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# 2619 05/25/2010 3 11 PM

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

2009

Open to Public Inspection

Α	For the 2009 o	calendar year, or tax year beginning , and ending		-	
В	Check if applicable	Please C Name of organization Seventh District Organization-Omega	a	D Emplo	yer Identification number
	Address change	use IRS Psi Phi Fraternity Inc			0.6005.60
	Name change	print or Doing Business As			2638563
	nitial return		Room/suite		one number
一	Termination	Specific Z0004 Falm Island Dilve			-445-1515
		Instruc- City or town, state or country, and ZIP + 4		G Gross rece	pts \$ 270,408
<u></u>	Amended return	tions Boca Raton FL 33498		LI/a) la thur	a and the section for
<i>,</i>	Application pending	F Name and address of principal officer Harry Harrell		affiliate	a group return for
		20064 Palm Island Dr		H(b) Are all	affiliates
		Boca Raton FL 33498		include	attach a list (see instructions)
	Tax-exempt sta			110,	attack a not (accomologona)
		www.omegapsiphi7d.com		H(c) Group	exemption number
	Type of organization		ear of formation		M State of legal domicile
		Summary			
	F	describe the organization's mission or most significant activities			
4		e mission is to perform community service and scholars	hips for	colleg	e
ũ	bou	ind youth.			
ELL.					
o e	2 Check	this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of	of its net assets		
<u>ග</u> නේ	3 Numbe	er of voting members of the governing body (Part VI, line 1a)		3	5
es	4 Numbe	er of independent voting members of the governing body (Part VI, line 1b)		4	_5
ivit	5 Total n	umber of employees (Part V, line 2a)		5	<del></del>
<i>C</i> ∂\ <b>0</b>		umber of volunteers (estimate if necessary)		6	
Ñ		ross unrelated business revenue from Part VIII, column (C), line 12		7a	
影-	<b>b</b> Net unr	related business taxable income from Form 990-T, line 34	Prior Yea	7b	Current Year
The CENNAGE Activities & Governance	8 Contrib	outions and grants (Part VIII, line 1h)		<del>''</del>	Current rear
		m service revenue (Part VIII, line 2g)	26:	1,080	266,784
Ver C		nent income (Part VIII, column (A), lines [74], and [74],		2,296	3,624
	11 Other r	nent income (Part VIII, column (A), lines 374, and 7d), revenue (Part VIII, column (A), lines 5, 6g, 8c, 9c, 10c, and 11e,010			
	12 Total re	evenue – add lines 8 through 11 (must equal Part VIII, column (A), line	263	3,376	270,408
22	13 Grants	and similar amounts paid (Part IX, column (A) DED EN, UT			
	14 Benefit	s paid to or for members (Part IX, column (A), line 4)			
sesued: 2010		s, other compensation, employee benefits (Part IX, column (A), lines 5–10)			
) esu	16a Profess	sional fundraising fees (Part IX, column (A), line 11e)			
ĝ	<b>b</b> Total fu	undraising expenses (Part IX, column (D), line 25) ▶			
Ä	17 Other e	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		7,871	191,019
	18 Total e	xpenses Add lines 13–17 (must equal Part IX, column (A), line 25)		7,871	191,019
	19 Revent	ue less expenses Subtract line 18 from line 12		5,505	79,389
Assets or	20 Tatal a		Beginning of Cur	8,365	End of Year 280,118
Asse Bala	20 Total lu	ssets (Part X, line 16) abilities (Part X, line 26)		5,208	57,799
Set	1	sets or fund balances Subtract line 21 from line 20		3,157	222,319
<u></u>	•	Signature Block		,,,,,	
		Juder penalties of pergary, I declare that I have examined this return, including accompanying schedules and	statements, and	to the best of	mv knowledge
	a	and belief, it is true correct, and complete Declaration of preparer other than officer) is based on all informa	ation of which prep	parer has any	knowledge
Sig	ın h	Jan B. Sanel		1	6/8/10
He		Signature of office	_	Date	
	h	Harry B. Harrel, Keeper of Fi	mance		
	J	Type or print name and title			
_		Preparer's Date	Check i	f	Preparer's identifying number (see instructions)
Pai	ia   s	lewis E Andrews 05/25	/10 self- employe	ed 🕨 🗌	061-44-1109
	eparer's	ANDREWS & COMPANY ACCOUNTANTS		EIN ▶	59-2203864
US	~ ~ ,	f self-employed), 9836 WEST SAMPLE ROAD		Phone	
		address, and ZIP + 4 CORAL SPRINGS, FL 33065		no 🕨	954-752-8130
May	the IRS disci	uss this return with the preparer shown above? (see instructions)	<del></del>		Yes No

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

				•
4d	Other program services (Describe	e in Schedule O)		
	(Expenses \$	including grants of \$	) (Revenue \$	)
4e	Total program service expenses	•		
				Form <b>990</b> (2009)
AA				

Form 990 (2009) Seventh District Organization-Omega 59-2638563

_Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		$\mathbf{x}^{-}$
2		<del></del>		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3	1	x
	candidates for public office? If "Yes," complete Schedule C, Part I	-	<u> </u>	<del></del> -
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	١.		
	Schedule C, Part II	4	├─	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
10	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	<u> </u>		
11		11	x	
	VII, VIII, IX, or X as applicable	<u> </u>		
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	ļ	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	<del></del> -		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	_		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	L	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	L	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 United States? If "Yes," complete Schedule F, Part I	14b		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	15		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	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
••	on Part IX, column (A), lines 6 and 11e <sup>2</sup> If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
13	If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	Did the digenization operate one of more hospitale; if Tea, complete contents if		n 990	(2009)

P	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		<u>x</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	ĺ		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	i		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ. <del></del>	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			37
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<del>                                     </del>	X
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	005		х
	Schedule L, Part IV	28b		<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	00-		х
	Part IV	28c		X
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	30		X
	conservation contributions? If "Yes," complete Schedule M	30_		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		х
32	Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	3,		
32		32		X
22	Schedule N, Part II	32		
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	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	-33		
34	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	37-		
33	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	33		- <del>-</del>
J-J	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30-		
J,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<del>,</del> -		
	=== 1 1 3 3 2 1011 Complete Contract Contrac		,	l

19? Note. All Form 990 filers are required to complete Schedule O

Рa	A V Statements Regarding Other IRS Fillings and Tax Compliance		Vaa	- No
4	Fates the grant of a specified in Pay 2 of Form 4006. Applied Summany and Transmittal of		Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		1	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
С	gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
20	Statements, filed for the calendar year ending with or within the year covered by this return			: }
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		L
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			Ė
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			É
	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		
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			ĺ
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			É
	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
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and 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).	Į.		ĺ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			Ė
	and services provided to the payor?	7a		<del> </del>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del> </del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _		
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		-	İ
	benefit contract?	7e 7f		<del></del>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			<del></del>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		1
_	required?	<u>'''</u>		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			· · ·
		8		1
	organization, have excess business holdings at any time during the year?	<b>_</b>		
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any tayable distributions under section 4966?	9a	[	İ
a	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
b 10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			Í
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	]		İ
11	Section 501(c)(12) organizations. Enter	1		ĺ
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	]		
-	amounts due or received from them )	1		•
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u></u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
		For	n 990	(2009)

Coral Springs

DAA

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Schedule O. See instructions					
Sec	tion A. Governing Body and Management				-	
				<b></b>	Yes	No
1a	Enter the number of voting members of the governing body	1a	_5			Ė
b	Enter the number of voting members that are independent	1b	5			Ĺ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					·
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed	?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5	ļ	X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			_7a	<u> </u>	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b	ļ	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following					Ė
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, 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			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Inf	ernal				
Rev	venue Code.)					
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		X
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?			10b		ļ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the					
	form?			11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990					<u> </u>
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
	rise to conflicts?			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this is done			12c	ļ	
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14		X
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?			•		
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b	ļ	X
	If "Yes" to line 15a or 15b, 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?			16a	ļ	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					Ė
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard				1	
	the organization's exempt status with respect to such arrangements?	-		1 <u>6b</u>	L	
	tion 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s on	y)				
	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 interes	t				
••	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 ► Andrews and Company 9836 West Sample Ro	ad				

954-752-8130

FL 33065

# 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 Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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

(A) Name and Title	(B) Average	Pos	ition (	(Chec	C) k all t	that ap	oply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
David Marion										
1st Vice Pre	15.00	<u> </u>		X				0	0	0
Andrew Ducksworth								_	_	_
Records Keep	15.00	ļ		X	L			0		
Harry Harrell	_							_		_
Finance	15.00	<u> </u>		X	<u> </u>	Ш		0	0	C
Keith Jackson									_	_
District Rep	15.00						X	0	0	0
-										

2619 05/25/2010				
Form 990 (2009	Seventh	District	Organization-Omega	59-2 <u>638563</u>
Part VII	Section A. Office	ers, Directors, Tru	stees, Key Employees, and Highest Co	empensated Employees (continued)

	(A) Name and Title	(B) Average	Pos	ition (	(Chec		hat ap	(vlac	(D) Reportable	(E) Reportable	(F) Estimated	d
		hours per week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount o other compensate from the organizatio and relate organizatio	on on ed
												- 1-a
1b 2	Total Total number of individuals (in	cluding but not lim	nited	to th	ose	listed	abo	<b>▶</b>	who received more than \$1	00,000 in	<u></u>	
	reportable compensation from	the organization	<u> </u>	0						***	Y	es No
3	Did the organization list any fo employee on line 1a? If "Yes,"								ee, or highest compensated			x _
4	For any individual listed on line the organization and related or	1a, is the sum of	f repo	ortab	le co	mpe	ensat	ion a				v
5	Individual  Did any person listed on line 1 services rendered to the organ										5	X
Sect	tion B. Independent Contract	ors								· · · · · · · · · · · · · · · · · · ·		
1	Complete this table for your five compensation from the organization	zation	ısate	d ind	lepe	nder	t cor	ntrac				<del></del>
	Name and	(A) d business address							Descrip	(B) tion of services	Сотр	C) ensation
								_				
					_			-				
		<del></del>						_				<del></del>
	Total number of independent of	contractors (include	lina t	out n	ot lin	nted	to th	ose	listed above) who received			
	more than \$100,000 in compe									<del> </del>	0 Form <b>9</b>	90 (2009)
DAA Form									FUHIT S	(2003)		

Pa	rt V	III Staten	nent of Reve	nue						
							(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
								exempt function	business revenue	excluded from tax under sections
<b>'</b> 0 '0				<u> </u>				revenue		512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam		1a						
ngr.	D	Membership di		1b 1c						
ifts	ت س	Fundraising ev		1d						
s, g	а Ө	Related organic Government grants		10						
ion	f	All other contribution		18						
but	•	and similar amounts		1f						
dri	a	Noncash contribution	ns included in lines 1a-		<u></u>					
ပ္ပြဲ	h	Total. Add line				▶				
Je l						Busn. Code				
ven	2a	Program	Service Rev	enue			266,784	266,784		
Re	b	•								
vice	С									
Ser	d									
ram	0									
Program Service Revenue			am service reven	ue		L	0.55			
_		Total. Add line					266,784		,	
	3		come (including d	iviaena	s, interes	t, and	3,624	3,624		
		other similar at		ovomn	hond pro	nonade .	3,024	3,024		
	4 5	Royalties	nvestment of tax-	exemp	t bond pro	oceeus -				
		Royallies	(ı) Real		(n) F	Personal				
	6a	Gross Rents	(1) 11001		(.,/.	5,55,12,				
	b	Less rental exps								
	c	Rental inc or (loss)								
	d	Net rental inco				<b>&gt;</b>	1			
	7a	Gross amount from	(i) Securities	3	(11)	Other				
		sales of assets other than inventory								
	b	Less cost or other								
		basis & sales exps								
	c	Gain or (loss)								
	d	Net gain or (lo		ſ		▶				
<u>•</u>	8a		om fundraising even	nts						
enc		(not including \$								
Rev			reported on line 1c)							
Other Revenu		See Part IV, line		a		_				
ot		Less direct ex	penses (loss) from fundr	b [	avente					
			om gaming activities		evenis		-			
	Ja	See Part IV, line		a					1 000 10000	
	b	Less direct ex		ь						
			(loss) from gami	ng acti	vities	<b>•</b>				············
		Gross sales of		آ آ						
		returns and all	-	a						
	b	Less cost of g	oods sold	b[						`
	С	Net income or	(loss) from sales	of inve	entory	<b>.</b>		······································		· · · · · · · · · · · · · · · · · · ·
		Misc	ellaneous Revenue	•		Busn. Code		-		
	11a									
	b									<del></del>
	C	A.11:				<del></del>			<u> </u>	
	d	All other reven								
	θ 12	Total. Add line	-				270,408	270,408	0	0
	12	lotal Kevenu	e. See instruction	15		•	210,408	210,408	0	

Form 990 (2009)

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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and			,	‡ ‡
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				<b></b>
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				<b>.</b>
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members		<del></del>		<u> </u>
5	Compensation of current officers, directors,				
	trustees, and key employees		<del></del>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<del> </del>
7	Other salaries and wages	<del>-</del> -	·*****		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9 10	Other employee benefits Payroll taxes				
10 11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	191,019			
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy		·		
17	Travel	_			<u> </u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	<u>-</u>			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			<u> </u>	
23	Insurance				
24	Other synance Itemine synance and				
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 )				
а	378 Of total expenses shown on line 23 below )		·		
b					
c			···		
d					
8					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	191,019			
26	Joint costs. Check here ▶ ☐ 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	:		L.,	<u> </u>

Par		Balance Sheet		(A)		(B)
			<u>.</u>	Beginning of year		End of year
	1	Cash—non-interest bearing		227 552	1	245,405
	2	Savings and temporary cash investments		237,552	2	245,405
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net			4	
ļ	5	Receivables from current and former officers, directors, t				
		employees, and highest compensated employees. Comp	lete Part II of		_	<u> </u>
İ		Schedule L		5	<u></u>	
	6	Receivables from other disqualified persons (as defined				
		4958(f)(1)) and persons described in section 4958(c)(3)(	B) Complete		_	Ī
ر س		Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
188	8	Inventories for sale or use			. 8	
4	9	Prepaid expenses and deferred charges	1 1		9	
1	10a	Land, buildings, and equipment cost or				•
		other basis Complete Part VI of Schedule D	10a			ŧ
	b	Less accumulated depreciation	10b		10c	
1	11	Investments—publicly traded securities		30,813	11	34,713
1	12	Investments—other securities See Part IV, line 11			12_	
1	13	Investments—program-related See Part IV, line 11			13	
1	14	Intangible assets			14	
1	15	Other assets See Part IV, line 11			15	
1	16	Total assets. Add lines 1 through 15 (must equal line 34	)	268,365	16	280,118
1	17	Accounts payable and accrued expenses		17		
1	18	Grants payable			18	
1	19	Deferred revenue			19	
2	20	Tax-exempt bond liabilities		<u> </u>	20	
တ္က 2	21	Escrow or custodial account liability Complete Part IV of	Schedule D		21_	
Liabilities	22	Payables to current and former officers, directors, trustee	es, key			•
ᅙ		employees, highest compensated employees, and disqui	alified			<b>‡</b>
<u> </u>		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third	parties		23	
2	24	Unsecured notes and loans payable to unrelated third pa	rties		24	
2	25	Other liabilities Complete Part X of Schedule D		55,208	25	57,799
2	26	Total liabilities. Add lines 17 through 25		55,208	26	57,799
S		Organizations that follow SFAS 117, check here ▶	and			
စ္အ		complete lines 27 through 29, and lines 33 and 34.				<u> </u>
<u> </u>	27	Unrestricted net assets			27	
E 2	28	Temporarily restricted net assets			28	
힏	29	Permanently restricted net assets			29	
ן לַּ.		Organizations that do not follow SFAS 117, check he	re ▶ 🛣			
-		and complete lines 30 through 34.		····· ···· ···· · · · · · · · · · · ·		
S	30	Capital stock or trust principal, or current funds			30	
je je	31	Paid-in or capital surplus, or land, building, or equipment	fund		31	
88	32	Retained earnings, endowment, accumulated income, or		213,157	32	222,319
~	33	Total net assets or fund balances		213,157	33	222,319
위)	34	Total liabilities and net assets/fund balances		268,365		280,118

Form **990** (2009)

orm	990 (2009) Seventh District Organization-Omega 59-2638563		Pa	ge <b>12</b>
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	_2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
ď	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2009)

SCHEDULE D . (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2009 Open to Public

Inspection Employer identification number Name of the organization Seventh District Organization-Omega 59-2638563 Psi Phi Fraternity Inc Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I 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) 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? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 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 Tax Year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_ \_ \_ \_ \_ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		Strict Organi					ente (c		-age ∠
	rt III Organizations Maintaining C						ers (c	onanaea)	
3	Using the organization's acquisition, accession, a collection items (check all that apply)	and other records, check a	ny of the following	that are a sig	gnificant use	OTITS			
а	Public exhibition	d Loan or	exchange program	ns					
b	Scholarly research	e Other					_		
С	Preservation for future generations								
4	Provide a description of the organization's collect Part XIV	tions and explain how they	further the organiz	zation's exem	npt purpose	in			
5	During the year, did the organization solicit or red				•			Yes	No
	assets to be sold to raise funds rather than to be rt IV Escrow and Custodial Arran				vorod "Vo	s" to For	rm 99(		
۳a				allon ansv	veleu ie	5 10 1-01	1111 990	u, rait	
	IV, line 9, or reported an amo			<del></del>					
1a	Is the organization an agent, trustee, custodian of	or other intermediary for co	ntributions or other	r assets not					٦
	included on Form 990, Part X?							∐ Yes [	_  No
b	If "Yes," explain the arrangement in Part XIV and	complete the following tal	ole			_			
						$\vdash$		Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Form	990, Part X, line 21?						Yes	_ No
b	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complet	te if organization ans	wered "Yes" to	o Form 99	0, Part I\	/, line 10	)		
		(a) Current year	(b) Pnor year	(c) Two yea	ars back (d	i) Three year	s back	(e) Four year	s back
1a	Beginning of year balance								
	Contributions								
С	Net investment earnings, gains,								
	and losses								
ď	Grants or scholarships								
	Other expenditures for facilities								
·	and programs								
f	Administrative expenses								
	End of year balance		-						
g 2	Provide the estimated percentage of the year en	d halance held as	<del></del>	<u> </u>			1		
	Board designated or quasi-endowment	%							
a 	Permanent endowment > %	<sup>76</sup>							
		n of the argenization that a	ro hold and admin	istorad for th	•				
Ja	Are there endowment funds not in the possessio	n or the organization that a	ii e rieiu ariu auriiiri	istered lot (II	6			Yes	No
	organization by							3a(i)	110
	(i) unrelated organizations								+-
	(ii) related organizations		- D0					3a(ii) 3b	+-
D	If "Yes" to 3a(ii), are the related organizations list	•						30	ь
4	Describe in Part XIV the intended uses of the ord			2 Dod V	line 40	-			<del></del>
Pa	rt VI Investments—Land, Buildin						Т	(d) D 1 - 1 -	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or ot basis (other		(c) Accum			(d) Book value	
1a	Land						1		
b	Buildings						<u> </u>		
С	Leasehold improvements								<del> </del>
	Equipment								
	Other								
Tota	. Add lines 1a through 1e (Column (d) must equa	I Form 990, Part X, colum	n (B), line 10(c))			<u> </u>			

Schedule D (Form	990) 2009 · Seventh District Organ	nization-Omega	59-2638563	Page <b>3</b>
Part VII Ir	nvestments—Other Securities. See Form 990			
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-ye	ar market value
Financial derivative	es			
Closely-held equity	y interests			
Other				<del> </del>
			<u>.                                    </u>	·
	<b></b>			
	· <del></del>			
Total (Column (b)	must equal Form 990, Part X, col (B) line 12)		······································	······································
Part VIII In	nvestments—Program Related. See Form 990	) Part X line 13		
4 OLT A111 11	(a) Description of investment type	(b) Book value	(c) Method o	f valuation
	(a) Description of investment type	(b) Book Value	Cost or end-of-ye	
	······································	-		
				<del> </del>
				<del></del>
				<del>.</del>
Total. (Column (b)	must equal Form 990, Part X, col (B) line 13)			
Part IX C	Other Assets. See Form 990, Part X, line 15.			<del></del>
	(a) Description			(b) Book value
		<del></del>	- · · · · · · · · · · · · · · · · · · ·	
			<u> </u>	
Total (Column (b)	) must equal Form 990, Part X, col (B) line 15)		<u> </u>	
	Other Liabilities. See Form 990, Part X, line 25		· · · · · · · · · · · · · · · · · · ·	<del>'</del>
1	(a) Description of liability	(b) Amount		
Federal income ta		(1, -1111		
	MEETING REGISTRATION	49,025		,
	GRADUATE DUES	5,429		
	UNDERGRADUATE DUES	3,345		
DEFERREL	ONDERGRADUATE DOES	3,343		
		<del> </del>		
	) must equal Form 990, Part X, col (B) line 25 )	57,799		
2. FIN 48 Footno	ote In Part XIV, provide the text of the footnote to the organiz	ation's financial statements t	hat reports the	
organization's liab	lity for uncertain tax positions under FIN 48			·

Sche	edule D (Form 990) 2009 · Seventh District Organization-Omega 59-2638		Page <b>4</b>
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stat	ements	
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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
	art 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			
b			
c		$\neg$	
d			
e		2e	
3	Subtract line 2e from line 1	3	
_	1 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a			
b		<del> </del> ,	
_C		4c	<del></del>
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	
	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Keturn	
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		
а			
b	, , , , , , , , , , , , , , , , , , ,	$\dashv$ 1	
С	<u> </u>	$\dashv$ 1	
d	(		
0	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:		
b	Other (Describe in Part XIV )		
С	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Pa	art XIV Supplemental Information		
Com	plete 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 2	2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
this p	part to provide any additional information		
		- <b>-</b>	

Schedule D (Fo	orm 990) 200	9 · S	event	h Di	strict	Orga	nizat	Lon-Om	ega	59-2	<u>638563</u>		Page <b>5</b>
Schedule D (Fo	Supplen	nental	Informa	ation (d	continued	)							
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									- <b>-</b>				

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

#### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Part I

Seventh District Organization-Omega Psi Phi Fraternity Inc

Questions Regarding Compensation

Employer Identification number 59-2638563

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization 4a Receive a severance payment or change-of-control payment? 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of 5a a The organization? 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a a The organization? 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Seventh District Organization-Omega 59-2638563

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Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed Schedule J (Form 990) 2009

Part II Officer

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

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

	mobycong (B)	Prophen of M. 2 and/or 1099-MISC months and (B)	contespond	(C) Retirement and	(D) Nontaxable	(F) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)+(D)	reported in prior Form 990 or Form 990-EZ
Keith Jackson (1)		0	0	0	0	0	0
(n)	0		0		0	0	0
(0)	(1						
(11)	<u> </u>						
(p) (t)	(1)	•					
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Schedule J (Form 990) 2009 Seventh District Organization-Omega 59-2638563

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

for any additional information

Schedule J (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Seventh District Organization-Omega Psi Phi Fraternity Inc Employer identification number 59-2638563

Form 990, Part III, Line 4d - All Other Achievements
These funds were used for community service and
scholarships for college bound youths

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

### Forms 990 / 990-EZ Return Summary

For calendar year 2009, or tax year beginning

, and ending

# Seventh District Organization-Omega 59-2638563 Psi Phi Fraternity Inc

				213,157
Revenue				
Contributions				
Program service revenue	20	<u> 66,784</u>		
Investment income		3,624		
Capital gain / loss				
Special events				
C				
Direct expenses	<del></del>			
Net income	<del>,</del>			
Other income		0		
Total revenue	-		270,408	
			<u> </u>	
Expenses  Program convices				
Program services	-	<del></del>		
Management and general				
Fundraising			191,019	
Total expenses			131,013	79,389
Excess / (deficit)				10,000
Other changes				
			_	
			45	
Reconciliation of F			Reconciliation of Exp	
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