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Form <b>990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

<b>A For the 2009 calendar year, or tax year beginning 08-01-2009 and ending 07-31-2010</b>									
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>Please use IRS label or print or type. See Specific Instructions.</b>		<b>C Name of organization</b> DELTA TAU DELTA EDUCATIONAL FOUNDATION INC				<b>D Employer identification number</b> 31-1020203	
				Doing Business As				<b>E Telephone number</b> (317) 284-0210	
				Number and street (or P O box if mail is not delivered to street address) Room/suite 10000 ALLISONVILLE ROAD				<b>G Gross receipts \$</b> 2,761,993	
				City or town, state or country, and ZIP + 4 FISHERS, IN 46038					
		<b>F Name and address of principal officer</b> KENNETH A FILE 10000 ALLISONVILLE RD FISHERS, IN 46038				<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
						<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)			
						<b>H(c)</b> Group exemption number			
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527									
<b>J Website:</b> WWW.DELTAFUNDATION.ORG									
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other						<b>L</b> Year of formation 1981		<b>M</b> State of legal domicile IN	

Part I		Summary		
Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities THE DELTA TAU DELTA EDUCATIONAL FOUNDATION, INC IS ORGANIZED TO ENCOURAGE, ASSIST, PROMOTE, FOSTER AND SUPPORT EDUCATION		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b> <u>1</u>	
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b> <u>1</u>	
	<b>5</b>	Total number of employees (Part V, line 2a) . . . . .	<b>5</b> <u>3</u>	
	<b>6</b>	Total number of volunteers (estimate if necessary) . . . . .	<b>6</b> <u>2</u>	
	<b>7a</b>	Total gross unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b> <u>7,65</u>	
	<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b> <u></u>	
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b> <u>4,251,612</u>	<b>Current Year</b> <u>1,243,329</u>
	<b>9</b>	Program service revenue (Part VIII, line 2g) . . . . .	<u>455,583</u>	<u>112,364</u>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	<u>-86,241</u>	<u>228,578</u>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>-5,919</u>	<u>104,290</u>
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	<u>4,615,035</u>	<u>1,688,561</u>
Expenses	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	<u>1,509,321</u>	<u>1,101,642</u>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	<u>0</u>	<u>0</u>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>0</u>	<u>680,819</u>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	<u>54,540</u>	<u>0</u>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) <u>711,399</u>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . .	<u>1,993,793</u>	<u>583,930</u>
	<b>18</b>	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>3,557,654</u>	<u>2,366,391</u>
	<b>19</b>	Revenue less expenses Subtract line 18 from line 12 . . . . .	<u>1,057,381</u>	<u>-677,830</u>
Net Assets or Fund Balances			<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b>	Total assets (Part X, line 16) . . . . .	<u>15,948,339</u>	<u>15,221,461</u>
	<b>21</b>	Total liabilities (Part X, line 26) . . . . .	<u>1,370,618</u>	<u>606,238</u>
	<b>22</b>	Net assets or fund balances Subtract line 21 from line 20 . . . . .	<u>14,577,721</u>	<u>14,615,223</u>

Part II		Signature Block			
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge				
	***** Signature of officer		2011-02-15 Date		
	KENNETH FILE President Type or print name and title				
Paid Preparer's Use Only	Preparer's signature		Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 CROWE HORWATH LLP 3815 River Crossing Parkway Suite 300 Indianapolis, IN 462400977			EIN  Phone no (317) 569-8989	

Part III Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

THE DELTA TAU DELTA EDUCATIONAL FOUNDATION, INC IS ORGANIZED TO ENCOURAGE, ASSIST, PROMOTE, FOSTER AND SUPPORT EDUCATION THE FOUNDATION ACHIEVES THESE PURPOSES BY RECEIVING, HOLDING, AND ADMINISTERING MONEY AND PROPERTY, BY GIFT, DEVICE, BEQUEST OR OTHERWISE ABSOLUTELY IN TRUST, USING THE PRINCIPAL OR INCOME TO PROMOTE EDUCATIONAL PURPOSES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

☒

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

☒

No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 338,500 including grants of \$ 338,500 ) (Revenue \$ 50,159 )

INDIVIDUAL AND GROUP COUNSELING THE CONDUCT OF INDIVIDUAL AND GROUP COUNSELING TO CHAPTER MEMBERS AND THE TRAINING OF INDIVIDUALS TO DO SUCH COUNSELING GROUP COUNSELING INCLUDES WORKSHOPS AND LECTURES ON LEADERSHIP AND PERSONAL DEVELOPMENT, RISK MANAGEMENT, UNDERSTANDING THE FREE ENTERPRISE SYSTEM, ACHIEVEMENT OF HIGH SCHOLASTIC ATTAINMENT, CITIZENSHIP AND PATRIOTISM, ALCOHOL AND SUBSTANCE ABUSE PREVENTION AND ADVANCED LEADERSHIP TRAINING FOR SELECTED INDIVIDUALS INDIVIDUAL COUNSELING INCLUDES ONE-ON-ONE SESSIONS WITH SELECTED UNDERGRADUATE CHAPTER MEMBERS OF THE DELTA TAU DELTA FRATERNITY REGARDING LEADERSHIP OPPORTUNITIES, SCHOLARSHIP, AND STUDYING TECHNIQUES, EDUCATIONAL OPPORTUNITIES AND PROBLEM SOLVING IN ADDITION, THE DELTA TAU DELTA EDUCATIONAL FOUNDATION, INC CONDUCTS CHARITABLE AND EDUCATIONAL ACTIVITIES AT THE DELTA TAU DELTA FRATERNITY'S ANNUAL DIVISIONAL CONFERENCES AND BIENNIAL NATIONAL CONVENTION SUCH ACTIVITIES INCLUDE WORKSHOPS AND SEMINARS IN THE AREAS OF LEADERSHIP, SCHOLARSHIP, LIFE SKILLS, SUBSTANCE AND ALCOHOL ABUSE AND SIMILAR SUBJECTS SUCH ACTIVITIES ALSO INCLUDE REPORTS OF VARIOUS COMMITTEES ON SCHOLARSHIP, CHARITABLE AND EDUCATIONAL ENDEAVORS AND SIMILAR SUBJECTS ALSO, THE ORGANIZATION PROVIDES 3-DAY INTENSIVE LEADERSHIP EDUCATION EXPERIENCE DESIGNED SPECIFICALLY FOR UNDERGRADUATE CHAPTER PRESIDENTS AND CHAPTER ADVISORS REGARDING INTEGRITY, ACCOUNTABILITY, LEADERSHIP STYLES, AND CREATING A FOUNDATION FOR EXCELLENCE

4b

(Code ) (Expenses \$ 31,950 including grants of \$ 31,950 ) (Revenue \$ 4,734 )

UNDERGRADUATE ASSISTANCE SCHOLARSHIPS AWARDED TO UNDERGRADUATE MEMBERS WHO EXCELLED IN THE AREAS OF SCHOLARSHIP, LEADERSHIP, COMMUNITY SERVICE

4c

(Code ) (Expenses \$ 954,182 including grants of \$ 731,192 ) (Revenue \$ 141,391 )

CHAPTER ASSISTANCE SUPPORT TO CHAPTERS THROUGH GRANTING OF FUNDS FOR QUALIFIED EDUCATIONAL HOUSING IMPROVEMENTS

4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e





Total program service expenses

\$ 1,324,632

Form 990 (2009)

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes	
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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 	11	Yes	
	• 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 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	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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 U S ? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Part IV

Checklist of Required Schedules (continued)

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 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization 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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a25	1cYes	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .				
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a36	2bYes	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .			3aYes	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .			3bYes	
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	No
b If "Yes," enter the name of the foreign country: <input type="text"/> 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	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c 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	
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	No
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).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year . . . . .			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .			7h	
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 organization, have excess business holdings at any time during the year? . . . . .			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966? . . . . .			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12 . . . . .			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders . . . . .			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . . . .	1a	19	
b	Enter the number of voting members that are independent . . . . .	1b	19	
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		No
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	5		No
6	Does the organization have members or stockholders? . . . . .	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body? . . . . .	8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b		
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		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates? . . . . .	10a		No
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		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	12c	Yes	
13	Does the organization have a written whistleblower policy? . . . . .	13	Yes	
14	Does the organization have a written document retention and destruction policy? . . . . .	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes	
b	Other officers or key employees of the organization . . . . .	15b	Yes	
	If "Yes" to line a or b, 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation 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		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶IN
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ MAURIE J PHELAN 10000 ALLISONVILLE ROAD FISHERS, IN 46038 (317) 284-0210

## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

1b	Total . . . . .	151,348	151,327	35,741
----	-----------------	---------	---------	--------

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization: 1

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual . . . . .</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual . . . . .</i>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person . . . . .</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization: 0

Part VIII

Statement of Revenue

				(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	1a	Federated campaigns . . .	1a	0				
	b	Membership dues . . . . .	1b	0				
	c	Fundraising events . . . . .	1c	0				
	d	Related organizations . . . .	1d	0				
	e	Government grants (contributions)	1e	0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,243,329				
	g	Noncash contributions included in lines 1a-1f \$ 53,726						
	h	Total. Add lines 1a-1f . . . . .						1,243,329
Program Service Revenue	2a	RENTAL INCOME FROM DTD FRATERNITY	Business Code	111,364	111,364	0	0	
	b	CONSULTING FEES		1,000	1,000	0	0	
	c			0	0	0	0	
	d			0	0	0	0	
	e			0	0	0	0	
	f	All other program service revenue		0	0	0	0	
	g	Total. Add lines 2a-2f . . . . .			112,364			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		192,692	0	7,656	185,036
4		Income from investment of tax-exempt bond proceeds . . .		0	0	0	0	
5		Royalties . . . . .		0	0	0	0	
6a		(i) Real						
		(ii) Personal						
		Gross Rents	11,075	0	515	0	0	515
b		Less rental expenses	10,560	0				
c		Rental income or (loss)	515	0				
d		Net rental income or (loss) . . . . .						
7a		(i) Securities						
		(ii) Other						
		Gross amount from sales of assets other than inventory	1,098,758	0	35,886	0	0	35,886
b		Less cost or other basis and sales expenses	1,062,872	0				
c		Gain or (loss)	35,886	0				
d		Net gain or (loss) . . . . .						
8a		Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18 . . . . .			0	0	0	0
	a	0						
	b	Less direct expenses . . . . .	0					
c	Net income or (loss) from fundraising events . . .		0	0	0	0		
9a	Gross income from gaming activities See Part IV, line 19 . . . . .			0	0	0	0	
	a	0						
	b	Less direct expenses . . . . .						0
c	Net income or (loss) from gaming activities . . .		0	0	0	0		
10a	Gross sales of inventory, less returns and allowances .			0	0	0	0	
	a	0						
	b	Less cost of goods sold . . . . .						0
c	Net income or (loss) from sales of inventory . . .		0	0	0	0		
Miscellaneous Revenue			Business Code	19,855	0	0	19,855	
11a	INSURANCE PROCEEDS							
b	BAD DEBT RECOVERY							
c	MISCELLANEOUS INCOME							
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .							103,775
12	Total revenue. See Instructions . . . . .			1,688,561	196,284	7,656	241,292	

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).

Do not include amounts reported on lines 6b, 7b, 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	1,069,692	1,069,692		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	31,950	31,950		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	281,479	37,120	40,326	204,033
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0	0	0	0
7	Other salaries and wages	231,913	38,571	56,972	136,370
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	126,571	12,897	40,806	72,868
9	Other employee benefits . . . . .	2,430	445	1,985	0
10	Payroll taxes . . . . .	38,426	5,321	7,556	25,549
11	Fees for services (non-employees)				
a	Management . . . . .	0	0	0	0
b	Legal . . . . .	4,967	3,974	993	0
c	Accounting . . . . .	28,003	8,751	19,252	0
d	Lobbying . . . . .	0	0	0	0
e	Professional fundraising See Part IV, line 17 . . . . .	0			0
f	Investment management fees . . . . .	33,402	0	33,402	0
g	Other . . . . .	0	0	0	0
12	Advertising and promotion . . . . .	0	0	0	0
13	Office expenses . . . . .	128,453	16,697	27,151	84,605
14	Information technology . . . . .	0	0	0	0
15	Royalties . . . . .	0	0	0	0
16	Occupancy . . . . .	61,179	25,772	14,790	20,617
17	Travel . . . . .	26,187	3,271	6,559	16,357
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0	0	0	0
19	Conferences, conventions, and meetings . . . . .	23,567	1,967	10,130	11,470
20	Interest . . . . .	28,494	8,199	13,736	6,559
21	Payments to affiliates . . . . .	0	0	0	0
22	Depreciation, depletion, and amortization . . . . .	117,478	48,638	29,929	38,911
23	Insurance . . . . .	10,346	3,761	5,547	1,038
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 )				
a	FUNDRAISING	51,673	2,378	0	49,295
b	DONOR RECOGNITION EXPENSE	8,744	0	5,093	3,651
c	OTHER EXPENSES	61,437	5,228	16,133	40,076
d		0	0	0	0
e		0	0	0	0
f	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24f	2,366,391	1,324,632	330,360	711,399
26	Joint costs. Check here <input type="checkbox"/> 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	0	0	0	0

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			0	1	0
	2	Savings and temporary cash investments . . . . .			597,417	2	1,796,316
	3	Pledges and grants receivable, net . . . . .			3,612,773	3	632,352
	4	Accounts receivable, net . . . . .			18,395	4	6,581
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .			0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L . . . . .			0	6	0
	7	Notes and loans receivable, net . . . . .			277,564	7	667,454
	8	Inventories for sale or use . . . . .			0	8	0
	9	Prepaid expenses and deferred charges . . . . .			85,335	9	99,801
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	4,017,092	2,719,094	10c	2,678,808
	b	Less accumulated depreciation . . . . .	10b	1,338,284			
	11	Investments—publicly traded securities . . . . .			4,299,717	11	4,826,666
	12	Investments—other securities See Part IV, line 11 . . . . .			3,624,912	12	3,740,036
	13	Investments—program-related See Part IV, line 11 . . . . .			0	13	0
	14	Intangible assets . . . . .			0	14	0
	15	Other assets See Part IV, line 11 . . . . .			713,132	15	773,447
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			15,948,339	16	15,221,461	
Liabilities	17	Accounts payable and accrued expenses . . . . .			186,613	17	46,436
	18	Grants payable . . . . .			0	18	0
	19	Deferred revenue . . . . .			0	19	0
	20	Tax-exempt bond liabilities . . . . .			0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .			0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			1,148,633	23	525,818
	24	Unsecured notes and loans payable to unrelated third parties . . . . .			0	24	0
	25	Other liabilities Complete Part X of Schedule D . . . . .			35,372	25	33,984
	26	Total liabilities. Add lines 17 through 25 . . . . .			1,370,618	26	606,238
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			-1,962,438	27	12,561
	28	Temporarily restricted net assets . . . . .			10,198,290	28	8,259,624
	29	Permanently restricted net assets . . . . .			6,341,869	29	6,343,038
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .			0	30	0
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .			0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .			0	32	0
	33	Total net assets or fund balances . . . . .			14,577,721	33	14,615,223
	34	Total liabilities and net assets/fund balances . . . . .			15,948,339	34	15,221,461

**Part XI**    **Financial Statements and Reporting**

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>c</b> If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . . .	Yes	
<b>d</b> 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b> 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? . . . . .		No
<b>b</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 . . .		

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public  
Inspection

Name of the organization DELTA TAU DELTA EDUCATIONAL FOUNDATION INC	Employer identification number 31-1020203
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	2,576,953	2,524,837	2,434,485	4,251,612	1,243,329	13,031,216
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	2,576,953	2,524,837	2,434,485	4,251,612	1,243,329	13,031,216
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,452,912
6 Public Support. Subtract line 5 from line 4						11,578,304

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	2,576,953	466,856	2,434,485	4,251,612	1,243,329	13,031,216
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	299,023	466,856	515,692	208,676	196,111	1,686,358
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	19,673	0	0	19,673
10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets	218,410	196,991	25,940	8,585	103,775	553,701
11 Total support (Add lines 7 through 10)						15,290,948

12 Gross receipts from related activities, etc (See instructions )

121,060,243

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	75.72 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	77.07 %

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6 )						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation
OTHER INCOME, SCHEDULE A, PART II, LINE 10, 2005 - \$218,410, 2006 - \$196,991, 2007 - \$25,940, 2008 - \$8,585, 2009 - \$103,775,

SCHEDULE D  
(Form 990)

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
DELTA TAU DELTA EDUCATIONAL FOUNDATION INC

Employer identification number  
31-1020203

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if 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)	
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 advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

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 importantly land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

Complete lines 2a–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 Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
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

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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

a

Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b

Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

1c

Beginning balance

1d

Additions during the year

1e

Distributions during the year

1f

Ending balance

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

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .	9,469,804	10,316,854		
b	Contributions . . . . .	28,525	1,068,273		
c	Investment earnings or losses . . . . .	713,749	-1,342,455		
d	Grants or scholarships . . . . .	1,259,565	372,722		
e	Other expenditures for facilities and programs . . . . .	0	0		
f	Administrative expenses . . . . .	164,903	200,146		
g	End of year balance . . . . .	8,787,610	9,469,804		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 0 % %

b

Permanent endowment ▶ 60 93 % %

c

Term endowment ▶ 39 07 % %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations . . . . .

3a(i)

☐ Yes

☐ No

(ii)

related organizations . . . . .

3a(ii)

☐ Yes

☐ No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐ Yes

☐ No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .	0	761,623		761,623
b Buildings . . . . .	0	2,315,241	555,702	1,759,539
c Leasehold improvements . . . . .	0	138,521	66,995	71,526
d Equipment . . . . .	0	801,707	715,587	86,120
e Other . . . . .	0	0	0	0
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				2,678,808



Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	11,688,561
2	Total expenses (Form 990, Part IX, column (A), line 25)	2,366,391
3	Excess or (deficit) for the year Subtract line 2 from line 1	-677,830
4	Net unrealized gains (losses) on investments	715,332
5	Donated services and use of facilities	0
6	Investment expenses	0
7	Prior period adjustments	0
8	Other (Describe in Part XIV)	0
9	Total adjustments (net) Add lines 4 - 8	715,332
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	37,502

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements . . . . .	12,383,448
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments . . . . .2a715,332	
b	Donated services and use of facilities . . . . .2b2,397	
c	Recoveries of prior year grants . . . . .2c0	
d	Other (Describe in Part XIV) . . . . .2d10,560	
e	Add lines 2a through 2d . . . . .	2e728,289
3	Subtract line 2e from line 1 . . . . .	31,655,159
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .4a33,402	
b	Other (Describe in Part XIV) . . . . .4b0	
c	Add lines 4a and 4b . . . . .	4c33,402
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	51,688,561

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements . . . . .	12,345,946
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities . . . . .2a2,397	
b	Prior year adjustments . . . . .2b0	
c	Other losses . . . . .2c0	
d	Other (Describe in Part XIV) . . . . .2d10,560	
e	Add lines 2a through 2d . . . . .	2e12,957
3	Subtract line 2e from line 1 . . . . .	32,332,989
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .4a33,402	
b	Other (Describe in Part XIV) . . . . .4b0	
c	Add lines 4a and 4b . . . . .	4c33,402
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	52,366,391

Part XIVSupplemental Information

Complete 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 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Intended uses of endowment funds	Schedule D, Part V, Line 4	THE ENDOWMENT FUNDS ARE USED TO FUND SCHOLARSHIPS AWARDED BASED ON VARIOUS CRITERIA INCLUDING FINANCIAL NEED, ACADEMIC ACHIEVEMENT, LEADERSHIP, CITIZENSHIP, AND SERVICE TO THE DELTA TAU DELTA FRATERNITY AND COMMUNITY. IN ADDITION, SEVERAL ENDOWMENT FUNDS ARE USED TO FUND THE ANNUAL GRANT TO DELTA TAU DELTA FRATERNITY WHICH PROVIDES EDUCATIONAL PROGRAMMING IN THE AREAS OF ALCOHOL ABUSE, SUBSTANCE ABUSE, LEADERSHIP, AND ACHIEVEMENT OF HIGH SCHOLASTIC ATTAINMENT.
FIN 48 footnote	Schedule D, Part X, Line 2	GUIDANCE ISSUED BY THE FASB REQUIRES THE FOUNDATION TO RECOGNIZE A TAX LIABILITY ONLY IF IT IS MORE LIKELY THAN NOT THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR. THE AMOUNT RECOGNIZED IS THE LARGEST AMOUNT OF TAX LIABILITY THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION. FOR TAX POSITIONS NOT MEETING THE MORE-LIKELY-THAN-NOT TEST, NO TAX LIABILITY IS RECORDED. THE FOUNDATION HAS EXAMINED THIS ISSUE AND HAS DETERMINED THERE ARE NO MATERIAL CONTINGENT TAX LIABILITIES OR QUESTIONABLE TAX POSITIONS. THE FOUNDATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR YEARS BEFORE 2007. THE FOUNDATION DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECOGNIZED TAX LIABILITIES TO SIGNIFICANTLY CHANGE IN THE NEXT 12 MONTHS. THE FOUNDATION RECOGNIZES INTEREST AND/OR PENALTIES RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE. THE FOUNDATION DID NOT HAVE ANY AMOUNTS ACCRUED FOR INTEREST AND PENALTIES AT JULY 31, 2010 AND 2009.
Other revenues in audited financial statements not in form 990	Schedule D, Part XII, Line 2d	RENTAL EXPENSE - 10560, OTHER - 0, TOTAL - 10560
Other expenses in audited financial statements not in form 990	Schedule D, Part XIII, Line 2d	RENTAL EXPENSE - 10560, OTHER - 0, TOTAL - 10560

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Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990

DLN: 93493059002031

OMB No 1545-0047

2009

Open to Public  
Inspection

Name of the organization  
DELTA TAU DELTA EDUCATIONAL FOUNDATION INC

Employer identification number  
31-1020203

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

Yes

No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DELTA TAU DELTA HOME ASSOCIATION1 TAYLOR PLACE GREENCASTLE,IN 46135	350870117	501(C)(2)	10,110	0	N/A	N/A	EDUCATIONAL SUPPORT
BETA CHAPTER OF DTD HOUSE ASSOCIATION 3485 CROOKED TREE DR MASON,OH 45040	316067260	501(C)(7)	122,385	0	N/A	N/A	EDUCATIONAL SUPPORT
BETHANY COLLEGEPO BOX 417 BETHANY,WV 26032	550356985	501(C)(3)	6,000	0	N/A	N/A	EDUCATIONAL SUPPORT
BETA CHI FRATERNITY 1311 NORTHWOOD CENTER COEUR DALENE,ID 83814	916059111	501(C)(2)	210,769	0	N/A	N/A	EDUCATIONAL SUPPORT
SOCIETY FOR PRESERVATION OF GREEK HOUSINGPO BOX 2765 CHAMPAIGN,IL 61825	311294139	501(C)(3)	20,000	0	N/A	N/A	EDUCATIONAL SUPPORT
DELTA TAU DELTA FOUNDATION OF GAMMA PI CHAPTER4107 GREENVIEW URBANDALE,IA 61825	237006328	501(C)(3)	8,491	0	N/A	N/A	EDUCATIONAL SUPPORT
DELTA GAMMA CHAPTER PO BOX 1612 SIOUX CITY,SD 57101	460225510	501(C)(7)	10,000	0	N/A	N/A	EDUCATIONAL SUPPORT
GAMMA XI 21 INC3435 GOLDEN AVE UNIT 1201 CINCINNATI,OH 45266	203221647	501(C)(7)	331,790	0	N/A	N/A	EDUCATIONAL SUPPORT
DELTA TAU DELTA FRATERNITY10000 ALLISONVILLE ROAD FISHERS,IN 46038	350267650	501(C)(7)	338,500	0	N/A	N/A	EDUCATIONAL SUPPORT

2

Enter total number of section 501(c)(3) and government organizations . . . . .

3

3

Enter total number of other organizations . . . . .

6

**Part III** **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS	63	31,950	0	N/A	N/A
See Additional Data Table					

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

[illegible]

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization DELTA TAU DELTA EDUCATIONAL FOUNDATION INC	Employer identification number  31-1020203
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Part I

Questions Regarding Compensation

		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		
	<div><input type="checkbox"/> First-class or charter travel</div> <div><input checked="" type="checkbox"/> Travel for companions</div> <div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div> <div><input type="checkbox"/> Discretionary spending account</div> <div><input type="checkbox"/> Housing allowance or residence for personal use</div> <div><input type="checkbox"/> Payments for business use of personal residence</div> <div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div> <div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	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		
	<div><input checked="" type="checkbox"/> Compensation committee</div> <div><input type="checkbox"/> Independent compensation consultant</div> <div><input checked="" type="checkbox"/> Form 990 of other organizations</div> <div><input checked="" type="checkbox"/> Written employment contract</div> <div><input checked="" type="checkbox"/> Compensation survey or study</div> <div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div>		
4	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		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	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		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	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		
a	The organization?	6a	No
b	Any related organization?	6b	No
	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 payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	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	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

[illegible]

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.

Identifier	Return Reference	Explanation
Travel for companions	Schedule J, Part I, Line 1a	THE PRESIDENT, KENNETH FILE, RECEIVED AN ALLOWANCE FOR SPOUSAL/FAMILY TRAVEL FROM THE ORGANIZATION. THIS WAS TREATED AS TAXABLE COMPENSATION TO THE INDIVIDUAL.
Tax indemnification and gross-up payments	Schedule J, Part I, Line 1a	THE PRESIDENT, KENNETH FILE, RECEIVED A GROSS-UP PAYMENT FOR THE TAXES DUE ON HIS ALLOWANCE FOR SPOUSAL/FAMILY TRAVEL. THE GROSS-UP PAYMENT WAS TREATED AS TAXABLE COMPENSATION TO THE INDIVIDUAL.
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a	THE ORGANIZATION PAID MEMBERSHIP DUES TO A LOCAL SOCIAL CLUB FOR THE PRESIDENT, KENNETH FILE. THE PORTION OF THE MEMBERSHIP DUES USED FOR PERSONAL USE WAS TREATED AS TAXABLE COMPENSATION TO THE INDIVIDUAL.

SCHEDULE M  
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization  
DELTA TAU DELTA EDUCATIONAL FOUNDATION INC

Employer identification number  
31-1020203

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	10	53,726	MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .	29	0		
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	30a	Yes	No	No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .	32a	Yes		
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanat ion
Third parties used to solicit, process, or sell noncash contributions	Schedule M, Part I, Line 32a	THE DELTA TAU DELTA EDUCATIONAL FOUNDATION, INC USES IT'S BANK, OLD NATIONAL BANK, TO RECEIVE, PROCESS, AND SELL ALL CONTRIBUTIONS OF STOCK

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.

OMB No 1545-0047

2009

Open to Public  
Inspection

Name of the organization DELTA TAU DELTA EDUCATIONAL FOUNDATION INC	Employer identification number 31-1020203
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Identifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11A	THE FORM 990 IS REVIEWED IN DETAIL BY MANAGEMENT AND THE ORGANIZATION'S FINANCE COMMITTEE THEN THE FINAL FORM IS SENT ELECTRONICALLY TO THE ENTIRE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE IRS
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	THE CONFLICT OF INTEREST POLICY STATES THAT NO DIRECTOR, OR MEMBER OF A BOARD COMMITTEE SHALL USE THEIR POSITION OR KNOWLEDGE GAINED THERE FROM IN SUCH A MANNER THAT A CONFLICT BETWEEN THE INTEREST OF THE ORGANIZATION AND HIS OR HER PRIVATE INTEREST ARISES THE CONDUCT OF PERSONAL BUSINESS OR THE ENTERING INTO SUCH A TRANSACTION BETWEEN ANY DIRECTOR OR BOARD COMMITTEE MEMBER AND THE FOUNDATION IS PROHIBITED UNLESS SUCH BUSINESS OR TRANSACTION IS FULLY DISCLOSED TO THE BOARD OF DIRECTORS AND THEN ONLY IF SUCH BUSINESS OR TRANSACTION IS APPROVED BY THE BOARD OF DIRECTORS ANY DIRECTOR OR BOARD COMMITTEE MEMBER WHO IS AWARE OF A POTENTIAL CONFLICT OF INTEREST IS OBLIGATED TO DISCLOSE SUCH TO THE ENTIRE BOARD TO IMPLEMENT THE POLICY , BOARD MEMBERS AND BOARD COMMITTEE MEMBERS WILL SUBMIT ANNUAL REPORTS ON A FORM APPROVED BY THE BOARD, AND IF NOT PREVIOUSLY DISCLOSED, WILL DISCLOSE ANY CONFLICT OR POTENTIAL CONFLICT BEFORE ANY ADDITIONAL BOARD ACTION IS TAKEN THESE ANNUAL REPORTS WILL BE REVIEWED IN DETAIL BY THE OFFICERS OF THE BOARD WHO WILL ATTEMPT TO RESOLVE ANY ACTUAL OR POTENTIAL CONFLICT AND, IN THE ABSENCE OF A RESOLUTION, WILL REFER ALL SUCH MATTERS TO THE FULL BOARD OF DIRECTORS
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	THE PERSONNEL COMMITTEE IS COMPRISED OF THREE MEMBERS OF THE BOARD OF DIRECTORS THAT MEET TWICE PER YEAR TO REVIEW PERFORMANCE AND SET COMPENSATION OF THE PRESIDENT OF THE FOUNDATION AN EXECUTIVE COMPENSATION AGREEMENT WAS ORIGINALLY CONCEIVED IN 1996 AND IS STILL IN EFFECT THIS AGREEMENT DETAILS HOW THE PRESIDENT IS COMPENSATED A PRODUCTION REPORT WHICH DETAILS THE PRESIDENT'S RESULTS, ARE REVIEWED AND AUDITED BY AN OUTSIDE CPA TO VALIDATE THEIR ACCURACY AT THE END OF EACH YEAR THIS CPA ISSUES A LETTER TO THE PERSONNEL COMMITTEE ATTESTING THAT THE PERFORMANCE IS COMPLIANT WITH THE COMPENSATION AGREEMENT THE ORGANIZATION REGULARLY COLLECTS COMPENSATION DATA FROM PUBLISHED 990 REPORTS OF THE 4-5 PEER FOUNDATIONS WHO HAVE SIMILAR SIZE FOUNDATIONS, ASSETS, PROGRAMS AND STAFFING CONFIGURATIONS FINAL APPROVAL OF THE RECOMMENDATION OF THE PERSONNEL COMMITTEE IS MADE BY THE FOUNDATION'S BOARD OF DIRECTORS THIS PROCESS WAS LAST UNDERTAKEN DURING THE FIRST FISCAL QUARTER OF THE CURRENT YEAR (AUGUST 2009-OCTOBER 2009) THIS IS DOCUMENTED IN THE PERSONNEL COMMITTEE MINUTES
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	THE PERSONNEL COMMITTEE REVIEWS PERFORMANCE CRITERIA AND COMPENSATION FOR THE VICE PRESIDENT - FINANCE THE ORGANIZATION REGULARLY COLLECTS COMPENSATION DATA FROM PUBLISHED 990 REPORTS OF THE 4-5 PEER FOUNDATIONS WHO HAVE SIMILAR SIZE FOUNDATIONS, ASSETS, PROGRAMS AND STAFFING CONFIGURATIONS THIS PROCESS WAS LAST UNDERTAKEN DURING THE FIRST FISCAL QUARTER OF THE CURRENT YEAR (AUGUST 2009-OCTOBER 2009) THIS IS DOCUMENTED IN THE PERSONNEL COMMITTEE MINUTES
Public Disclosure	Form 990, Part VI, Section C, Line 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST IN ADDITION, THE GOVERNING DOCUMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE
FUNCTIONAL EXPENSES	FORM 990, PART IX, LINE 25	THE STATEMENT OF FUNCTIONAL EXPENSES SHOWS THAT 56% OF EXPENSES ARE SPENT ON PROGRAMS HOWEVER, AS A 501(C)(3), THE DELTA TAU DELTA EDUCATIONAL FOUNDATION, INC 'S PRIMARY PURPOSE IS TO SUPPORT EDUCATION THROUGH FUNDRAISING EFFORTS THE ORGANIZATION CONSIDERS FUNDRAISING EXPENSES TO BE AN INTEGRAL PART OF THEIR TAX-EXEMPT PURPOSE, AND THEREFORE IT SHOULD BE NOTED THAT THE ORGANIZATION'S FUNDRAISING EXPENSES COMBINED WITH THE PROGRAM SERVICE EXPENSES ACCURATELY REPRESENT THE RATIO OF EXPENSES THAT FUND THE ORGANIZATION'S MISSION THUS IT SHOULD BE NOTED THAT THE ORGANIZATION SPENDS 82% OF EXPENSES TO FUND ITS MISSION OF SUPPORTING EDUCATION
DOCUMENTATION OF MEETINGS HELD BY COMMITTEES OF GOVERNING BODY	FORM 990, PART VI, SECTION A, LINE 8B	THIS QUESTION DOES NOT APPLY TO THE ORGANIZATION BECAUSE THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY THEREFORE THIS QUESTION HAS BEEN INTENTIONALLY LEFT BLANK
COMPENSATION	FORM 990, PART VII, SECTION A	THE FOUNDATION'S EMPLOYEES WERE PREVIOUSLY PAID BY DELTA TAU DELTA FRATERNITY , A RELATED ORGANIZATION AS OF AUGUST 2009, THE ORGANIZATION NOW PAYS ITS EMPLOYEES DIRECTLY AND ISSUES THE APPROPRIATE PAYROLL TAX FORMS DIRECTLY THEREFORE, PART VII SHOWS THAT A PORTION OF THE COMPENSATION RECEIVED BY THE OFFICERS WAS PAID BY DELTA TAU DELTA FRATERNITY AND A PORTION WAS PAID BY THE FOUNDATION



Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
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Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

1h

No

1i

Yes

1j

No

1k

No

1l

Yes

1m

Yes

1n

Yes

1o

Yes

1p

No

1q

No

1r

No

2

If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	DELTA TAU DELTA FRATERNITY	B	338,500
(2)	DELTA TAU DELTA FRATERNITY	I	111,364
(3)	DELTA TAU DELTA FRATERNITY	O	118,645
(4)			
(5)			
(6)			

**Part VI**   **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Additional Data

Software ID:

Software Version:

EIN: 31-1020203

Name: DELTA TAU DELTA EDUCATIONAL FOUNDATION INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DANIEL L EARLEY ASSISTANT TREASURER	5	X		X				0	0	0
JOHN W GLEESON TREASURER	5	X		X				0	0	0
OK JOHNSON SECRETARY	5	X		X				0	0	0
KENNETH J KIES VICE CHAIRMAN	5	X		X				0	0	0
ROBERT F CHARLES JR CHAIRMAN	5	X		X				0	0	0
JAMES O SELZER DIRECTOR	1	X						0	0	0
JIDGE VERITY DIRECTOR	2	X						0	0	0
TRAVIS O ROCKEY DIRECTOR	2	X						0	0	0
NORVAL B STEPHENS JR DIRECTOR	5	X						0	0	0
DONALD G KRESS DIRECTOR	3	X						0	0	0
DAVID B HUGHES DIRECTOR	2	X						0	0	0
KENT R HANCE DIRECTOR	1	X						0	0	0
JAMES W GARBODEN DIRECTOR	2	X						0	0	0
F RUSSELL DOUGLASS JR DIRECTOR	2	X						0	0	0
JODY B DANNEMAN DIRECTOR	2	X						0	0	0
THOMAS F CALHOON II DIRECTOR	1	X						0	0	0
DENNIS A BRAWFORD DIRECTOR	1	X						0	0	0
ALAN G BRACKETT DIRECTOR	5	X						0	0	0
MURRAY M BLACKWELDER DIRECTOR	3	X						0	0	0
MAURIE PHELAN VICE PRESIDENT - FINANCE	45			X				23,800	37,394	9,270
KENNETH FILE PRESIDENT	60			X				127,548	113,933	26,471

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
RENTAL INCOME FROM DTD FRATERNITY		111,364	111,364	0	0
CONSULTING FEES		1,000	1,000	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
FUNDRAISING	51,673	2,378	0	49,295
DONOR RECOGNITION EXPENSE	8,744	0	5,093	3,651
OTHER EXPENSES	61,437	5,228	16,133	40,076
	0	0	0	0
	0	0	0	0