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# Form **990**

932001 02-04-10

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)

2009

Open to Public Inspection

OMB No 1545-0047

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

	A F	or the	lpha 2009 calendar year, or tax year beginning $AUG~1$ , $~2009$ and ending	JUL 31, 2010	
	Во	heck if	Please C Name of organization	D Employer identific	ation number
	a		USE INSTITUTE OF		
	<u></u>	Addre chang	e print or GAMMA PHI BETA SORORITY INC.		
	<u>_</u>	]Name ]chang ]Initial	Doing Business As	51-02	215481
	<u> </u>	Jretum Termi	See Specific Instruct MINE STREET Room/si	•	
	$\vdash$	Jated ∃Amen∉	lod to the second secon		396132
	$\vdash$	Jreturn ∏Applic	a- NEW BRUNSWICK, NJ 08901	G Gross receipts \$	96,694.
		I tion pendii	F Name and address of principal officer:JULIA GOREL	H(a) is this a group ref	Yes X No
			4 MINE STREET, NEW BRUNSWICK, NJ 08901	H(b) Are all affiliates incl	
	1 T	ax-ex	empt status: X 501(c) (7 )		ist. (see instructions)
			e: > WWW.GAMMAPHIBETA.ORG	H(c) Group exemption	
	K F	orm of	organization		State of legal domicile NJ
	Pa	rt I	Summary		
	ce		Briefly describe the organization's mission or most significant activities: THE MISS		MOTE THE
	& Governance		CULTURAL, SOCIAL AND EDUCATIONAL GROWTH OF M	<del></del>	
	ver		Check this box   (It is organization discontinued its operations or disposed of noting members of the governing body (Part VI, line 1a)	1 _ 1	sets. 3
	õ		Number of independent voting members of the governing body (Part VI, line 1b)	3 4	0
=	S &		Total number of employees (Part V, line 2a)	5	0
20	itie		Total number of volunteers (estimate if necessary)	6	0
~	cti		Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
0	٩		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
JAN 0 6 2011				Prior Year	Current Year
	e	8	Contributions and grants (Part VIII, line 1h)		
Ω	Revenue	9	Program service revenue (Part VIII, line 2g)	91,268.	96,694.
뾧	Ŗ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
SCANNED			Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	01 060	06.604
$\delta$			Total revenue - add lines 8 through Fritus Edual Part VIII, column (A), line 12)	91,268.	96,694.
Ś		13	Grants and similar amounts paid (Part IX, column (A) lines 1-3)		
	<b>'</b> 0	14 15	Benefits paid to or formembers (Part IX, column (A) (Ire 4)		<del> </del>
	Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraisinglifees (Part IX, column (A), line 11e)		
	per		Total fundraising expenses (Part (X) solution (D) Tine 25)		
	ш		Other expenses (Part IX, column (A), lines i ran rid, i rid, 24f)	67,350.	108,521.
		1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	67,350.	108,521.
			Revenue less expenses. Subtract line 18 from line 12	23,918.	-11,827.
	Net Assets or Fund Balances			Beginning of Current Year	End of Year
	Sset	20	Total assets (Part X, line 16)	49,463.	28,585.
	at Age	21	Total liabilities (Part X, line 26)	16,542.	7,491.
	콛		Net assets or fund balances. Subtract line 21 from line 20	32,921.	21,094.
	Pa	ert (I	Signature Block Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements.		
			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledge dge	e and beiter, it is true, correct,
	Sigi		DILLAN GAROLA	1 12/19	2/10
	Her		Signature of officer	Date Date	U/-IV
		-	JULIA GOREL, PRESIDENT		
			Type or print name and title	-	<del></del>
	Paid	ı	Preparer's Date		's identifying number
	_	arer's	signature Robert A. Dillespie 12/3/10	self- employed <b>X</b>	
		Only	Firm's name (or yours if GILLESPIE & ASSOCIATES, L.L.C.	EIN ► 22.3	774160
		,	self-employed), address, and CHERRY MARLKRESS RD., STE. 102		157 Unil -100
			ZIP+4 CHERRY HILL, NJ 08003	Phone no ► C	36-424-3/20
	ivial	ıne II	RS discuss this return with the preparer shown above? (see instructions)		L Yes L No

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

4d Other program services. (Describe in Schedule O)

including grants of \$

) (Revenue \$

4e Total program service expenses ▶\$

108,520.

### 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		<u>X</u>
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			.,
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			v
44	If "Yes," complete Schedule D, Part V	10		_X_
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		х	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11	Λ	
_	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		X
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 X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
4-	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			17
40	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		v
47	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
12	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
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	,,		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
. 9	complete Schedule G, Part III	10		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19 20		$\frac{\Lambda}{X}$
	se and organisation operate one or more neophales. II Test, complete ochequie II		aan /	2000)

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, continum (A), into 17 IV reg. "complete Schedule (Parts and II)  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 27 IV reg. "complete Schedule (Part I and II)  23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Schedule II was assisted after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K II "No"; go to line 25  24a Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?  25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  26c Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  27d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  28d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  28d Was also not or by a current or former officer, director, trustee, key employee?  28d Did the organization issuer year?  28d Did t			1	Yes	No
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), the 2° Jr "Yes," complete Schedule I, Part I and IX and former officers, directors, frustees, key employees, and highest compensation of the organization's current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is and the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is and asy of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is If "No", ye to line 25 bill the organization maintain an escrow account other than a refunding escrow at any time during the year 10 bill the organization and so the same and the organization end of the organization with a disqualified person during the year? If "Yes," complete Schedule I, Part I is the organization wave that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I is the organization wave that it engaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990-E27 If "Yes," complete Schedule I, Part II is the organization part of the end of the organization's tax year? If "Yes," complete Schedule I, Part II is the organization part of the end of the organization's tax year? If "Yes," complete Schedule I, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, furestor, furustee, key employee, highly compensated employee, or disqualified confinition, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule I, Part IV inst	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
column (A), line 27 II "Yes," complete Schedule I, Parts I and III 2 Did the organization assure "Yes" to Part IVI, Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II have 25 Unit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Unit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Unit the organization and that an escrew account other than a refunding secrow at any time during the year? 24d Unit the organization and as an in-on-behalf of issuer for bonds outstanding at any time during the year? 24d Unit the organization and the period of 15d (3) and 501 (6)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II b Is the organization as not been reported on any of the organization's prior Forms 990 or 990-27 if "Yes," complete Schedule I, Part II 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 prior Forms 990 or 990-27 if "Yes," complete Schedule I, Part IV 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 organizations with one of the following parties, (see Schedule I, Part IV Was a form of the organization organization organization organization organization organization organization aparty to a business transaction with one of the following parties, (see Schedule I, Part IV A		United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		X
23 Del the organization answer "Yes" to Part VII. Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J view of the year, that was issued after December 31, 2002? If "Yes," answer ines 24b through 24d and complete Schedule K If "No", or to line 25  Did the organization have a travexempt bond sure with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer ines 24b through 24d and complete Schedule K If "No", or to line 25  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Se", complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Se", complete Schedule L, Part I b was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person our outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee, substantial contributor, or a grant selection committee embers, or to be proson related to such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions and officer, director, trustee, or key employee?	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K "No", go to hine 25  b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  D) Did the organization mantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  D) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? decided by the programization act as an "on behalf of" issuer for bonds outstanding at any time during the year? decided disciplinations. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  D) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  D) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  D) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  D) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  D) Is the organization act any tax exempt of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction that the transaction with a disqualified person in a prior year, and that the transaction that the transaction with a disqualified person in a prior year, and that the transaction of the organization and officer, director, trustee, key employee, highly compensated employee, or disqualified person outsta		column (A), line 2 <sup>7</sup> If "Yes," complete Schedule I, Parts I and III	22		Х
Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No.", go to line 25	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Dit the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K if "No", or to here 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b Z4b  27b Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  28c Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  b Is the organization or acts at 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-E2? If "Yes," complete Schedule L, Part II  25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IIV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, furestee, or key employee? If "Yes," complete Schedule L, Part IIV instructions for applicable filing thresholds, conditions, and exceptions?  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IIV instructions for applicable filing thresholds, conditions, and exceptions?  If "Yes," complete Schedule N, Part II III IIV instructions for a partical particul		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25  Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  did by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  25a Section 501(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  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 aware that it engaged in an excess benefit transaction in a prior year, and that the transaction 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-E27 if "Yes," complete Schedule L, Part II  25b  26b  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 value in individual? If "Yes," complete Schedule L, Part IV  27 Did the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV  28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization and the second or indirect or indirect outset, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization related to any exceptions? If "Yes," complete Schedule M  29 Did the organization organization exceptions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complet		Schedule J	23		Х
Schedule K If *No**, go to line 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d  Did the organization act as an *on behalf of* issuer for bonds outstanding at any time during the year?  25a  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? *i** "Ye*," complete Schedule L, Part I b Is the organization has not been reported on any of the organization's prior Forms 990 or 990-E27 if *Ye*," complete Schedule L, Part I b Is the organization maintain any of the organization organization engage 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-E27 if *Ye*," complete Schedule L, Part II b Is the organization 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-E27 if *Ye*," complete Schedule L, Part II b If the organization or of the organization's prior Forms 990 or 990-E27 if *Ye*," complete Schedule L, Part II b If the organization or of the organization's tax year? If *Ye*," complete Schedule L, Part IV and truth or of the organization or of the organization or on on the organization receive more fifter, director, trustee, or key employee? If *Ye*, complete Schedule L, Part IV 28b X  Did the organization and organization o	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
Schedule K If *No**, go to line 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d  Did the organization act as an *on behalf of* issuer for bonds outstanding at any time during the year?  25a  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? *i** "Ye*," complete Schedule L, Part I b Is the organization has not been reported on any of the organization's prior Forms 990 or 990-E27 if *Ye*," complete Schedule L, Part I b Is the organization maintain any of the organization organization engage 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-E27 if *Ye*," complete Schedule L, Part II b Is the organization 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-E27 if *Ye*," complete Schedule L, Part II b If the organization or of the organization's prior Forms 990 or 990-E27 if *Ye*," complete Schedule L, Part II b If the organization or of the organization's tax year? If *Ye*," complete Schedule L, Part IV and truth or of the organization or of the organization or on on the organization receive more fifter, director, trustee, or key employee? If *Ye*, complete Schedule L, Part IV 28b X  Did the organization and organization o		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
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b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Part II, III, IV, and V, line 1  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	а		28a	Ì	Х
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  Is any related organization a controlled entity within the meaning of section 512(b)(13)?  If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Tod the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11 and 19?	ь				
an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  33 Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  Is any related organization a controlled entity within the meaning of section 512(b)(13)?  If "Yes," complete Schedule R, Part V, line 2  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Note. All Form 990 filers are required to complete Schedule O  38 X	С				
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Note. All Form 990 filers are required to complete Schedule O	38		- ·		
			38	x	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0	]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u></u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	ļ	
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	ļ	X
Ь	If "Yes," enter the name of the foreign country.	ļ		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			١
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	_		
_	Tax Shelter Transaction?	_5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			Х
	any contributions that were not tax deductible?	6a	-	^
Þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6.		
-	were not tax deductible?	6b	-	<del>                                     </del>
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			1
а	provided to the payor?	7a		
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<del> </del> -	†
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	''	<del>                                     </del>	
·	to file Form 8282?	7c		
а	If "Yes," Indicate the number of Forms 8282 filed during the year 7d		_	<del>  "</del>
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
_	benefit contract?	7e	[	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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	ļ	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	ļ	<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	<del> </del>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
þ	· · · · · · · · · · · · · · · · · · ·	1		1
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	1		1

12b

amounts due or received from them.)

**b** Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	3		
b	To	<u>0</u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	i		
	governing body?	7a		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	ļ .	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:	;		
a	The governing body?	_8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			٠,,
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
100	Doop the organization have lead aboutors, branches or effiliated?	40	Yes	No_X
	Does the organization have local chapters, branches, or affiliates?  If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		
Ü	and branches to ensure their operations are consistent with those of the organization?	406		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	10b	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11	Α .	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	Х
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120		
-	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
	In Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			-
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		X
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		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ınd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ation: 🕨		
	LENA HERZFELD - 973-477-1458			
	4 MINE ST, NEW BRUNSWICK, NJ 08901			
		Form	990 (	2009)

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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

X Check this box if the organization did (A) Name and Title	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours	(c			osition all that apply)		lv)	Reportable compensation	Reportable compensation	Estimated amount of
TENA HERZFELD	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
LENA HERZFELD										
FINANCIAL VP	15.00	ļ	ļ			<u> </u>		0.	0.	0
LAURA FRENAUX			İ		İ				_	
ADMINISTRATIVE VP	15.00	ļ.,	ļ			<u> </u>		0.	0.	0
JULIA GOREL PRESIDENT	15.00							0.	ο.	0
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Par	t VII Section A. Officers, Directors, T		mplo	yee			High	est			ı		
	Name and title	(B) Average hours	verage Position					ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of		
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	org an	other opensation the panizated related anization	e ion ied
			-										
1 b	Total						▶		0.	0.			0.
2	Total number of individuals (including but compensation from the organization	not limited to t	hose	liste	ed al	bov	e) wh	o re	eceived more than \$100	,000 ın reportable			0
	compensation from the organization									_		Yes	No
3	Did the organization list any <b>former</b> office line 1a? <i>If</i> "Yes," complete Schedule J for			, ke	у еп	olqr	yee,	or h	nghest compensated en	nployee on	3		Х
4	For any individual listed on line 1a, is the									the organization			
5	and related organizations greater than \$1 Did any person listed on line 1a receive or									ces rendered to	4		Х
Soo	the organization? If "Yes," complete Schelition B. Independent Contractors	edule J for such	pers	on							5		X
1	Complete this table for your five highest of the organization.	compensated in	depe	ende	ent c	ont	racto	rs t	hat received more than	\$100,000 of compens	sation	from	
	(A) Name and busines	ss address							(B) Description of s	ervices (	(Compe	C) nsatio	n
								-					<u></u>

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

Pa	rt VII	Statement of Rever	nue					
	•				<b>(A)</b> 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	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	ts, and ve 1f					
Program Service Revenue	2 a b c	MEMBER DUES		Business Code 900099	96,694.	96,694.		
Prograi Re	d e f	All other program service reve						
	a	Total. Add lines 2a-2f		<u> </u>	96,694.			
	3 4 5	Investment income (including other similar amounts) Income from investment of tal Royalties		est, and	30,0310			
	6 a b c	Gross Rents Less: rental expenses Rental income or (loss)	(i) Real	(II) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
Other Revenue	d	Gain or (loss)  Net gain or (loss)  Gross income from fundraisin including \$  contributions reported on line	of	<b>&gt;</b>				
Other R	c	Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ad Part IV, line 19	-	<b></b>				
	С	Less: direct expenses  Net income or (loss) from gam  Gross sales of inventory, less and allowances	<b>b</b> ning activities	<b>&gt;</b>				
-	С	Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu	ie	Business Code				
	11 a b c d	All other revenue						
		Total. Add lines 11a-11d		<b>•</b>				<u> </u>
	12	Total revenue See instructions		<u> </u>	96,694.	96,694.	0.	0.
93200 02-04	9 -10							Form <b>990</b> (2009)

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members		· · · · · · · · · · · · · · · · · · ·		
5	Compensation of current officers, directors,			į	
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		****		
7	Other salaries and wages		,_		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				ļ <u>.</u>
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	2,020.			
Ь	Legal				<u> </u>
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees		·		<u> </u>
9	Other				
12	Advertising and promotion	400			
13	Office expenses	408.		-	<del></del>
14	Information technology				
15	Royalties	24 205			
16	Occupancy	34,295.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	3,944.		 	
19	Conferences, conventions, and meetings	3,944.	<u> </u>		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	<u> </u>	<u></u>		
23	Insurance		,		
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total				
_	expenses shown on line 25 below ) DUES AND FEES	32,373.			
a	NEW MEMBER COSTS	11,263.			
	BADGES	5,724.	<u></u> -		
ن ام	PRESIDENT FEES	5,336.			
u	RECRUITMENT	5,002.			·
f	All other expenses	8,156.			
25	Total functional expenses Add lines 1 through 24f	108,521.	<u> </u>	-	
26	Joint costs. Check here Info@ing	100,021.			
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
				1	L

932010 02-04-10

Pa	rt X	Balance Sheet				
	·			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		44,480.	1	26,830.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, directors	, trustees, key			
		employees, and highest compensated employees. Con	mplete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as define	d under section			
		4958(f)(1)) and persons described in section 4958(c)(3)	(B) Complete			
		Part II of Schedule L			6	
sts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				· · · · · · · · · · · · · · · · · · ·
		basis. Complete Part VI of Schedule D 10a				
	b	Less: accumulated depreciation 10b			10c	
	11	Investments · publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		4,983.	15	1,755.
	16	Total assets. Add lines 1 through 15 (must equal line 3	34)	49,463.	16	1,755. 28,585.
	17	Accounts payable and accrued expenses		4,983.	17	1,755.
	18	Grants payable			18	· <del></del>
	19	Deferred revenue		11,559.	19	5,736.
	20	Tax-exempt bond liabilities			20	· .
es	21	Escrow or custodial account liability. Complete Part IV			21	
Liabilities	22	Payables to current and former officers, directors, trus				
ia.		highest compensated employees, and disqualified per	sons. Complete Part II			
_		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated th	·		23	
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D		16 540	25	
	26	Total liabilities. Add lines 17 through 25	[] ·	16,542.	26	7,491.
		Organizations that follow SFAS 117, check here	and complete			1
Ses	0.7	lines 27 through 29, and lines 33 and 34.				
<u>la</u>	27	Unrestricted net assets			27	
Net Assets or Fund Balances	28	Temporarily restricted net assets		<del>-</del>	28	
בַּ	29	Permanently restricted net assets	▶ ♥ .	· · · · · · · · · · · · · · · · · · ·	29	
Œ		Organizations that do not follow SFAS 117, check h	ere 🕨 🗘 and			
S	20	complete lines 30 through 34.		0		0
set	30	Capital stock or trust principal, or current funds	- A & d	0.	30	0.
t As	31	Paid-in or capital surplus, or land, building, or equipme		0.	31	0.
Ne.	32	Retained earnings, endowment, accumulated income,	or other tunds	32,921.	32	21,094.
	33	Total net assets or fund balances		32,921.	33	21,094.
	34	Total liabilities and net assets/fund balances		49,463.	34	28,585.

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	_2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	1		]
	Act and OMB Circular A-133?	3a		X
þ	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	3ь		<u> </u>

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

► Attach to Form 990. ► See separate instructions.

2009 Open to Public Inspection

DELTA MU CHAPTER OF Name of the organization **Employer identification number** GAMMA PHI BETA SORORITY INC. 51-0215481 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 Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2¢ 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 tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part # 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

0.

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)

GAMMA	PHI	BETA	SORORITY	INC

Part VII Investments - Other Securities.	See Form 990, Part X, line 12.				
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation. Cost or end-of-year market value		
Financial derivatives					
Closely-held equity interests					
Other					
		<del></del>			
		<del></del>			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12 )	<b>▶</b>				
Part VIII Investments - Program Related	See Form 990, Part X, line 13				
(a) Description of investment type	(b) Book value		(c) Method of valuation: ost or end-of-year market value		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13 )	<b>&gt;</b>				
Part IX Other Assets. See Form 990, Part X, I					
	(a) Description		(b) Book value		
CHAPTER DEFERRED EXPENSE			1,755.		
	· · · · · · · · · · · · · · · · · · ·				
Total. (Column (b) must equal Form 990, Part X, col (B)			<b>▶</b> 1,755.		
Part X Other Liabilities. See Form 990, Part					
1. (a) Description of liability	(D	) Amount			
Federal Income taxes					
Tabal (Calume III)					
Total. (Column (b) must equal Form 990, Part X, col (B)	line 25 ) ▶				

uncertain tax positions under FIN 48 932053 02-01-10

DELTA MU CHAPTER OF GAMMA PHI BETA SORORITY INC. Schedule D (Form 990) 2009 51-0215481 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 96,694. Total revenue (Form 990, Part VIII, column (A), line 12) 108,521. Total expenses (Form 990, Part IX, column (A), line 25) 2 -11,8273 Excess or (deficit) for the year. Subtract line 2 from line 1 3 Net unrealized gains (losses) on investments 4 5 Donated services and use of facilities 5 6 investment expenses 6 7 Prior period adjustments 8 Other (Describe in Part XIV) 8 Total adjustments (net) Add lines 4 through 8 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 -11,827 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIV) 2d e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIV.) c Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a **b** Prior year adjustments 2ь c Other losses 2c d Other (Describe in Part XIV) 2d e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 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 **b** Other (Describe in Part XIV) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental 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, line 2; 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.

Schedule D (Form 990) 2009

## SCHEDULE O (Form 990)

**Supplemental Information to Form 990** 

Department of the Treasury

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

Attach to Form 990.

2009 Open to Public Inspection

Internal Revenue Service			Attach to	Form 990.		Inspection	
3		DELTA MU CH GAMMA PHI H	HAPTER OF BETA SORORIT		Employer identification number 51-0215481		
FORM 990,	PAR	T VI, SECTION	B, LINE 11:	THE GOVERNING	BODY W	AS GIVEN THE	
RETURN TO	REV	'IEW AND COMPAI	RE THEIR INF	ORMATION TO TH	E RETURI	N BEFORE THE	
RETURN WA	s si	GNED AND FILE	).				·
FORM 990,	PAR	T VI, SECTION	C, LINE 19:	THE GOVERNING	DOCUMEN	NTS WILL BE	
AVAILABLE	АТ	THE SORORITY'S	S ADDRESS FO	R REVIEW UPON 1	REQUEST	ALONG WITH I	CHE
FINANCIAL	STA	TEMENTS AND TA	AX RETURN.				
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