any	Losses (fro	m col. (h)) 47
		Ī		ł		

#### **BOOKS ARE IN CARE OF**

Attachment	8 - 990-PF Page 5, Part VII-A, Line 14
Open to Public	
Inspection	For calendar year 2009, or tax period beginning , and ending .
Name of Organizati	on Employer Identification Number
	lon Chap., Delta Kappa Gamma Society Intl Tru37-1331950
Part VII-A - Line 14	
Individual Name	
or or	
Business Name.	
	ncial Bank
Street Address	
U.S. Address	
Zıp code	62454 City Robinson State IL
or	
Foreign Address	
City	
_	
Province or	State
Country	
Country ,	··· ··· ··· ··· ··· ··· ··· · · · · ·
Postal code	
Phone Num	ber
Fax Number	

#### **CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

Attachment 9: page 1 - 990-PF Page 6, Part VIII

Open to Public	<u> </u>	220 11 14gc 07			· · · · · · · · · · · · · · · · · · ·
Inspection		09, or tax period beginning	, and	ending	•
Name of Organization					tification Number
		Delta Kappa Gamma			
(A) Na	me and Address	(B) Title and Average	(C) Compensation (If	(D) Cont. to Employee	(E) Expense Account
Jacquie Co	chonour	Hrs. per Week President	not paid, enter 0)	Ben. Plans & Def Comp	& Other Allowances
bacquie co	CHOHOUI	FIESIACIC			
,			0	o	0
Rita Steph	ens	Secretary			
_					
<u>′</u>			0	0	0
Linda Null		Treasurer			
			0		•
, Jane Casey		Past	١	0	0
cane case,		President			
,			o	0	0
Dixie Purc	ell	Scholarship			_
		Chair			
,	_		0	0	0
Sheryl Bra	ndenburg	Personal			
		Growth	_	_	_
, Carolyn Rij	nlow	Committee	0	0	0
Caroryn Ki	breà	Committee			
			О	o	0
,				Ĭ	Ŭ
				!	
.IVA Converght Fore	ms (Saftware Only) = 2009 T	W 10821E			OR FORENIA

#### **COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES**

Attachment 10: page 1 990-PF	' Page 6. Part V	TII. Line	1	
Open to Public				
Inspection For calendar year 2009, or tax per	rlod beginning	, and end		<del></del>
Name of Organization Alpha Upsilon Chap., Delta K	anna Camma Codi	oty Intl m	Employer Identifi	
Part VIII Compensation of the Five High	est Paid Employees Otl	her Than Office	ors Directors a	nd Trustoes
(a) Name and address of each employee paid more	(b) Title and average hours		(d) Contributions to	(e) Expense
than \$50,000	per week devoted to position	(c) Compensation	empl. benefit plans & deferred compensation	(e) Expense account and other allowances
None				
		0	o	0
•			ľ	•
			:	
				:
	!			
,				
		:		
			•	
			ļ	

# COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

Attachment	t 11: page 1 990-PF Page 6, Part		2	
Open to Public				
Inspection	For calendar year 2009, or tax period beginning	, and end		Marking North an
Name of Organiza		iotr Intl		ification Number
Alpha ups.	ilon Chap., Delta Kappa Gamma Soci npensation of the Five Highest Paid Independent	Contractors for	Professional S	Convious
(a) Name and a	address of each independent contractor paid more than \$50,000	(b) Type	of service	(c) Compensation
None			<del></del>	- · · · · · · · · · · · · · · · · · · ·
,				0

#### SUMMARY OF DIRECT CHARITABLE ACTIVITIES

Attachment 12: page 1 - 990-PF Page 7, Part IX-A, Line 1

Open to Public Inspection For calendar year 2009, or tax period beginning , and ending .

Name of Organization Alpha Upsilon Chap., Delta Kappa Gamma Society Intl Tru37-1331950

Charitable Activity

\$4252 distributed to committee for charitable scholarship purposes in 2009

# **SUMMARY OF PROGRAM-RELATED INVESTMENTS**

Attachment	: 13	: page	1 - 99	0-PF Pa	age 7.	Part IX	-B. L:	ine	3	
Open to Public	<u> </u>	. <u>page</u>			-30 , /		<u> </u>		<u> </u>	<del> </del>
Inspection	For c	alendar year	2009. or tax	period beal	nnina		, and e	endina		
Name of Organizat			2000, 0. 10.	ponou nog.	9		,		Employe	r Identification Number
Alpha Upsi	.lon	Chap.	Delta	Kappa	Gamma	Society	Intl	Tru	37-13	31950
	<u> </u>			ram-Related			<del></del>			Amount
None										
1.0110										
									ĺ	
									1	

# APPLICATION SUBMISSION INFORMATION

Line 2	
, Part XV,	
990-PF Page 10	
page 1 9	۲
Attachment 14:	Open to Publi

. 61	Employer Identification Number 7 - 1331950	Restrictions on Awards	Recruitment grants-Women grads. from area high schools. Scholarships-2 yr. chapter member	09_EOPFGR01L
and ending	23	Submission Deadlines	No submission deadlines	
For Calendar year 2009, or tax year perlod beginning	Gamma Society Intl Trust	Info and Materials included	No standard form	
For Calendar year 200	Delta Kappa	Phone Number	-544-8666	39 TW L0819F
Open to Public	Name of Organization Alpha Upsilon Chap., I	Name	ela Fuller, Trust icer st Financial Bank W. Main Street inson, IL 62454	JVA Copyright Forms (Software Only) - 2009 TW

# **GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR**

Attachment 15: page 1 990-	PF Page 11,	Part X	V Line 3a		
Open to Pu					
Inspection For calendar year 2009, or tax	period beginning		, and endin		·
Name of Organization		<b>a</b>	L. T. 1 m.		entification Number
Alpha Upsilon Chap., Delta	If recipient is an individual,	Foundation	ty Intl Tr		950
Recipient	show any relationship to	status of	Purpose of		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribi	uon	
Alpha Upsilon Chapter	None	N/A	Scholarshi		
Delta Kappa Gamma Society				-	
Committee for Scholarship					
					4,252
				l	
				Į	
					4 252

#### **GRANTS AND CONTRIBUTIONS FOR FUTURE PAYMENTS**

n to Public						
Inspection	For calendar year 2009, or tax	period beginning		, and ending		·
Name of Organizat						ntification Number
Alpha Upsi	lon Chap., Delta	Kappa Gamma		ty Intl Tru	<u> 37-1331</u> 9	950
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of gr		Amount
Name and a	address (home or business)	any foundation manager	recipient	contribution	on	Amount
	ved at this	or substantial contributor			-	
time	ved at this		i			
C I III C						
			į			
			i			
			j			
		-				
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			İ		i	
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					}	
					1	

# SCHEDULE OF RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES

Attachment 17: page 1 990-PF Page 12, Part XVI-B Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** Alpha Upsilon Chap., Delta Kappa Gamma Society Intl Tru37-1331950 Briefly describe how the activity reported in column (E) of Part VII specifically contributed to the accomplishment of the Line organization's exempt purposes (other than by providing funds for such purposes). Number ī N/A

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# SCHEDULE OF RELATIONSHIPS OF EXEMPT ORGANIZATIONS

Attachment 18: page 1 - 9	90-PF Page 13 Par	t XVII Line 2h
Open to Public	Jo II Tage 13, Tal	e AVII, BINC 2D
Inspection For calendar year 2009, or t	ax period beginning	, and ending .
Name of Organization		Employer Identification Number
Alpha Upsilon Chap., Delt	a Kappa Gamma Soci	
Name of Organization	Type of Organization	Description of Relationship
	Educational	members make up selection
Delta Kappa Gamma		committee and may receive
International Society		grants