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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)

OMB No 1545-0047

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

Open to Public Inspection

	A F	or the	e 2009 calendar year, or tax year beginning $\mathrm{JUL}\ 1$, $\ 2009$ and ending	<u>JUN 30, 201</u>	0								
	Вс	heck if	Please C Name of organization	D Employer identi	ification number								
	_	⊐Addre	use IRS label or CDITA DDITA CHADINA	1									
	F	_chang Name _chang	type		3011200								
]Initial return		ite E Telephone numb									
		Termi	Created		<u>-272-5550</u>								
		Amen return	City or town, state or country, and ZIP + 4	G Gross receipts \$	301,315.								
		Application pendi	1111ACA, N1 14031	H(a) Is this a group									
			F Name and address of principal officer: EDUARD DOGARU SAME AS C ABOVE	for affiliates?	Yes X No								
			empt status: X 501(c) (7)	H(b) Are all affiliates i	included? Yes No a list. (see instructions)								
			ion number ▶ 0158										
	K Form of organization X Corporation												
	Part Summary												
	e	1	Briefly describe the organization's mission or most significant activities: TO PROVI	DE HOUSING A	ND								
	& Governance		FELLOWSHIP TO METRICULATED UNDERGRADUATE MEMI Check this box if the organization discontinued its operations or disposed of m		BETA TAU AT								
	ver		assets 5										
	G		Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)	4									
2	es 8	J	Total number of employees (Part V, line 2a)	5									
2010	Activities	6	Total number of volunteers (estimate if necessary)	6									
3 0	Act		Total gross unrelated business revenue from Part VIII, column (C), line 12	7.									
		ь	Net unrelated business taxable income from Form 990-T, line 34	7									
SEP	•	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year								
	Revenue		Program service revenue (Part VIII, line 2g)		301,315.								
旦	}eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)										
Ź	ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)										
SCANNED	_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		301,315.								
Ö			Grants and simila r amounts paid (Part X., column (A), lines 1·3) Benefits paid to or for members (Part X., column (A), line 4)	<u> </u>									
	Ø		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		28,105.								
	Expenses	16a	Professional fundraising feest Part IX, 2011/fin (A) Tine 11e)	_									
	xpe	þ	Total fundraising expenses (Part IX, column (D), fine 25)										
			Other expenses (Part IIX, column (A), lines 11 a 11d, 11f-24f)		273,194.								
			Total expenses. Add lines (3717) must equal Part-IX, bolumn (A), line 25)		301,299.								
	or ses	19	Revenue less expenses: Subtract line 18 from line 12	Beginning of Current Yea									
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	21,463									
	t Ass	21	Total liabilities (Part X, line 26)	18,159									
			Net assets or fund balances Subtract line 21 from line 20	3,304	3,321.								
	Pa	rt II	Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statemen	to and to the best of my knowl	lades and ballef it to this and								
			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	ige	edge and bener, it is lide, contect,								
	Sigr	1	XAInm	109/15	5/2010								
	Here	е	Signature of officer	Date	<u> </u>								
			EDUARD DOGARU, TREASURER										
			Type or print name and title	Check If Prep	parer's identifying number								
	Paid	!	Preparer's Signature Davoar W Karry 9/14/10		postructions)								
		arer's	Firm's name (or / SCTARABBA WALKER & CO LT.P	EIN >	100741802								
	Use	Unly	self-employed), 200 E BUFFALO ST, SUITE 402										
			address, and ZIP+4 ITHACA, NEW YORK 14850	Phone no	607-272-5550								
	May	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No								
	93200	1 02-0	4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate i	nstructions.	Form 990 (2009)								

ZETA BETA TAU-KAPPA CHAPTER

22-3011200

Page 2

Form **990** (2009)

Form 990 (2009)

Form 990 (2009) ZETA BETA TA Part IV Checklist of Required Schedules

			Yes	No		
1,	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?					
	If "Yes," complete Schedule A	1		X		
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for					
	public office? If "Yes," complete Schedule C, Part I	3		X		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		L		
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	Ì				
	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 quasi-endowments?					
	If "Yes," complete Schedule D, Part V	10		X		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X					
	as applicable	11	X			
•	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	Î				
	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 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	İ				
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	ļ				
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?					
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ	ļ	<u> </u>		
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ <u>-</u>	X		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	İ				
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	ļ <u> </u>	<u> </u>		
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	ļ	<u>X</u>		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			١,,		
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	<u> </u>		
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? If "Yes," complete Schedule G, Part I	17	<u> </u>	<u> </u>		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			1		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	<u> </u>		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			.,		
	complete Schedule G, Part III	19	}	X		
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		000	X		
		Form	99 0	(2009)		

Part IV Checklist of Required Schedules (continued)

			res	NO
21 ,	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			37
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			v
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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			Х
04	Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	240		Х
	Schedule K If "No", go to line 25	24a 24b		Λ.
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С		24c		
	any tax-exempt bonds? Did the exemptation set on an "on behalf of "inquer for bonds outstanding at any time during the year?	24d	_	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		
L	disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	230		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
		25b		
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	230		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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? If "Yes," complete			
	Schedule L, Part III	27		х
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).			
а		28a		Х
b	and the second s	28b		Х
	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, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		Į	ļ
	Schedule N, Part II	32		X
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	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity?			}
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	1		١.
	If "Yes," complete 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 organization?			(
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		17	
	Note. All Form 990 filers are required to complete Schedule O	38	000 ·	10000

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rai	Statements negarding Other ind Fillings and Tax Compliance		т Т	V					
4	Established was add in Day 2 of Form 1006 Applied Supposed Transmitted of	F		Yes	No				
ΊЩ	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns, Enter -0- if not applicable	2			ĺ				
L	U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0			į				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable				ĺ				
С	(gambling) winnings to prize winners?	gariirig	1c	х					
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
20	filed for the calendar year ending with or within the year covered by this return 2a	1			ĺ				
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х					
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instruction	ons)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this		3a	X					
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	Х					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority of	over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	1	4a		Х				
ь	b If "Yes," enter the name of the foreign country: ▶								
_	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and								
	Financial Accounts								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	ļ <u>.</u>	Х				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Pro	hibited			1				
	Tax Shelter Transaction?		5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	zation solicit			l				
	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 gr	fts							
	were not tax deductible?		6b		ļ				
7	Organizations that may receive deductible contributions under section 170(c).				1				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods an	id services							
	provided to the payor?	-	7a						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require	ea	7.						
	to file Form 8282?		7c	ļ	-				
	If "Yes," indicate the number of Forms 8282 filed during the year			ŀ					
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		7e	-	Х				
	benefit contract?	ŀ	7f	<u> </u>	X				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	ł	-/- 7g		_ 				
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required:	ıred?	<u>/9</u> 7h						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization		 -						
-	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busin				-				
	at any time during the year?	J.	8		X				
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the organization make any taxable distributions under section 4966?		9a		X				
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		Х				
10	Section 501(c)(7) organizations. Enter	_							
а	Initiation fees and capital contributions included on Part VIII, line 12	0.							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	5,625.							
11	Section 501(c)(12) organizations. Enter								
а	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				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	 	 -				
ь	if "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1	1				

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.

Sec	tion A. Governing Body and Management		,	
			Yes	No
1a	Enter the number of voting members of the governing body	_5		
b	Enter the number of voting members that are independent	5		
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	<u> </u>	<u> X</u>
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	-	<u> X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	ļ	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		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_	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:		7,	
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		1	
		<u> </u>	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	-	Х
þ	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	v	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	.
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		-	1,7
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	 	Х
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	-	
¢	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	-	V
13	Does the organization have a written whistleblower policy?	13	+ 	Х
14	Does the organization have a written document retention and destruction policy?	14	Х	ļ
15	Did the process for determining compensation of the following persons include a review and approval by independent	1		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			v
	The organization's CEO, Executive Director, or top management official	15a	-	X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		}	v
	taxable entity during the year?	16a	-	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			1
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	<u> </u>	
	etion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	lable for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest police	cy, and fin	ancıal	
	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	anization:		
	SCIARABBA WALKER & CO - 607-272-5550			
	200 EAST BUFFALO ST, ITAHCA, NY 14851			

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.

X Check this box if the organization did no (A)	(B)]		(0	C)			(D)	(E)	(F)
Name and Title	Average hours	Position (check all that apply)					ŀΛ	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		nsated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ADAM KRASNER	1 00								0	0
HOUSE MANAGER	1.00	X		<u> </u>		ļ	_	0.	0.	0.
ALAN GARCIA PRESIDENT	1.00			X				0.	0.	0.
ROB MAHER	1.00	-	 	Λ				.		
VICE PRESIDENT	1.00	Ì		х				0.	0.	0.
EDI DOGARU										
TREASURER	1.00			Х				0.	0.	_ 0.
MICHAEL YOUNGWORTH										
SECRETARY	1.00	<u> </u>		Х	_		<u> </u>	0.	0.	0.
		_	_	-		-				
		_				_				

L	T VII Section A. Officers, Directors, T (A)	(B) (C)							(D)	(E)		(F)	
•	Name and title	Average hours	(cl				app	ly)	Reportable compensation	Reportable compensation		nount o	
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	fr org an	other other other of the other	e Ion ed
			ļ					!					
													-
								_			\perp		
	Total						<u> </u>		0.	0	-		0.
2	Total number of individuals (including but compensation from the organization	not limited to t	hose	liste	ed a	bov	e) wi	ho r	eceived more than \$100	0,000 in reportable		T.	0
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, ke	y en	nplo	yee,	or h	nighest compensated e	mployee on	3	Yes	No X
4	For any individual listed on line 1a, is the and related organizations greater than \$1	sum of reportat	ole c	-					•	the organization	4		Х
5	Did any person listed on line 1a receive o the organization? If "Yes," complete Sche	•			from	an	y uni	relat	ted organization for sen	vices rendered to	5_		Х
Sec 1	ction B. Independent Contractors Complete this table for your five highest of the organization. NONE	compensated in	dep	ende	ent c	cont	racto	ors t	that received more than	\$100,000 of compe	 nsation	from	
	the organization. NONE (A) Name and busines	ss address							(B) Description of	services	(compe	C) ensatio	on.
2	Total number of independent contractors		not l	ımıte	ed to		^	ste	d above) who received i	more than	~		
	\$100,000 in compensation from the orga	nization P					<u>0</u>						

Form **990** (2009)

Pa	rt \	/111	Statement of Rever	110					_ :_:
			Statement of Never	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines	ts, and ve 1f					
	2	a b	PROG. SERV. REVEN	Business Code 900099 531110	295,690. 5,625.	295,690.	5,625.		
Program Service Revenue			All other program service reve		•	301,315.			
	3 4 5		Investment income (including other similar amounts) Income from investment of tax Royalties	k-exempt bond p	est, and proceeds	301,313.			
	6	c	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real	(II) Personal				
	7	a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securities	(II) Other				
Other Revenue	8		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of	>				
Other	9	c a	Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less direct expenses	b draising events	>				
	10	a b	Net income or (loss) from gam Gross sales of inventory, less and allowances Less cost of goods sold Net income or (loss) from sale	returns a b	>				
	11	b c	Miscellaneous Revenu		Business Code				
		е	Total. Add lines 11a-11d			301.315	Ī	5.625	

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).

	oot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	.,			
7	Other salaries and wages	28,105.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)			<u> </u>	
9	Other employee benefits				
10	Payroll taxes			<u> </u>	
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	13,810.	•		
d	Lobbying		n		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other			1	
12	Advertising and promotion			<u> </u>	
13	Office expenses				
14	Information technology				
15	Royalties	105.015			<u> </u>
16	Occupancy	126,916.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			-	<u> </u>
19	Conferences, conventions, and meetings				
20	Interest				-
21	Payments to affiliates	-			-
22	Depreciation, depletion, and amortization				
23	Insurance				
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)	26 071			
а	COST OF FOOD	36,071. 20,950.			-
b	RECRUITMENT				
С	ACTIVITIES	18,803.			-
d	SUPPLIES TABLETON INCLUDANCE	6,646. 6,540.			
е	LIABILITY INSURANCE	43,458.			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	301,299.			
26	Joint costs. Check here				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	<u> </u>			

Balance Sheet Part X (A) Beginning of year End of year 2,801. 4,627. 1 Cash · non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 6,854. 1,150. Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 6 Part II of Schedule L 7 Notes and loans receivable, net Assets 250. 250. 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a basis. Complete Part VI of Schedule D 10c 10b b Less accumulated depreciation 11 Investments · publicly traded securities 12 Investments · other securities. See Part IV, line 11 12 13 13 Investments · program-related See Part IV, line 11 14 14 Intangible assets 13,361. 11,558. 15 15 Other assets. See Part IV, line 11 21,463. 19,388. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 6,048. 3,366. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 10,019. 14,793. 25 25 Other liabilities. Complete Part X of Schedule D 16,067 18,159. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 27 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here X and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 30 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 31 3,321. 3,304. 32 Retained earnings, endowment, accumulated income, or other funds 32 3,304. 3,321. 33 33 Total net assets or fund balances 21,463. 19,388. Total liabilities and net assets/fund balances

Form **990** (2009)

Pa	t XI Financial Statements and Reporting			
			Yes	No
1,	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			į
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			Į
	review, or compilation of its financial statements and selection of an independent accountant?	2c		L
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	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:			1
	Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			1
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	1		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	<u> </u>	
		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 Open to Public Inspection

Name of the organization

ZETA BETA TAU-KAPPA CHAPTER

Employer identification number 22-3011200

Par	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	Impermissible private benefit?		Yes No
Par	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, I	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements o	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ition's financial statements that describes	the organization's accounting for
	conservation easements		<u> </u>
Pai	Organizations Maintaining Collections of		otner Similar Assets.
	Complete if the organization answered "Yes" to Form	1990, Part IV, line 8	
_			
та	If the organization elected, as permitted under SFAS 116, no	'	
	treasures, or other similar assets held for public exhibition, e		ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	or research in furtherance of public service	e, 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 tre		ai gain, provide
_	the following amounts required to be reported under SFAS 1	i ro relating to these items:	•
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
D	Assets included in Form 990, Part X		*

Sched	dule D (Form 990) 2009 ZETA BES	ra Tau-Kapi	PA CI	HAPTER			2	22-30	11200) Pa	ige 2	
	t III Organizations Maintaining C					Other	Simila	r Asset	S (conti	nued)		
	Using the organization's acquisition, accession										3	
	(check all that apply)			•								
a	Public exhibition	d	ι	oan or excl	hange progran	ns						
ь	Scholarly research	е		Other	• • •							
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explain	n how th	ev further th	he organizatior	n's exem	npt purpo	se in Part	XIV.			
	During the year, did the organization solicit or											
	to be sold to raise funds rather than to be ma								Yes		No	
	t IV Escrow and Custodial Arran					to Form	1 990, Pa	rt IV, line 9	9, or			
	reported an amount on Form 990, Par		•			_						
1a	is the organization an agent, trustee, custodi	an or other intermed	lary for o	contribution	s or other ass	ets not i	ncluded					
	on Form 990, Part X?		•						Yes		No	
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing t	able								
	, ,	·	_						Amount			
С	Beginning balance						1c					
	Additions during the year						1d			_		
	Distributions during the year						1e	,				
	Ending balance						1f					
	Did the organization include an amount on Fe	orm 990, Part X, line	212						Yes] No	
	If "Yes." explain the arrangement in Part XIV											
Par	t V Endowment Funds. Complete I	f the organization an	swered	"Yes" to Fo	rm 990, Part I	V, line 10).					
		(a) Current year	(b) P	rior year	(c) Two years	back (d) Three y	ears back	(e) Fou	r years	back	
1a	Beginning of year balance							.,,,,,,,				
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
е	Other expenditures for facilities	-										
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the year	r end balance held a	as:									
а	Board designated or quasi-endowment		%									
b	Permanent endowment ►	%										
С		%										
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administer	ed for th	ne organiz	zation				
	by:									Yes	No	
	(i) unrelated organizations								3a(i)			
	(ii) related organizations								3a(ii)		L	
b	If "Yes" to 3a(II), are the related organization:	s listed as required o	on Sched	dule R?					3b		<u> </u>	
4	Describe in Part XIV the intended uses of the	e organization's end	owment	funds								
Pa	t VI Investments - Land, Building	gs, and Equipm	ent. Se	e Form 990), Part X, line 1	0.	_					
	Description of investment	(a) Cost or o	other	(b) Cos	t or other	(c) Ac	cumulate	ed	(d) Boo	ık valu	e	
		basis (investi	ment)	basis	(other)	dep	reciation					
1a	Land											
ь	Buildings								_			
С	Leasehold improvements											
d	Equipment											
е	Other								_			
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Pan	t X, colui	nn (B), line	10(c))						0.	

Part VII Investments - Other Securities.	See Form 990, Part X, line	12		
(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation: nd-of-year market va	alue
Financial derivatives				
Closely-held equity interests				
Other				
				
				<u> </u>
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)		-10		
Part VIII Investments - Program Related.	See Form 990, Part X, line		ethod of valuation	
(a) Description of investment type	(b) Book value		nd-of-year market va	alue
	-			·
				
	-			
		-		
Tatal (Oct /h) must soud Form OOO Bod V col /B) line 12 \			······································	
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ▶ Part IX Other Assets. See Form 990, Part X, lii				
	a) Description		<u> </u>	(b) Book value
DEPOSITS HELD BY ALUMNI	,			9,825.
DUE FROM ALUMNI				1,343.
DEPOSITS- BUYING SERVICE				2,193.
DEFORTED BOTTNG BERVICE				
			-	
Total. (Column (b) must equal Form 990, Part X, col (B)	line 15.)		>	13,361.
Part X Other Liabilities. See Form 990, Part		<u> </u>		
1. (a) Description of liability		(b) Amount	indicate and a second	
Federal income taxes				
DUE TO KAPPA		1,900.		
ACTIVITY FEE		1,544.		
SECURITY DEPOSITS		6,575.		
Total. (Column (b) must equal Form 990, Part X, col (B)	line 25)	10,019.		

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.
932053
02-01-10

Sche	dule D (Form 990) 2009 ZETA BETA TAU-KAPPA CHAPTER	.			22-	3011200	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Finan	cial Sta			
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1_			
2,	Total expenses (Form 990, Part IX, column (A), line 25)					·	
3							
4							
5							
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			10			
Par	t XII Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Reve	nue pei	r Return	1	
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						
а	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b			_		
C	Recoveries of prior year grants	2c			_		
d	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d				_2e		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b					
c	Add lines 4a and 4b				4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5		
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expe	nses p	<u>er Retu</u>	rn	
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:	1 4					
а	Donated services and use of facilities	2a					
þ	Prior year adjustments	2b					
C	Other losses	2c					
d	Other (Describe in Part XIV)	2d					
е	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.	1 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			_		
b	Other (Describe in Part XIV.)	4b					
С	Add lines 4a and 4b				4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5		
	t XIV Supplemental Information						
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III						4; Part
X, line	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also compl	lete this	s part to pro	vide any	additiona	l information	
					-	- · · · · · · · · · · · · · · · · · · ·	
			-			·	
						_ -	
							
			_				

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

ZETA BETA TAU-KAPPA CHAPTER

Employer identification number 22-3011200

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CORNELL UNIVERSITY.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION OPERATES AS A
GREEK HOUSE WITH MEMBERS WHO OBTAIN VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION OPERATES AS A
GREEK HOUSE WITH MEMBERS WHO OBTAIN VOTING RIGHTS TO VOTE FOR OFFICERS.
FORM 990, PART VI, SECTION A, LINE 7B: THE ORGANIZATION OPERATES AS A
GREEK HOUSE WITH MEMBERS WHO OBTAIN VOTING RIGHTS TO VOTE FOR DECISIONS OF
THE ORGANIZATION.
FORM 990, PART VI, SECTION B, LINE 11: THE TREASURER REVIEWS THE 990
BEFORE IT IS SIGNED.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS GOVERNING
DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.