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CHANGE IN ACCOUNTING PERIOD

Short Form

Form 990-EZ

OMB No 1545 1150

2009

Open to Public Inspection

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)

- Sponsoring 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.
- The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning		Jun 1	, 2009, and ending	Jun 30	, 2010
B Check if applicable		C Name of organization		D Employer identification number	
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	CHI OMEGA FRATERNITY - PHI GAMMA		72-6034029	
<input type="checkbox"/> Initial return	<input type="checkbox"/> Termination	Number and street (or P O box, if mail is not delivered to street address)		E Telephone number	
<input type="checkbox"/> Amended return	<input type="checkbox"/> Application pending	P.O. BOX 25109		(225) 295-3939	
		City or town, state or country, and ZIP + 4		F Group Exemption Number	
		BATON ROUGE LA 70894		► 0273	

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

I Website: ► www.chiomega.com	G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►
J Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c) (7) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
K Check ► <input type="checkbox"/> if 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	► \$ 8.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3
	4 Investment income	4
	5a Gross amount from sale of assets other than inventory	5a
	b Less: cost or other basis and sales expenses	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>	
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a
b Less: direct expenses other than fundraising expenses	6b	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
7a Gross sales of inventory, less returns and allowances	7a	
b Less: cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8 Other revenue (describe ► _____)	8	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	
EXPENSES	10 Grants and similar amounts paid (attach schedule)	10
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12
	13 Professional fees and other payments to independent contractors	13
	14 Occupancy, rent, utilities, and maintenance	14
	15 Printing, publications, postage, and shipping	15
	16 Other expenses (describe ► See Other Expenses Statement)	16
	17 Total expenses. Add lines 10 through 16	17
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19
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	

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CHI O FOUNDATION
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IRS CSC
364
OGDEN, UT

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	88,351.	22	81,994.
23 Land and buildings	0.	23	0.
24 Other assets (describe ► See L-24 Stmt)	3,803.	24	3,723.
25 Total assets	92,154.	25	85,717.
26 Total liabilities (describe ► _____)	0.	26	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	92,154.	27	85,717.

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

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Form 990-EZ (2009)

GS 23

Part III Statement of Program Service Accomplishments (See the instructions.)

What is the organization's primary exempt purpose? **SEE ATTACHED**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts; optional for others.)

28 RUSH (MEMBERSHIP RECRUITMENT PROGRAM)

28 a

29 SOCIAL ACTIVITIES (PARTIES, DANCES, SPECIAL FUNCTIONS)

29 a

30 NEW MEMBER (PLEDGE) PROGRAM (SERVICES PROVIDED TO NEW MEMBERS TO ACQUAINT THEM WITH THE OBJECTIVES OF CHI OMEGA)

30 a

31 Other program services (attach schedule) INITIATION

312

32 Total program service expenses (add lines 28a through 31a)

32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instrs.)

Part V Other Information (Note the statement requirements in the instrs for Part V.)

33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity 33 X

34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes 34 X

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. 35a X
35b

a 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? 36 X

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year? 37a 0
37b X

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N 38a X

37a Enter amount of political expenditures, direct or indirect, as described in the instructions 38b

b Did the organization file **Form 1120-POL** for this year? 38b X

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 39a 0
39b 0

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 39b 0

39 Section 501(c)(7) organizations. Enter: 40b

a Initiation fees and capital contributions included on line 9 39a 0

b Gross receipts, included on line 9, for public use of club facilities 39b 0

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► 40e X

section 4912 ► 40e X

section 4955 ► 40e X

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 40e X

c 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 40e X

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 40e X

e 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 X

41 List the states with which a copy of this return is filed ► 40e X

42a The organization's books are in care of ► LAURA F. JOHNSON Telephone no. ► (225) 270-4039
 Located at ► 3729 BERKLEY HILL AVENUE BATON ROUGE LA ZIP + 4 ► 70809

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 account)?
 If 'Yes,' enter the name of the foreign country: ► 42b X

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a 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 X

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 ► 43

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 X

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 X

Name as Shown on Return CHI OMEGA FRATERNITY - PHI GAMMA	Employer Identification No. 72-6034029
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Line 24 - Other Assets:	Beginning of Year	End of Year
EQUIPMENT, NET OF ACCUMULATED DEPRECIATION	3,803.	3,723.
Totals to Form 990-EZ, Part II, line 24	3,803.	3,723.
Line 26 - Total Liabilities:	Beginning of Year	End of Year
Totals to Form 990-EZ, Part II, line 26

Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)

<u>BANK CHARGES</u>	187.
<u>CAREER DEVELOPMENT</u>	2,092.
<u>CONFERENCES, CONVENTIONS, AND MEETINGS</u>	2,573.
<u>Depreciation</u>	80.
<u>NATIONAL FEE</u>	100.
<u>RUSH FUNCTIONS</u>	439.
 Total	 <u>5,471.</u>