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Form **990**

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
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Department	of the	Treasur
Internal Day		N

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	or the	2010 calendar year, or tax year beginning 06-01, 2010, and e		05-31	20 11
			enaing		
·	heck if ap		- 		loyer identification no.
_=	ddress ch			64-0	0315255
ξ -	ame char		Room/suite		ohone number
in H	ntial return	PO Box 936	<u>/</u>	(662	2) 236-3676
Te	minated			1	668,482
<u> </u>	mended r			G Gros	s receipts \$
1 1	pplication	pending F Name and address of principal officer Tyler Ellis			
		Same as C above	H(a) is this a gi affiliates?	oup return for	Yes X No
°I∸ Ta	x-exemp	t status	H(b) Are all affi	liates included?	Yes No
N C	Aetosille:	N/A	H(b) Are all affi if "No," att H(c) Group exe	ach a list. (see i Imption number	nstructions)
K F	orm of org	ganization: X Corporation Trust Association Other L Year of formation		of legal domic	
		Summary			
Activern		Briefly describe the organization's mission or most significant activities. College Social	Fraternity '	with the	mission of
	1	Friendship, Justice, and Learning			
Å G	-	STATE I HAVE			
1 0	-	SET SOLVED			
V e	2	Check this box ▶ if the organization discontinued its operations or disposed of more than 25°	% of its net asset		
i r	1			1 1	
i n	1	Number of voting members of the governing body (Part VI, line 1a) · · · FFP · · · · › › › › › › › › › › › › › › ›			 -
e n		Number of independent voting members of the governing body (Part VI, line 1b)		4	
ъ с В		Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	
&	1	Total number of volunteers (estimate if necessary) ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・		6	;
	7a '	Total unrelated business revenue from Part VIII, column (C), line 12 · · · · · · · · · · · · · · ·		7a	
	Ь	Net unrelated business taxable income from Form 990-T, line 34 · · · · · · · · · · · · · · · · · ·	· · · · · · · · ·	7b	
	X		Prior Year		Current Year
R	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 314, and 7d)	674	,880	668,482
٧	2 9 ∣	Program service revenue (Part VIII, line 2g)			
ñ	≨ o	Investment income (Part VIII, column (A), lines 3 4, and 7d) · · · · · · · ·		912	
U e		Other revenue (Part VIII, column (A), lines 5, စြန္နာရီင, 9္ကေ႐ုံရင္ (ရှိရ) 🖟 · · ပုပ္တြဲ - · · · · · [
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 127	675	,792	668,482
		Grants and similar amounts paid (Part IX, column A) knes (3)			
_ :		Benefits paid to or for members (Part IX, column (A) line 4			
E		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	112	,202	119,500
P	12 '	Professional fundraising fees (Part IX, column (A), line 11e)			_
n		Total fundraising expenses (Part IX, column (D), line 25▶ 0			
8	_	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		,299	512,16
8	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		,501	631,66
				,291	36,82
	19	Revenue less expenses. Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · ·			
Net Assets		Zatal accests (Da A.V. Lac. 40)	Beginning of Current		End of Year
or	20	Total assets (Part X, line 16)	48.	3,725	520,54
Fund Bal-		Total liabilities (Part X, line 26)			
ances	22	Net assets or fund balances. Subtract line 21 from line 20 · · · · · · · · · · · · · · · · · ·	48.	3,725	520,54
<u> </u>		Signature Block			
Under	penalties	s of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of industrial correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any I	my knowledge knowledge		
-					
	- 1	Tyler Ellis Juliu (This			06-21/2
Sig	n	Signature of officer		Date	
Нег	e l	Tyler Ellis, President			
]	Type or print name and title			
		Print/Type preparer's name Pregarer's signature Date / /	Check	I PTIN	
Paid	d	Rhonda C Swider	2 self-emplo	ved Po	0535461
	u parer		Fum's EIN	·- <u>-</u> -	
	•	Tanto tanto		662-513-	5615
USE	Only	Firm's address Oxford MS 38655	CHOIRE ISO		
Mari	the IDS	S discuss this return with the preparer shown above? (see instructions)			X Yes No
		vork Reduction Act Notice, see the separate instructions.			Form 990 (2010
-OF		PORT REQUISION ACT NOTICE SEE THE SEARCH STRIPT OF THE SECOND OF THE SEC		FEA	-nm aan (2011)

Form	990 (2010) Sigma Chi Fraternity - E	ta Chapter	64-0315255 Page 2
22	Statement of Program Service	Accomplishments to any question in this Part III	
1	Bnefly describe the organization's mission:	to any question in this Part III	
•	•	e mission of Friendship, Justice, and	d Learning
	The state of the s	and a series of the series and series, and	1 Dearming
			
			
2	Did the organization undertake any significant production	gram services during the year which were not listed on	· · · · · · · · · · · · · · · · · · ·
	the prior Form 990 or 990-EZ? · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · Yes X No
	If "Yes," describe these new services on Schedule		□ ··· □···
3	Did the organization cease conducting, or make significant	gnificant changes in how it conducts, any program	
	services?		Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for ea	ch 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 amo	ount of grants and
	allocations to others, the total expenses, and rever		
4a			(Revenue \$)
	Successfully operated a college f	raternal organization	
	- <u></u>		
4b	(Code:) (Expenses \$	including grants of \$)	(Revenue \$)
			
			
			
			
			
4c	(Code) (Expenses \$	including grants of \$)	(Revenue \$)
40	(Code) (Expenses #		, (1.010.100)
			
		······································	
			
4d	Other program services. (Describe in Schedule O)	
	· ·	grants of \$) (Revenue \$)
4e	Total program service expenses ▶	631,661	
		EEA	Form 990 (2010)

نگون ا	Checklist of Required Schedules		<u> </u>	age 3
	Oncornor of Acquired Octreguies			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	ĺ	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		<u>X</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			<u>X</u>
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
-	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? If "Yes," complete Schedule C, Part II	4		
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? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have		- 1	
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"		- 1	
_	complete Schedule D, Part I · · · · · · · · · · · · · · · · · ·	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II · · · · · · · · · · · · · · · · · ·	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	l		
	complete Schedule D, Part III • • • • • • • • • • • • • • • • •	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			!
	complete Schedule D, Part IV · · · · · · · · · · · · · · · · · ·	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		_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.	2.		
а	and a design of the second sec	İ		
	Schedule D, Part VI · · · · · · · · · · · · · · · · · ·	11a		_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? If "Yes," complete Schedule D, Part VII	11b		_ 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? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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)? If "Yes," complete Schedule D, Part X	11f		X
12a				
	Schedule D, Parts XI, XII, and XIII · · · · · · · · · · · · · · · · ·	12a		_X_
b				<u> </u>
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b				<u> </u>
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		_x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			<u> </u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u>.</u> .	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? If "Yes," complete Schedule F, Parts III and IV · · · · · · · · · · · · · · · · · ·	16	<u></u>	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? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			T
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II · · · · · · · · · · · · · · · · · ·	18	İ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		T	†
- •	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19]	X
20a		20a	\vdash	X
b	tame with the same and the same	<u> </u>		 ^`
-	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b]	

	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 19 If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III · · · · · · · · · · · · · · · · ·	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? If "Yes," complete Schedule J · · · · · · · · · · · · · · · · · ·	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? If "Yes," answer lines		į	
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
Ь	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		
đ	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? If "Yes," complete Schedule L, Part I	25a		
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? If "Yes," complete Schedule L, Part I	25b		
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? If "Yes," complete Schedule L, Part II	26		<u>X</u>
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?			
	If "Yes," complete Schedule L, Part III • • • • • • • • • • • • • • • • •	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV • • • • • • • • • • • • • • • • • •	28a		<u> X</u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		<u>X</u>
С	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,)	'	
	Parti	31	-	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	 -	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١,,
••	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	-	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	24	ļ	v
25		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)? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·			
20	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	ļ	l	
36	organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	 	
37				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		v
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	31	├	X
38	19? Note. All Form 990 filers are required to complete Schedule O • • • • • • • • • • • • • • • • • •	38	x	
	19? Note. All Form 990 filers are required to complete Schedule O			(2010)
				· · -/

				للحكم
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •		Yes	No
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	. }		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	10	Х	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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, secunties account, or other financial	l	-	
	account)? • • • • • • • • • • • • • • • • • • •	4a		<u> X</u>
Ь	If "Yes," enter the name of the foreign country		,	
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		<u> X</u>
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? • • • • • • • • • • • • • • • • • • •	5b		<u>X</u>
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		<u> X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		ļ	
7		6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		37
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u>X</u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
•	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year • • • • • • • • • • • • 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
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		X
h	if the organization received a contribution of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		7.5	
	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		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities · · · · · · · 10b		ļ. !	
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders • • • • • • • • • • • • • • • • • • •		i	
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	i		
D	amounts due or received from them) • • • • • • • • • • • • • • • • • •			
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O			
ь	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		3	
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 /2	1045
		-000	GUIN 17	// 11/11/1V

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b

13 14

Sigma Chi Fraternity - Eta Chapter 64-0315255 Page 6 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 Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Does the organization have members, stockholders, or other persons who may elect one or more members 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? • • Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 86 X Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a 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 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 12a X b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 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 16a 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 List the states with which a copy of this Form 990 is required to be filed MS

Section C. Disclosure

- 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.

Another's website

X Upon request

- 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.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ➤ Josh Dehmer (662)236-3676

121 Poole Drive University, MS 38677

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Sigma Chi Fraternity - Eta Chapter

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Page 7

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

Check 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 organizations compensated any current officer, director, or trustee. (F) Position (check all that apply) Name and Title Average Reportable Reportable Estimated H c m g mp e e y e s n e compensation compensation hours per l t n r amount of from from related other (describe organizations compensation e E p - o organization (W-2/1099-MISC) from the nours for (W-2/1099-MISC) organization related and related organizations a o organizations in Schedule O) (1) Chris Brantley 0 Treasurer 5.00 ٥ (2) Michael Allred 5.00 0 ٥ Pro-Consul (Vice President) (3) Patrick Steelman Secretary (4) Tyler Ellis 0 5.00 ٥ Consul (President) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15)(16)

	Section A. Officers, Directors, Trustees		yees,	, and		_	st Con	npen	sated Employee:	s (continued)							
	(A)	(B)					1 ''										(F)
	Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	lt d nrı dur se vt c ı et	I I t	Office	All the yemployee	at apply H c e g mp h p o s n y t s e t e d	For	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	com (com (com (com (com (com (com (com (stimated nount of other pensation the anization of related anizations					
(17)				-			-				-						
(18)						-	-										
(19)					\vdash	_											
(20)			-		 	-											
(21)					-	-			<u></u>	<u> </u>	_						
(22)			 	+			-										
(23)					-	\vdash	-										
(24)			-		 _	-											
(25)							-										
(26)																	
(27)			1														
(28)					†					-							
1b	Sub-total · · · · · · · · · · · · · · · · · · ·	•••••	• • •	• •	• •	• •	• • •	▶									
С	Total from continuation sheets to Part VII, Section	1A · ·		• •		• •	• • •		_		_						
<u>d</u>	Total (add lines 1b and 1c) · · · · · · · · · · · · · · · · · · ·			• •	• •	•••	• • •	<u> </u>	45 6400 000	<u></u>	0	0					
2 —	Total number of individuals (including but not limited reportable compensation from the organization	to those liste		······	wno	rece	eivea r	nore	tnan \$100,000 in		0	Yes Ne					
3	Did the organization list any former officer, director of			-		_					3						
4	employee on line 1a? If "Yes," complete Schedule J if For any individual listed on line 1a, is the sum of repo											X					
-	the organization and related organizations greater that																
	individual									• • • • • •	. 4	X					
5	Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If "Yes," co							nızatı •	on or individual		. 5	X					
Se	ction B. Independent Contractors	Jp.oto Co		0 .0.		<u>, , , , , , , , , , , , , , , , , , , </u>	3.00			**		1 22					
1	Complete this table for your five highest compensate compensation from the organization.	d independe	nt cor	ntrac	tors	that	recei	ed n	nore than \$100,00	0 of							
	(A) Name and business address	<u> </u>							(B) Description of	services		(C) ensation					
_																	
									 								
		 _							1								
2	Total number of independent contractors (including b		d to th	nose	liste	ed al	oove) v	who i	received								
	more than \$100,000 in compensation from the organ	ization >			_												

Form 99			- Eta Chapte	er		64-03152	255 Page 9
Part 1		Statement of Revenue		(A)	(B)	(C)	(D)
· 	,	The same of the sa		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns · · · · · · 1a					
Contri-	b	Membership dues · · · · · · 1b	668,482			ł	
pulions,	C	Fundraising events • • • • • • 1c		1			
pilis, grants	d	Related organizations • • • • • 1d		1			
and	е	Government grants (contributions) • • 1e		j	3		-
other similar amounts	f	All other contributions, gifts, grants, and similar amounts not included above					
	g	Noncash contributions included in lines 1a-1f \$				ĺ	
	<u>h</u>	Total. Add lines 1a-1f · · · · · · · · · · · · · · · · · · ·	• • • • • • •	668,482		· · · · · · · · · · · · · · · · · · ·	·
			Business Code			<u> </u>	
	2a						ļ
Program	b						
Service	C						
Revenue	d					 	
i	e	All other program service revenue · · · · ·					
		Total. Add lines 2a-2f · · · · · · · · · · · · · · · · · · ·	<u> </u>				
							
		Investment income (including dividends, interest other similar amounts)		Į.			
		Income from investment of tax-exempt bond pro	·				
	5	Royalties · · · · · · · · · · · · · · · · · · ·	}-	 -			
		(i) Real	(II) Personal			, ,	<u> </u>
	6a	Gross Rents · · · · · · ·	(ii) Personal	ŀ			u.
		Less: rental expenses · · ·		~	-	,	-,
		Rental income or (loss) · · ·		, {			
	,	Net rental income or (loss)	<u></u>			 	
	l l	` ` 	,				
	/a	Gross amount from sales of (i) Securities assets other than inventory	(ii) Other		0		•
	_	Less: cost or other basis		1	-	- '	
	"	and sales expenses • • • •		,		-	,
•	c	Gain or (loss)					
h	l	Net gain or (loss) · · · · · · · · · · · · · · · · · ·	• • • • • •				
0		Gross income from fundraising					
		events (not including \$					•
R		of contributions reported on line 1c).]	`		,	
e V	ļ	See Part IV, line 18 · · · · · · · a		h- -			•
e	b	Less: direct expenses · · · · · · b				-	
n u	C	Net income or (loss) from fundraising events •	• • • • • • •				
ē	9a	Gross income from gaming activities			,		
		See Part IV, line 19 · · · · · · · · a]
	ь	Less: direct expenses · · · · · · · b					
	C	Net income or (loss) from gaming activities • •	• • • • • • •				
	10a	Gross sales of inventory, less returns and allowances · · · · · · · · a		•			
	ь	Less. cost of goods sold ••••• b					
		Net income or (loss) from sales of inventory • •					
		Miscellaneous Revenue	Business Code		,		
	11a						
	ь						
	C						
		All other revenue • • • • • • • • • • • • • • • • • • •					
	1	Total. Add lines 11a-11d					<u> </u>
	12	Total revenue. See instructions · · · · · ·	<u> </u>	668,482		9	<u> </u>
			EEA				Form 990 (2010

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

	All other organizations must complete column				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22 · · · · · · · · · · · · · · · · · ·	 			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16 · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
4	Benefits paid to or for members • • • • • • • • • • • • • • • • • • •				
5	Compensation of current officers, directors,				
_	trustees, and key employees · · · · · · · · · · · · · · · · · ·				
6	Compensation not included above, to disqualified				u.
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B) · · · · ·				
7	Other salaries and wages	108,000	108,000		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions) · · · · ·				
9	Other employee benefits				
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·	11,500	11,500		
11	Fees for services (non-employees):				
а	Management · · · · · · · · · · · · · · · · · · ·				
b	Legal · · · · · · · · · · · · · · · · · · ·				
C	Accounting				
d	Lobbying · · · · · · · · · · · · · · · · · · ·				·
e	Professional fundraising services. See Part IV, line 17 •				
f	Investment management fees · · · · · · · · · · · · · · · · · ·				
g	Other • • • • • • • • • • • • • • • • • • •				
12	Advertising and promotion · · · · · · · · · · · · · · · · · · ·				<u> </u>
13	Office expenses · · · · · · · · · · · · · · · · · ·	3,145	3,145	· · · · · · · · · · · · · · · · · · ·	
14	Information technology • • • • • • • • • • • • • • • • • • •				
15	Royalties				L
16	Occupancy · · · · · · · · · · · · · · · · · · ·	119,093	119,093		
17	Travel · · · · · · · · · · · · · · · · · · ·				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				ļ. <u></u>
20	Interest · · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •				
22	Depreciation, depletion, and amortization · · · · · ·				ļ
23	Insurance · · · · · · · · · · · · · · · · · · ·	51,230	51,230		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If				i e
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а	Food and Kitchen Expenses	142,184	142,184		 _
þ	Dues and Fees	21,983	21,983		
c	Chapter Functions	174,526	174,526		ļ
d				<u> </u>	
e			<u> </u>		
f	All other expenses · · · · · · · · · · · · · · · · · ·		 		<u> </u>
25	Total functional expenses. Add lines 1 through 24f · ·	631,661	631,661		0
26	Joint Costs. Check here ☐ if following SOR 98 3 (ASC 958 730) Complete this line				
	SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column)		1	
	(B) joint costs from a combined educational				
	campaign and fundraising solicitation	1	}	1	

a#0.7%	Balance Sheet			
		(A)		(B)
<u> </u>		Beginning of year		End of year
1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	342,925	1	206,146
1,2	Savings and temporary cash investments	-	2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
6	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L · · · · · · · · · · · · · · · · · ·		5	
1 6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
١	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)	·	6	<u></u>
' 7	Notes and loans receivable, net		7	
. 8	Inventones for sale or use		8	
	Prepaid expenses and deferred charges		9	
	a Land, buildings, and equipment: cost or			
"	other basis. Complete Part VI of Schedule D · · · · 10a			
	b Less: accumulated depreciation · · · · · · · · · · 10b		10c	
1:	<u> </u>		11	· · · · · · · · · · · · · · · · · · ·
1:	·		12	
1:			13	· · · · · · · · · · · · · · · · · · ·
1			14	
_ I -	-	140,800	15	314,40
1		483,725	16	520,54
10		403,723	17	320,34
1			18	
1			19	
. 1			20	
2	·		21	
2	•		21	
2			i i	***
	employees, highest compensated employees, and disqualified		22	
_	persons. Complete Part II of Schedule L		22	
, 2			23	
2	· ·		24	
2	•	<u> </u>	25	
2		0	26	
_	Organizations that follow SFAS 117, check here▶ ☐ and			
F	complete lines 27 through 29, and lines 33 and 34.		07	
n 2			27	
d 2		<u> </u>	28	
в 2			29	
a	Organizations that do not follow SFAS 117, check here ► 🔀			
a	and complete lines 30 through 34.		20	
n 3	·	<u> </u>	30	
C 3		400 705	31	F00 54
s 3		483,725	32	520,54
3		483,725	33	520,54
1 3	Total liabilities and net assets/fund balances	483,725	34	520,54

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Sigma Chi Fraternity - Eta Chapter

64-0315255

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	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)	668,482
2	Total expenses (must equal Part IX, column (A), line 25)	631,661
3	Revenue less expenses. Subtract line 2 from line 1	36,821
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	483,725
5	Other changes in net assets or fund balances (explain in Schedule O)	0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	
	column (B))	520,546
0	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	,
•		Yes No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	
	Schedule O	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	··· 2a X
b	Were the organization's financial statements audited by an independent accountant?	· · · 2b X
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?	· · · 2c X
	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	344 554 25
	issued on a separate basis, consolidated basis, or both	
	X 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?	· · · 3a X
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	· · · 3b
	EEA	Form 990 (2010)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990. ▶ See separate instructions.

Open to Prefic

Sid	ma Chi Fraternity - Eta Chapter	64-0315255
ے۔ -	Organizations Maintaining Donor Advised Funds or Other Similar Funds or	
	the organization answered "Yes" to Form 990, Part IV, line 6	Accounts.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year · · · · · · · · · · · ·	(b) I tilles and outer accounts
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
		
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 historica	lly important land area
	Protection of natural habitat	-
	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
а	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 org	anization 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?	· · · · · · · · · · · · · · · · · · ·
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)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense sta	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements	that describes
w	the organization's accounting for conservation easements.	
- F		ner Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	A and belong about waring of
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statemen	
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furthera	ince of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	d halance sheet works of art
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement an	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	or 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 XIII, line 1 · · · · · · · · · · · · · · · · · ·	
_	(ii) Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	en provide the
2	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.	ini provide tilo
_	Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	
a	Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	
	Assets included in Form 330, Fait A	

Sched	ule D (Form 990) 2010 Sigma Chi Frate				64-031		F	Page 2
ಿಕ	Organizations Maintaining	Collections of	Art, Historical	reasures, o	r Other Similar As	sets (ontinu	
3	Using the organization's acquisition, accession,	and other records	, check any of the fo	lowing that are a	significant use of its			
	`collection items (check all that apply)							
а	Public exhibition		an or exchange prog	ams				
Ь	Scholarly research	e 🗌 Oti	ner	. <u> </u>				
C	Preservation for future generations							
4	Provide a description of the organization's colle-	ctions and explain	how they further the	organization's e	xempt purpose in			
	Part XIV.							
5	During the year, did the organization solicit or re							
-	assets to be sold to raise funds rather than to b					· · 📋	Yes	No
	Escrow and Custodial Arrai			n answered "Yes	s" to Form 990,			
	Part IV, line 9, or reported an amoun							
1a	Is the organization an agent, trustee, custodian							_
	included on Form 990, Part X?			• • • • • • •	• • • • • • • • • •	•• [_]	Yes	No
þ	If "Yes," explain the arrangement in Part XIV an	id complete the fol	lowing table					
	5					ount		
c	Beginning balance						_	
d	Additions during the year • • • • • • • • • • • • • • • • • • •							
6	Distributions during the year • • • • • • • • • • • • • • • • • • •							
f	Ending balance							
2a	Did the organization include an amount on Form	n 990, Part X, line	21/			[_]	Yes	No
b	If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete	if the ergonization	anawarad "Vas" ta E	om 000 Bort IV	/ line 10			
	Endowment Funds. Complete	(a) Current year				165		
						l let ro	ur years l	Dack
12	Regioning of year halance	(a) Cancal year	(b) Pnor year	(c) Two years ba			400	1
1a h	Beginning of year balance	(a) Garan year	(b) Pilot year	(e) (wo years ba				
b	Contributions · · · · · · · · · · · · · · · · · ·	(a) Current year	(b) Fibi year	(c) two years ba				
b	Contributions · · · · · · · · · · · · · · · · · · ·	(a) Current year	(b) Fini year	(c) two years ba				
b c d	Contributions · · · · · · · · · · · · · · · · · · ·	tay our entry you	(b) Fini year	(c) Iwo years ba				
b	Contributions · · · · · · · · · · · · · · · · · · ·	tay our entry you	(b) Fini year	(c) two years da				
b c d	Contributions · · · · · · · · · · · · · · · · · · ·	tay our enjoyed	(b) Fini year	(c) two years ba				
b c d e	Contributions · · · · · · · · · · · · · · · · · · ·	tay our en you	(b) Fini year	(c) two years ba				
b c d	Contributions · · · · · · · · · · · · · · · · · · ·			(c) two years ba				
b c d e	Contributions			(c) two years da				
b c d e	Contributions	nd balance held as		(c) two years ba				
b c d e	Contributions	nd balance held as		(c) two years ba				
b c d e	Contributions	nd balance held as	j.					
b c d e f g 2 a b c	Contributions	nd balance held as	j.				Yes	No
b c d e f g 2 a b c	Contributions	nd balance held as	j.				Yes	No
b c d e f g 2 a b c	Contributions	nd balance held as	j.				Yes	No
b c d e f g 2 a b c	Contributions	nd balance held as % son of the organiza	tion that are held and	I administered fo		· 3a(i	Yes)	No
b c d e f g 2 a b c 3a	Contributions	nd balance held as % ion of the organiza	tion that are held and	I administered fo		· 3a(i	Yes)	No
b c d e f g 2 a b c 3a	Contributions	nd balance held as % ion of the organiza	tion that are held and	l administered fo		· 3a(i	Yes)	No
b c d e f g 2 a b c 3a	Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year e Board designated or quasi-endowment Permanent endowment Mare there endowment funds not in the possess organization by. (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations in Describe in Part XIV the intended uses of the other and the possession of the othe	nd balance held as % son of the organization of the organization of the organization. See Forment. See Forment.	n Schedule R? wment funds.	administered for		· 3a(i · 3a(ii · 3b	Yes)	
b c d e f g 2 a b c 3a	Contributions	nd balance held as % ion of the organiza	n Schedule R? wment funds. n 990, Part X, line 10	administered for	or the (c) Accumulated depreciation	· 3a(i · 3a(ii · 3b	Yes)	
b c d e f g 2 a b c 3a	Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year e Board designated or quasi-endowment Permanent endowment Mare there endowment funds not in the possess organization by. (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations in Describe in Part XIV the intended uses of the other and the possession of the othe	nd balance held as % son of the organization	n Schedule R? wment funds. n 990, Part X, line 10	administered for	or the (c) Accumulated	· 3a(i · 3a(ii · 3b	Yes)	
b c d e f g 2 a b c 3a b 4	Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year e Board designated or quasi-endowment Permanent endowment M Term endowment W Are there endowment funds not in the possess organization by. (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations is Describe in Part XIV the intended uses of the organization of investment	nd balance held as % son of the organization	n Schedule R? wment funds. n 990, Part X, line 10	administered for	or the (c) Accumulated depreciation	· 3a(i · 3a(ii · 3b	Yes)	

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

	Investments - Other Securities. S	ee 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	
	derivatives · · · · · · · · · · · · · · · · · · ·			
	eld equity interests			
(3) Other				
(A)				
(B)				-
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(l)				
	b) must equal Form 990, Part X, col (B) line 12)			
		ee Form 990, Part X, line 13.		
tin page and the distribution of the l	(a) Description of investment type	(b) Book value	(c) Method of valuatio Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)			Ţ	
(6)				
(7)				
(8)			<u> </u>	
(9)		 		
(10)				
Total. (Column)	(b) must equal Form 990, Part X, col (B) line 13) Other Assets. See Form 990, Part X, line	<u> </u> 15		
		Description		(b) Book value
	hold Improvements			140,800
	hold Improvements			173,600
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)		 		
	nn (b) must equal Form 990, Part X, col. (B) line	(5.)		314,400
100	Other Liabilities. See Form 990, Part X,			
1.	(a) Description of liability	(b) Amount	The Species of the Contraction	
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)	· · · · · · · · · · · · · · · · · · ·			
(7)		 		
(8)		 		
(9)		 		
(10)				
(11)		 		
Total (Caluma	(b) must equal Form 990, Part X, col (B) line 25)	1		

	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stat	ements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2 `	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments · · · · · · · · · · · · · · · · · · ·	4
5	Donated services and use of facilities • • • • • • • • • • • • • • • • • • •	5
6	Investment expenses · · · · · · · · · · · · · · · · · ·	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV.)	8
9	Total adjustments (net) Add lines 4 through 8 · · · · · · · · · · · · · · · · · ·	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 · · · · · · · · · ·	10
	Reconciliation of Revenue per Audited Financial Statements With Revenue per	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	
а	Net unrealized gains on investments · · · · · · · · · · · · · · · · · · ·	_
b	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	-
C	Recovenes of pnor year grants · · · · · · · · · · · · · · · · · · ·	- 33
d	Other (Describe in Part XIV.) • • • • • • • • • • • • • • • • • • •	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · · ·	
b	Other (Describe in Part XIV)	4c
С 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
_	Reconciliation of Expenses per Audited Financial Statements With Expenses	
1	Total expenses and losses per audited financial statements • • • • • • • • • • • • • • • • • • •	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	
b	Prior year adjustments · · · · · · · · · · · · · · · · · · ·	
c	Other losses · · · · · · · · · · · · · · · · · ·	
d	Other (Describe in Part XIV.)	
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a	
b	Other (Describe in Part XIV.)	
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
रेश	Supplemental Information	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1	 b
and :	2b, Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete	
this p	part to provide any additional information.	
		·····

Sigma Chi Fraternity - Eta Chapter

Schedule D (Form 990) 2010

64-0315255

Page 4

SCHEDULE O (Form 990 or 990-EZ)

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.

Department of the Treasury internal Revenue Service Name of the programmation 2010

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Increasion

OMB No 1545-0047

Name of the organization Employer identification number Sigma Chi Fraternity - Eta Chapter 64-0315255 01. Members or stockholder classes and rights (Part VI, line 6) Sigma Chi is a Fraternal Organization self-supporting with members who pay dues 02. Mamber election for additional members (Part VI, line 7a) Members elect Officers 03. Governing body decisions (Part VI, line 7b) Decisions made by Governing Body are subject to approval of members 04. Form 990 governing body review (Part VI, line 11) The Chapter's 990 is delivered to the Consul for review with the Governing Body 05. Governing documents, etc, available to public (Part VI, line 19) Documents are available upon request