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990-EZ

Short Form 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)

Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

Open to Public Inspection

OMB No 1545-1150

2009

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2009 calendar year, or tax year beginning 2009, and ending . 20 July 1 June 30 C Name of organization D Employer identification number Check if applicable Address change Pi Kappa Alpha Fraternity-Delaware Area Alumni Association 58-1943513 label or Name change Number and street (or P O. box, if mail is not delivered to street address) Room/suite E Telephone number print or Initial return 302-426-9437 Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return instruc-Newark, DE 19715 Application pending Number ▶ • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶ H Check ► ☑ if the organization is not I Website: ▶ n/a required to attach Schedule B (Form 990, 990-EZ, or 990-PF). K Check Life the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ 5.335 Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 3 Membership dues and assessments 3 5,335 Investment income 4 5a Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . 5c Revenue Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ ☐ Gross revenue (not including \$ of contributions 6b Less: direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . 6c Gross sales of inventory, less returns and allowances 7a 7a Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7c R Other revenue (describe ▶ 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 5,335 9 10 Grants and similar amounts paid (attach schedule) 10 Benefits paid to or for members UCIVEL 11 11 Salaries, other compensation, and employee benefits 12 12 Professional fees and other payments to independent Occupancy, rent, utilities, and maintenance 13 contractors 13 14 14 15 Printing, publications, postage, and shipping 15 1,290 Other expenses (describe Dues and expenses assoc w/ annual founders day dinner 16 16 3,232 17 Total expenses. Add lines 10 through 16 17 4,522 18 18 813 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 6,103 20 Other changes in net assets or fund balances (attach explanation) . . . 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year 22 Cash, savings, and investments 6,103 22 6,916 23 Land and buildings 23 24 Other assets (describe ▶ 24 25 Total assets 6,103 25 6,916 26 Total liabilities (describe ▶ 26

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

Net assets or fund balances (line 27 of column (B) must agree with line 21)

Cat. No 106421

Form 990-EZ (2009)

6,916

6.103 27

Form 990-EZ (2009)

orm	990-EZ (2009)					Page 2		
Par	Statement of Program Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses		
		ganization's exempt purposes. In a clear and concise of persons benefited, and other relevant information for						
28	DAAA's purpose is to foster the social interaction be	···		he				
	Fraternity and encourage lifelong fellowship betwee	n those who share these frate	ernal bonds					
	(O				00-	4 500		
29		includes foreign grants, ch			28a	4,522		
23								
	(Grants \$) If this amount includes foreign grants, check here ▶ □							
30								
		includes foreign grants, ch	eck here	. ▶ 🗆	30a			
31	Other program services (attach schedule)							
		includes foreign grants, ch			31a	1.555		
	Total program service expenses (add lines 28a LIV List of Officers, Directors, Trustees, and Key				32 Instruc	tions for Part IV		
e i	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributio employee benefit deferred comper	ns to plans &	(e) Expense account and other allowances		
Kevi	n Nemith							
200	Steele's Ridge Rd, Camden, DE 19934	Flesident - Till/WK	0		0	0		
	k Lord	Treasurer - < 1 hr/wk				_		
31 N	y Rd, Wilmington, DE 19806		0		0	0		
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Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
ь 36	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
37a	during the year? If "Yes," complete applicable parts of Schedule N	36		✓
b 38a	Did the organization file Form 1120-POL for this year?	37b		
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✓
39	If "Yes," complete Schedule L, Part II and enter the total amount involved			
а	Initiation fees and capital contributions included on line 9	2		
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a 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	40b		
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed. ▶ Delaware	100		
42a	Legated at N 31 by Pd Wilmington DE	302-420 198		<u>, </u>
b	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	[Yes	No
	account)?	42b		
	If "Yes," enter the name of the foreign country: ▶			v
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. >	▶ □
		ſ	Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		j

Page	4
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Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	47(a)(1) nonexempt	nonexemp charitable	t charitab trusts mus	le trusts only. A t answer questio	ll sections 46	on 49b
46	Did the organization engage in direct or indirect						es No
47	candidates for public office? If "Yes," complete s					46 47	
47 48	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E						-
49a							
	If "Yes," was the related organization a section 5	•	-			49a 49b	
50	Complete this table for the organization's five his employees) who each received more than \$100,000.						
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	, I	(c) Compensation (d) Contributions to employee benefit plans deferred compensation			
DAAA	has no employees						
						1	
f	Total number of other employees paid over \$100	0.000	' ')			
none -	(a) Name and address of each independent contractor less than \$5,000 was paid out during FY2010	paid more than \$100,000		(b) Тур	e of service	(c) Comp	ensation
							- .
					-		
d	Total number of other independent contractors e	each receiving over \$	3100,000 .	. >	0		_ .
	Under penalties of perjury, I declare that I have examining and belief, it is true, correct, and complete. Declaration	ed this return, including ac of preparer (other than off	companying sch	edules and stat all information	tements, and to the bes of which preparer has	at of my kr	owledge edge.
Sign Here	Signature of officer	TURSASU	REPL		1/20	/1	
	Clark Lord, Treasurer Type or print name and title						
Paid Prepar	Preparer's signature	D	Se	neck if ilf- nployed ▶ ☐	Preparer's identifying nun	nber (See in	structions)
Use Or	i Firm S name (or 1			EIN Pho	ı ► one no. ►		
May th	e IRS discuss this return with the preparer shown	n above? See instruc	tions		▶ ☐	Yes [No EZ (2009)