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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047

2010

Open to Public
Inspection

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

A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable:
☐ Address change
☒ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
PI KAPPA ALPHA FOUNDATION
Doing Business As
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
8347 WEST RANGE COVE
City or town, state or country, and ZIP + 4
MEMPHIS, TN 38125

D Employer identification number
62-6039877

E Telephone number
(901) 748-1948

G Gross receipts \$ **2,850,501.**

H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) Are all affiliates included? ☐ Yes ☒ No
 If "No," attach a list (see instructions)

F Name and address of principal officer. **PATRICK F. HAYNES**
SAME AS C ABOVE

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: **WWW.PIKEFOUNDATION.ORG**

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: **1950** **M State of legal domicile:** **TN**

H(c) Group exemption number ▶

Part I Summary

1 Briefly describe the organization's mission or most significant activities. **SEE SCHEDULE O**

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3** **11**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** **11**

5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) **5** **6**

6 Total number of volunteers (estimate if necessary) **6** **0**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** **0.**

b Net unrelated business taxable income from Form 990-T, line 34 **7b** **0.**

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,052,729.	1,578,777.
9 Program service revenue (Part VIII, line 2g)	0.	0.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	90,205.	185,703.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	146,504.	174,960.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,289,438.	1,939,440.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	148,632.	516,322.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	407,867.	458,525.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	138,704.
b Total fundraising expenses (Part IX, column (A), line 25) 348,627.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	736,495.	619,002.
18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	1,292,994.	1,732,553.
19 Revenue less expenses. Subtract line 18 from line 12	<3,556.>	206,887.
20 Total assets (Part X, line 16)	Beginning of Current Year 7,859,243.	End of Year 8,275,133.
21 Total liabilities (Part X, line 26)	1,184,831.	1,176,981.
22 Net assets or fund balances. Subtract line 21 from line 20	6,674,412.	7,098,152.

Part II Signature Block

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.

Sign Here **Signature of officer** **7-15-2011**
PATRICK F. HAYNES, CHIEF EXECUTIVE OFFICER
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name **CAROL A. JOHNSON BISHOP** Preparer's signature **CAROL A. JOHNSON BI** Date **07/12/11** Check ☐ self-employed PTIN
 Firm's name **DIXON HUGHES GOODMAN LLP** Firm's EIN
 Firm's address **999 S. SHADY GROVE RD, STE 400** Phone no. **(901) 761-3000**
MEMPHIS, TN 38120

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☒ X

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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 \$ 318,535. including grants of \$ _____) (Revenue \$ _____)MAINTENANCE OF WAR MEMORIAL HEADQUARTERS4b (Code: _____) (Expenses \$ 516,322. including grants of \$ _____) (Revenue \$ _____)SCHOLARSHIPS/AWARDS4c (Code: _____) (Expenses \$ 9,676. including grants of \$ _____) (Revenue \$ _____)SHIELD AND DIAMOND

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

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

4e Total program service expenses **844,533.**

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b 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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d 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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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 United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Form 990 (2010)

Part IV Checklist of Required Schedules (continued)

	Yes	No
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 X	
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 X	
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? <i>If "Yes," complete Schedule J</i>	23 X	
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	X
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 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>If "Yes," complete Schedule L, Part I</i>	25a	X
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	X
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	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	X
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	X
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	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
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	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
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	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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
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 X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☐ Yes ☒ No		
36 Section 501(c)(3) organizations. 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 X	
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	X
38 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	38 X	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 0		
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 6		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	
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 X
b If "Yes," enter the name of the foreign country. <u>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			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 X
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 X
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 X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			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		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O			13a
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b

Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	11	
b Enter the number of voting members included in line 1a, above, who are independent	11	
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?		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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
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		X

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **TN**

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 for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ 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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **PATRICK F. HAYNES - 901-748-1948**
8347 W. RANGE COVE, MEMPHIS, TN 38125

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**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.

- 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, if any. 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.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
EDWARD A. PEASE TRUSTEE	1.00	X						0.	0.	0.
RONALD E. ROARK PRESIDENT	1.00	X						0.	0.	0.
BRUCE A. WOLFSON SECRETARY/TREASURER	1.00	X						0.	0.	0.
JERRY W. ASKEW TRUSTEE	1.00	X						0.	0.	0.
JOSEPH CARUSO VICE PRESIDENT	1.00	X						0.	0.	0.
KEITH J. KETCHMAN TRUSTEE	1.00	X						0.	0.	0.
WILLIAM N. LAFORGE TRUSTEE EMERITUS	1.00	X						0.	0.	0.
JOHN L. LISHER TRUSTEE	1.00	X						0.	0.	0.
MARK A ROBERTSON TRUSTEE	1.00	X						0.	0.	0.
DR. THOMAS C. TILLAR, JR. TRUSTEE	1.00	X						0.	0.	0.
JOSEPH J. TURNER, JR. TRUSTEE	1.00	X						0.	0.	0.
RICHARD F. OGLE TRUSTEE EMERITUS	1.00	X						0.	0.	0.
MARIVIN D. DENNIS TRUSTEE EMERITUS	1.00	X						0.	0.	0.
W.THOMAS CLARK, JR. TRUSTEE	1.00	X						0.	0.	0.
PATRICK HAYNES CHIEF EXECUTIVE OFFICER	40.00			X		X		173,797.	0.	10,106.
RAYMOND ORIAN DEVELOPMENT OFFICER	40.00			X				90,250.	32,642.	10,697.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
1b Sub-total								264,047.	32,642.	20,803.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								264,047.	32,642.	20,803.

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**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

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. **NONE**

(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	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d	45,000.			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1533777.			
	g Noncash contributions included in lines 1a-1f \$		60,468.			
	h Total. Add lines 1a-1f		1578777.			
	Program Service Revenue	Business Code				
2 a						
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		96,399.			96,399.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real	89,731.			
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)	89,731.			
	d Net rental income or (loss)		89,731.	89,731.		
	7 a Gross amount from sales of assets other than inventory	(i) Securities	1,000,365.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	911061.			
		c Gain or (loss)	89,304.			
	d Net gain or (loss)		89,304.			89,304.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
		c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities See Part IV, line 19	a				
		b Less: direct expenses	b			
		c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances	a				
		b Less: cost of goods sold	b			
		c Net income or (loss) from sales of inventory				
Miscellaneous Revenue		Business Code				
11 a MISCELLANEOUS INCOME	900099	51,491.	51,491.			
b ADMINISTRATIVE FEES	900099	33,738.	33,738.			
c						
d All other revenue						
e Total. Add lines 11a-11d		85,229.				
12 Total revenue. See instructions.		1939440.	174,960.	0.	185,703.	

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	510,416.	510,416.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	5,906.	5,906.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	278,653.	35,625.	243,028.	
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	133,772.	53,400.	15,573.	64,799.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,154.		6,154.	
9 Other employee benefits	11,071.		11,071.	
10 Payroll taxes	28,875.		28,875.	
11 Fees for services (non-employees):				
a Management				
b Legal	123.		123.	
c Accounting	77,975.	13,250.	64,725.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	138,704.			138,704.
f Investment management fees	18,190.		18,190.	
g Other	45,557.		15,000.	30,557.
12 Advertising and promotion				
13 Office expenses	37,308.		37,308.	
14 Information technology	9,600.		9,600.	
15 Royalties				
16 Occupancy	117,675.	104,825.	12,850.	
17 Travel	57,322.		24,331.	32,991.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	5,495.	5,495.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	110,100.	96,888.	13,212.	
23 Insurance	30,303.	9,052.	21,251.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a ANNUAL FUNDRAISING EXPE	56,720.			56,720.
b DONOR RECOGNITION	24,856.			24,856.
c SHIELD & DIAMOND	9,676.	9,676.		
d				
e				
f All other expenses	18,102.		18,102.	
25 Total functional expenses Add lines 1 through 24f	1,732,553.	844,533.	539,393.	348,627.
26 Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	911,699.	2	698,986.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	94,718.	4	281,095.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,474.	9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,617,618.		
	b Less: accumulated depreciation	10b 2,872,616.	1,855,102.	10c 1,745,002.
	11 Investments - publicly traded securities	4,818,486.	11	5,357,044.
	12 Investments - other securities. See Part IV, line 11	177,764.	12	193,006.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,859,243.	16	8,275,133.	
Liabilities	17 Accounts payable and accrued expenses	176,328.	17	160,302.
	18 Grants payable		18	
	19 Deferred revenue	3,902.	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	431,284.	24	402,652.
	25 Other liabilities. Complete Part X of Schedule D	573,317.	25	614,027.
	26 Total liabilities. Add lines 17 through 25	1,184,831.	26	1,176,981.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	948,494.	27	603,071.
	28 Temporarily restricted net assets	1,252,608.	28	1,295,739.
	29 Permanently restricted net assets	4,473,310.	29	5,199,342.
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	6,674,412.	33	7,098,152.
34 Total liabilities and net assets/fund balances	7,859,243.	34	8,275,133.	

Form 990 (2010)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,939,440.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,732,553.
3	Revenue less expenses. Subtract line 2 from line 1	3	206,887.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,674,412.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	216,853.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	7,098,152.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

☒

- 1** Accounting method used to prepare the Form 990. ☐ 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?
- b** Were the organization's financial statements audited by an independent accountant?
- c** 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?
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 separate basis, consolidated 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 Act and OMB Circular A-133?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

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

2010

**Open to Public
Inspection**

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number

62-6039877

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 described in **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 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									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	985,791.	1,352,897.	1,244,172.	1,052,729.	1,578,777.	6,214,366.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	985,791.	1,352,897.	1,244,172.	1,052,729.	1,578,777.	6,214,366.
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)						329,869.
6 Public support. Subtract line 5 from line 4						5,884,497.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	985,791.	1,352,897.	1,244,172.	1,052,729.	1,578,777.	6,214,366.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	125,055.	141,437.	129,866.	186,041.	186,130.	768,529.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)			11,761.	60,676.	85,229.	157,666.
11 Total support. Add lines 7 through 10						7,140,561.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	82.41 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	84.80 %
16a 33 1/3% support test - 2010. 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 - 2009. If the organization did not check a 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 - 2010. 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 - 2009. 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 ► ☐		

Schedule A (Form 990 or 990-EZ) 2010

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. 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 ► ☐

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010Open to Public
Inspection

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number

62-6039877

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?		☐ Yes ☐ No
6 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?		☐ Yes ☐ 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 education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 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
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 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 (ASC 958), 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 (ASC 958), 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 (ASC 958) 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 acquisition, 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:

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

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	4,620,900.	4,023,814.	4,941,838.		
b Contributions	1,981,747.	147,184.	172,704.		
c Net investment earnings, gains, and losses	300,721.	528,936.	<1,008,833.>		
d Grants or scholarships	463,342.	79,034.	81,895.		
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	6,440,026.	4,620,900.	4,023,814.		

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☒ 20.00 %
 b Permanent endowment ☒ 81.00 %
 c Term endowment ☒ <1.00> %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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

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

Part VI 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		610,688.		610,688.
b Buildings		3,166,022.	2,118,949.	1,047,073.
c Leasehold improvements				
d Equipment		840,908.	753,667.	87,241.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,745,002.

Schedule D (Form 990) 2010

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
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) DEFERED COMPENSATION	614,027.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

614,027.

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number
62-6039877

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
- b ☐ Internet and email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
INNOVASSION - 625 CANAL ROAD, WATERVILLE, OH 43566	GENERAL FUNDRAISING CONSULTING		X	0.	138,704.	0.
Total					138,704.	

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less. Charitable contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				()
	11 Net income summary. Combine line 3, column (d), and line 10				

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities _____**a** Is the organization licensed to operate gaming activities in each of these states?☐ Yes ☐ No**b** If "No," explain _____**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?☐ Yes ☐ No**b** If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- ☐
- Yes
- ☐
- No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Name of the organization

PI KAPPA ALPHA FOUNDATION

Part I	General Information on Grants and Assistance
---------------	---

Employer identification number
62-6039877

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?

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
----------------	--

☐ **Part II** can be duplicated if additional space is needed
 recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash	(f) Method of valuation (book, FMV, etc.)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
--	---------	-------------------------------	--------------------------	------------------------	---	--	------------------------------------

[illegible]

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

3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

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.
Part III can be duplicated 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	14	5,906.	0.		

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

SCHEDULE I, PART I, LINE 2: EXTENSIVE APPLICATION PROCEDURES AND PERIODIC

'USES OF FUNDS' SUMMARIES ARE REQUESTED FROM GRANT RECIPIENTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number

62-6039877

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

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.

- | | |
|---|---|
| ☒ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

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 from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations 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?

b Any related organization?

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?

b Any related organization?

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

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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in
Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 PATRICK HAYNES	(i) 173,797.	0.	0.	0.	10,106.	183,903.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2	(i)						
	(ii)						
3	(i)						
	(ii)						
4	(i)						
	(ii)						
5	(i)						
	(ii)						
6	(i)						
	(ii)						
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

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.

PART I, LINE 5: BONUS COMPENSATION WAS BASED ON ACHIEVEMENT OF REVENUE

TARGETS.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number

62-6039877

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	60,468.	
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

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?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Yes No

30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) (2010)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number

62-6039877

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MAINTENANCE OF WAR MEMORIAL HEADQUARTERS AND PROMOTION OF EXCELLENCE IN
EDUCATION AND LEADERSHIP THROUGH APPROPRIATE
GRANTS/SCHOLARSHIPS/AWARDS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROVIDING GRANTS:

TO SUPPORT EDUCATIONAL AND LEADERSHIP PROGRAMMING DEVELOPED BY THE PI
KAPPA ALPHA FRATERNITY.

TO QUALIFIED UNDERGRADUATE SCHOLARS AND LEADERS TO ATTEND QUALIFIED
EDUCATIONAL AND LEADERSHIP DEVELOPMENT EVENTS.

MANAGING A LIMITED NUMBER OF PURELY ACADEMIC SCHOLARSHIPS.

COLLECTING CONTRIBUTIONS FROM PI KAPPA ALPHA ALUMNI, MEMBERS AND
FRIENDS AND MANAGING A PORTION OF THOSE CONTRIBUTIONS AS ENDOWMENTS TO
PROVIDE CONTINUOUS ANNUAL SUPPORT FOR LEADERSHIP PROGRAMS.

ASSISTING IN ESTABLISHING, EQUIPPING AND MAINTAINING LIBRARIES, STUDY
ROOMS OR OTHER EDUCATIONAL FACILITIES OWNED AND MAINTAINED BY
FRATERNITY CHAPTERS.

PRESERVING BOOKS, DOCUMENTS, ARCHIVES, WAR RECORDS AND WORKS OF ART FOR
THE ENCOURAGEMENT OF PATRIOTIC AND HISTORICAL RESEARCH, PARTICULARLY AS
TO THE HISTORY OF EDUCATION AND EDUCATIONAL INSTITUTIONS.

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number

62-6039877

MAINTAINING A PERMANENT MEMORIAL FOR MEMBERS OF THE PI KAPPA ALPHA
FRATERNITY WHO GAVE THEIR LIVES IN MILITARY SERVICE.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION CHANGED ITS DOING
BUSINESS AS NAME TO PI KAPPA ALPHA FOUNDATION.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS REVIEWED BY MANAGEMENT
AND MEMBERS OF THE AUDIT COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12: EMPLOYEES ARE REQUIRED UPON HIRING
TO DISCLOSE ANY CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A: THE CEO'S COMPENSATION IS REVIEWED
BY THE PERSONNEL COMMITTEE WHICH USES PEER ANALYSIS TO REVIEW AND COMPARE.
THE CHAIRMAN OF THE BOARD ALSO REVIEWS AND APPROVES THIS DECISION.

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND
CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE FINANCIAL
STATEMENTS ARE AVAILABLE UPON REQUEST, VIA THE COMPANY'S WEBSITE OR IN THE
ENTITY'S PUBLICATIONS.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:	216,852.
ROUNDING	1.
TOTAL TO FORM 990, PART XI, LINE 5	216,853.

THE OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

PI KAPPA ALPHA FOUNDATION

Employer identification number
62-6039877

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

[illegible]

Part II
Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
PPI KAPPA ALPHA CORPORATION - 62-0458346							
8347 WEST RANGE COVE							
MEMPHIS, TN 38125	FRATERNAL ORGANIZATION	TENNESSEE	501(C)(7)				X
WHITE HORSE HOLDING CORPORATION - 62-6050083							
8347 WEST RANGE COVE							
MEMPHIS, TN 38125	FRATERNAL ORGANIZATION	TENNESSEE	501(C)(7)				X
RAF, INC. - 20-3643982							
8347 WEST RANGE COVE							
MEMPHIS, TN 38125	FRATERNAL ORGANIZATION	TENNESSEE	501(C)(7)				X
PIKE UNIVERSITY, INC. - 20-3287316							
8347 WEST RANGE COVE							
MEMPHIS, TN 38125	EDUCATIONAL ORGANIZATION	TENNESSEE	501(C)(3)	509(A)(2)			X

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

Schedule R (Form 990) 2010

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

[illegible]

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

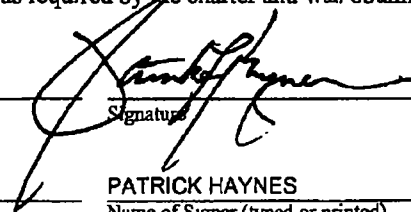
[illegible]

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**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 or (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)**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	(d) Method of determining amount involved
(1) PI KAPPA ALPHA CORPORATION	C	45,000.	
(2) PI KAPPA ALPHA CORPORATION	I	49,250.	
(3) PI KAPPA ALPHA CORPORATION	P	40,481.	
(4) RAF, INC.	E	402,652.	
(5) PI KAPPA ALPHA CORPORATION	O	59,343.	
(6)			

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

 State of Tennessee Department of State Corporate Filings 312 Rosa L. Parks Avenue 6th Floor, William R. Snodgrass Tower Nashville, TN 37243 ARTICLES OF AMENDMENT TO THE CHARTER (Nonprofit)	For Office Use Only RECEIVED STATE OF TENNESSEE 2010 AUG 27 PM 12: 01 TRE HARGETT SECRETARY OF STATE
Corporate Control Number (If Known) <u>81885</u> Pursuant to the provisions of section 48-60-105 of <i>The Tennessee Nonprofit Corporation Act</i>, the undersigned corporation adopts the following articles of amendment to its charter:	
1. Please insert the name of the corporation as it appears of record: <u>PI KAPPA ALPHA EDUCATIONAL FOUNDATION</u> If changing the name, insert the new name on the line below: <u>PI KAPPA ALPHA FOUNDATION</u>	
2. Please check the block that applies: ☒ Amendment is to be effective when filed by the secretary of state. ☐ Amendment is to be effective, _____ (month, day, year) (Not to be later than the 90th day after the date this document is filed.) If neither block is checked, the amendment will be effective at the time of filing.	
3. Please insert any changes that apply: a. Principal address: _____ (Street) _____ (City) _____ (State/County) _____ (Zip Code) b. Registered agent: _____ c. Registered address: _____ (Street) _____ (City) _____ (State/County) _____ (Zip Code) d. Other changes: _____	
4. The corporation is a nonprofit corporation.	
5. The manner (if not set forth in the amendment) for implementation of any exchange, reclassification, or cancellation of memberships is as follows:	
6. The amendment was duly adopted on <u>MARCH 1, 2010 AND JULY 29, 2010</u> (month, day, year) by (please check the block that applies): ☐ The incorporators without member approval, as such was not required. ☒ The board of directors without member approval, as such was not required. ☐ The members	
7. Indicate which of the following statements applies by checking the applicable block: ☐ Additional approval for the amendment (as permitted by §48-60-301 of the Tennessee nonprofit corporation act) was not required. ☐ Additional approval for the amendment was required by the charter and was obtained.	
CHIEF EXECUTIVE OFFICER Signer's Capacity <u>August 26, 2010</u> Date  _____ Signature <u>PATRICK HAYNES</u> Name of Signer (typed or printed)	
SS-4416 Filing Fee: \$20 RDA 1678	

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Business Entity Detail

Entity details cannot be edited. This detail reflects the current state of the filing in the system.
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000081885: Corporation Non-Profit - Domestic**Name:** PI KAPPA ALPHA FOUNDATION**Old Name:** PI KAPPA ALPHA EDUCATIONAL FOUNDATION**Business Type:****Status:** Active**Initial Filing:** 04/29/1948**Formed in:** Shelby County**Delayed Effective Date:****Fiscal Year Close:** December**AR Due Date:** 04/01/2012**Term of Duration:** Perpetual**Inactive Date:****Principal Office:** 8347 WEST RANGE COVE
MEMPHIS*, TN 381250000 USA**Annual Report** 8347 WEST RANGE COVE
Mailing Address: MEMPHIS, TN 381250000 USA**AR Exempt:** No**Mutual Benefit Corporation:** Yes[Assumed Names](#)[History](#)[Registered Agent](#)**Name****Status****Expires**

No Assumed Names Found...

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PI KAPPA ALPHA EDUCATIONAL FOUNDATION

Board of Trustees Meeting March 1 & 2, 2010

A meeting of the Pi Kappa Alpha Educational Foundation Board of Trustees was called to order on Monday, March 1, 2010, at 9:00 a.m. by Educational Foundation President Ronald E. Roark. The meeting was held at the University Club in Washington, DC with the following attendees:

President:	Ronald E. Roark
Secretary/Treasurer:	Bruce A. Wolfson
Trustees:	Jerry W. Askew
	Joseph Caruso
	Keith Ketchman
	John L. Lisher
	Edward A. Pease
	Thomas C. Tillar
	Joseph J. Turner, Jr.
Trustee Emeritus:	William N. LaForge
Finance Committee Member:	Phillip McLeod
Discovery Committee Member:	Dan Berger
Chief Executive Officer:	Patrick F. Haynes
Senior Development Officer:	George C. Miller, Jr.
Development Officer:	James A. Forristell
Executive Vice President Emeritus:	Raymond L. Orians
Fraternity Executive Vice President:	Justin A. Buck

At various times meeting attendees also included Investment Manager Robin Smithwick, Patton Boggs representative Kevin O'Neill and Innovasson principal Jason Zajac.

President Roark called the meeting to order at 9:00 am EST on Monday, March 1, 2010 and solicited commentary regarding the meeting agenda. None being heard, President Roark solicited approval of the Minutes from the previous meeting.

Minutes:

Having been moved by Trustee Lisher and seconded by Trustee Robertson, the motion to approve the Minutes from the meeting held January 27, 2010 was accepted.

Action Items

CEO Haynes provided an overview and summary of activity that has taken place on various fronts. President Roark commented that trustees and staff should both be commended for staying on task given the high volume of activity that has transpired of late.

Financial Report:

CEO Haynes directed the Board's attention to the Foundation's December 31, 2009 balance sheet and income statement and discussed highlights within both illustrations. Haynes noted that although budgeted, funds were not taken from the Endowment Fund to balance the 2009 budget. Trustee Askew suggested that the board review and consider making quarterly allocations of the Endowment Fund subsidy when these allocations have been budgeted and approved by the board.

Endowment Fund Report:

Investment Advisor Robin Smithwick joined the board via phone to present the Endowment Fund Report. Smithwick distributed an updated investment performance report and discussed various areas therein including 2009 year end performance and general economic activity. Various trustees commented that the Investment and Expenditure policies should be reviewed from time to time.

Having been moved by Trustee Tillar and seconded by Trustee Turner, a motion to approve the Financial and Endowment Fund Reports passed unanimously.

State of the Fraternity:

Fraternity EVP Justin Buck provided a general report on the State of the Fraternity. He noted that 2009-2010 has been a successful year for the Fraternity on numerous fronts.

Buck directed the Board's attention to the Fraternity's Strategic Plan and noted that technology, communications and marketing are areas on which he will be directing heightened focus.

President Roark complimented Fraternity EVP Buck on the excellent work of the Fraternity and thanked him for taking the time to attend this meeting.

IICA Strategic Marketing Plan:

CEO Haynes and Fraternity EVP Buck both shared an update of the Fraternity's strategic marketing efforts. Buck recognized the efforts of the Fraternity's Director of Marketing Kurt Schoeffler. Buck outlined the strategic priorities of the organization and the strategic principles that compliment those priorities.

Discussion followed regarding possible fundraising opportunities for the Foundation. President Roark commented that the Foundation would do whatever is necessary to help the Fraternity fulfill its strategic marketing objectives.

Corporate Name:

Executive Vice President Emeritus Ray Orians presented a proposal on behalf of the modernization committee suggesting that the corporate name of the Pi Kappa Alpha Educational Foundation be changed to the Pi Kappa Alpha Foundation. Discussion followed about the importance of this change and the need to expand the scope and reach of the Foundation.

Having been moved by Trustee Askew and seconded by Trustee Tillar, a motion to change the corporate name to the Pi Kappa Alpha Foundation was accepted.

Core Value Statement:

Executive Vice President Emeritus Orians outlined to the board the modernization committee's rationale for developing a core value statement for the Foundation.

**Trustee Askew made a motion, seconded Trustee Turner to accept the following Core Value Statement:
"The Pi Kappa Alpha Foundation will raise funds to endow programs of the Pi Kappa Alpha Fraternity"**

Trustee Caruso commented on the importance of having an elevator speech that quickly defines what our Foundation is in the business of doing. Other discussion ensued about the specific wording of the proposed Core Value Statement.

Having been moved by Trustee Lisher and seconded by Trustee Robertson, a motion to table the proposed core value statement carried unanimously.

Motion to Reconsider Corporate Name Change:

Trustee Turner made a motion, seconded by Trustee Caruso, to reconsider the board's decision to change the Corporate Name of the Foundation.

Discussion followed on the need for the Corporate Name and the Core Value Statement to complement each other. President Roark suggested that a small group of trustees tackle this important piece of business during the board's working lunch.

Trustee Tillar made a motion, seconded by Trustee Lisher, to table Trustee Turner's motion to reconsider. Motion Carried.

Foundation Modernization Proposal:

EVP Emeritus Orians introduced a proposal on behalf of the modernization committee. President Roark led discussion on this topic as the board reviewed each area of the proposal.

Trustee Tillar moved, seconded by Trustee Ketchman, to accept the modernization proposal. Motion Carried

The board recognized Trustee George Levert's efforts on this important project and commended him for a job well done.

Core Value Statement Revisited:

Trustee Robertson moved, seconded by Trustee Wolfson, to remove the Core Value Statement motion from the table. Motion to remove from the table carried unanimously.

Trustee Wolfson made a motion, seconded by Trustee Pease, to adopt the following Core Value Statement: "The Pi Kappa Alpha Foundation raises funds to educate and empower principled leaders." The motion carried.

Major Gifts Initiative:

Trustee Turner provided an update on the progress of the MGI. He began his remarks by recognizing Trustee Tillar for his kind generosity for the pace setting gift that he made over the weekend to Pi Kappa Alpha. The board responded with applause. The following items were then discussed:

- Case for Support was shared and reviewed by Trustee Turner
- Activity Report and 2010 Convention Plan was outlined by Jason Zajac
- Discovery Committee Update was provided by Trustee Wolfson
- Staffing Update was delivered by CEO Haynes

Trustee Turner closed the report by reiterating importance of the success of this effort – and of securing the support of each and every member of the Fraternity's and Foundation's leadership. He promised all present that they would personally hear from the MGI Launch Team sooner versus later. Significant discussion followed, and President Roark thanked Trustee Turner and his team for their hard work.

President's Council:

Senior Development Officer Miller described reviewed the President's Council's progress and year end results. Discussion followed about the need to secure renewals early in the year so that staff and volunteers can spend more time focusing on new memberships. President Roark recognized SDO Miller for his efforts with this program.

Pike Loyal Order:

CEO Haynes delivered a report regarding the Pike Loyal Order program. Haynes stated that staff is developing a plan to incorporate the Pike Loyal Order into its matrix of giving opportunities. A report will be shared with the board at its 2010 summer meeting.

Shield and Diamond Policy:

CEO Haynes and Fraternity EVP Buck provided an update of the Fraternity's new subscription policy. Discussion ensued about the new subscription policy and the need of the Foundation to maintain contact information for donors and potential donors.

Oak Trust:

Senior Development Officer Miller directed the Board's attention to the census of members constituting the Foundation's planned gifts recognition program, the Oak Trust. Discussion followed about the importance of continuing to market this program.

Trustee Askew motioned, seconded by Trustee Pease, to move into Executive Session. The motion passed.

After its Executive Session, President Roark reconvened the board and announced that during its executive session the board elected Bill LaForge to the position of trustee emeritus. The board recognized Trustee Emeritus LaForge for his years of service and loyalty to Pi Kappa Alpha.

The Board recessed for the day at 4:58 p.m. EST.

President Roark called the meeting back to order at 10:00 am EST on Tuesday, March 2, 2010.

Educational Forum- Collegiate Housing and Infrastructure Act Update:

Patton Boggs representative Kevin O'Neill joined the board to provide an update on the recent efforts by Greek organizations to secure sponsorships for the Collegiate Housing and Infrastructure Act. Discussion followed about ways that the board could have an impact on this legislation. President Roark thanked O'Neill for taking the time to visit with the board and pledged that the board would continue to work in support of this important legislation.

President Roark made closing remarks thanking the members of the board for their active participation in this meeting and for all of the good work that is being done on numerous fronts.

A motion to adjourn was made, seconded, and approved at 11:15 a.m. EST.

Respectfully submitted:

Bruce A. Wolfson, Secretary/Treasurer

Attest:

Ronald E. Roark, President