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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

OMB No. 1545-0047 2010

Open to Public Inspection

Department of the Treasury

lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. . 2010, and ending JUNE 30 For the 2010 calendar year, or tax year beginning JULY 01 2011 Check if applicable C Name of organization Epsilon Nu House Corporation D Employer Identification number 06-1696568 Doing Business As Address change E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/Suite Name change (405)359-6214 03 S Main Street Initial return City or town, state or country, and ZIP + 4 Terminated G Gross tillwater OK 74074 378,290 receipts \$ Amended return Name and address of principal officer. Yes X No Application pending H(a) Is this a group return for affiliates? H(b) Are all affiliates included? Yes 501(c)(3) X 501(c)(7 4947(a)(1) or 527 Tax-exempt status:) (insert no.) If "No," attach a list. (see instructions) J Website: ▶ N/A H(c) Group exemption number ▶ K Form of organization X Corporation L Year of formation 1979 M State of legal domicile Trust Other > Association Part I Briefly describe the organization's mission or most significant activities: Providing housing and related activities for sorority members 3 2012 SELLICATION they obtain higher education. GOVERNANCE Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets. 6 4 Number of independent voting members of the governing body (Part VI, line 1b)...... 5 4 6 25 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12..... **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** WHWZHUX#CAINNED FEB 7,000 5,600 contributions and grants (Part VIII, line 1h) 372,532 Programservice revenue (Part VIII, line 2g) 339,126 dayestment income (part vitt, column (A), lines 3, 4, and 7d). 141 158 total revenue 4adarines 8 the gh 11 (must equal Part VIII, column (A), line 12) . 346,267 378,290 Grants and similar amounts paid (Part IX, column (A), lines 1-3).

Ranella paid to or for members (Part IX, column (A), line 4). compensation, employee benefits (Part IX, column (A), lines 5-10) . . . 28,401 30,489 Total fundraising expenses (Part IX, column (D), line 25) 246,937 251,953 17 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 275,338 282,442 19 Revenue less expenses. Subtract line 18 from line 12 70,929 95,848 **End of Year** Beginning of Current Year O R 20 Total assets (Part X, line 16) 534,926 567,971 F 21 Total liabilities (Part X, line 26) 270,405 207,605 ND 22 Net assets or fund balances Subtract line 21 from line 20 . 264,521 360,366 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. Sian Signature of officer REASURER, Epsilar Nu House CORP Date Here Type or print name and title Print/Type preparer's name Check If 1-11-12 Paid self-employed Mark E Gunkel CPA Preparer Firm's name ► MARK Ε GUNKEL Firm's EIN ▶ 73-1379 Use Only Firm's address ▶ 903 S MAIN Phone no. STILLWATER OK (405)624-9999 74074

X Yes

No

May the IRS discuss this return with the preparer shown above? (see instructions)

Forn	1990 (2010) Epsilon Nu House Corporati 06-1696568		Page 2
Pa	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		.]
1	Briefly describe the organization's mission		
	Providing housing and related activities for sorority mem	oers whil	.e
	they obtain higher education.		· · · -
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	X 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	X 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 expense Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gran		
	and allocations to others, the total expenses, and revenue, if any, for each program service reported.	เธ	
42		272 690	· \
44	(Code) (Expenses \$ $282,442$ including grants of \$) (Revenue \$ See attachment \$ \$ \$ 1 \$ }	372,630	,
	bee accacimient #1		
			
		 	
		 	
	<u> </u>		
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
		· · · · · · · · · · · · · · · · · · ·	
			-
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Other program services. (Describe in Schedule O.)		_
_	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶\$ 282,442		
IVA	10 99012 TWF 41339 Copyright Forms (Software Only) - 2010 TW	Form 990	(2010)

Pa	rt IV Checklist of Required Schedules			3-
<u> </u>	A 19 Showing of Hedgined Solledgines		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			1112
•	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-	 	 ^
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501 (h)	<u>-</u> -	├──	_^
~	77/7	4	i	
_		 "		
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	_ ا		
	or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III N/A	_5_		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the		[[
	right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	_		٦,
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		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? 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, VIII, IX,			
	or X as applicable.)		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 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		Х
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	ŀ	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		$\overline{}$	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		Х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120		
	the experimentary engineered (Mar) to live 400 others completing Calendride D. Dorto VI. VII. and VIII. is obtained	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	\dashv	$\frac{\Lambda}{X}$
	Did the organization maintain an office, employees, or agents outside of the United States?			X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	14a		
D	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV.	14b		Х
45		145		Δ_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4.5		v
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		- 1	37
. -	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,			
	lines 1c and 8a? If "Yes," complete Schedule G, Part II	_18		<u>X</u> _
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		<u>X</u> _
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers	ĺ	- 1	
	that operate one or more hospitals must attach audited financial statements (see instructions) N/A	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 1? 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,"	ĺ		ĺ
	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 24b through 24d and complete]
	Schedule K If "No," go to line 25	24a	ļ	X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . N/A	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? N/A	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A	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		Х
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		Х
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		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? 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)	1		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>X</u>
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	i i	Ï	
	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	34		<u>X</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity		1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		1	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		_X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
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	Χl	

Man				П
_ `	Check if Schedule O contains a response to any question in this Part V			Щ
		<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	4		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	٠.		v
_	gaming (gambling) winnings to prize winners?	1c		X
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 4	- ah	Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_^	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	3a		Х
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990–T for this year? If "No," provide an explanation in Schedule O N/A	3b		
b	If "Yes," has it filed a Form 990–T for this year? If "No," provide an explanation in Schedule O N/A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	130	_	
4a	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country	72		*********
b	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	1	Х
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		<u></u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	1		
va	solicit any contributions that were not tax deductible?	6a	- 1	Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b	j	
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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b		
С	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			
е	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		X
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		<u>X</u>
9	Sponsoring organizations maintaining donor advised funds.			37
а	Did the organization make any taxable distributions under section 4966?	9a		<u>X</u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12		1	
a		-		
. b	all oscillosipis, moladed on terminosi, tar. vinj. into	1 1		
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders		1	
a	Gross income from other sources (Do not net amounts due or paid to other sources		1	
b	against 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	1	Х
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.		1	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		X
	Note. See the instructions for additional information the organization must report on Schedule O			
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		- 1	
С	Enter the amount of reserves on hand			
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	\Box	X

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "	No" re	sponse	e 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			_X				
Sect	ion A. Governing Body and Management							
		r	Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6	_						
b	Enter the number of voting members included in line 1a, above, who are independent 1b	4						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2	ļi	X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision]						
	of officers, directors or trustees, or key employees to a management company or other person?	3		_X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?							
6								
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the							
	governing body?	7a		X				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
	by the following							
а	The governing body?	8a	x					
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		X				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)							
			Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		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? N/A	10b						
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х					
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	12a		X				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give							
	rise to conflicts?	12b						
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"							
	describe in Schedule O how this is done	12c	1					
13	Does the organization have a written whistleblower policy?	13		X				
14	Does the organization have a written document retention and destruction policy?	14		X				
15	Did the process for determining compensation of the following persons include a review and approval by							
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	1	Х				
b	Other officers or key employees of the organization	15b		_ 				
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)							
16a	But the second of the second o							
, 00	with a taxable entity during the year?	16a	1	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? N/A	16b	1					
Section	on C. Disclosure	100						
	List the states with which a copy of this Form 990 is required to be filed OK							
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)							
18								
	available for public inspection. Indicate how you make these available. Check all that apply							
	Own website Another's website W 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 ▶ See attachment #2							

Part VII 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

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

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

(A)	(B)	(C)			(D)	(E)	(F)			
Name and Title	Average hours per week (describe hours for related organiza- tions in Schedule O)		INSTITEE ONAL	OFFICER	K all th	At apply HOMPLOYEE SNSATED	FORMER	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Sherry Ashbaugh President Terry Ann Johnston	10.00	х		Х				0	0	o
	10.00	X		X				0	o	0
Allison Nicole Miles	10.00	X		X		ı		0	0	О
Madison Taylor	10.00	X		X				0	0	0
Michal Starr	10.00	X X		X X				0	0	0

Part	VII Section A. Officers	s, Director	s, Trust	ees, F	ey Er	nploye	es, and	High	est Compensated E	mployees (continue	<u>a) </u>		
	(A)	(B)			•	C)			(D)	(E)		(F)	
	Name and title	Average hours per week (describe hours for related organiza- tions in Schedule O)	TRIRECTOR NDUSTEE OR VIDUAL	I T R S U T S T E U T I O N A L	O F F I C E R	K All th	at apply) HOMPLOYEEST ATED	F OR MER	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fro org.	itimate nount of other ipensa om the anization d relate anization	of ition e ion ed
	- <u></u>								0				
	Sub-total Total from continuation sh		 ⊶ VIII €	cotlor			•	•	0	0	0		
	Total (add lines 1b and 1c)		iit vii, 3	ecuoi	١٨		• •	•	0	0	0		
	Total number of individuals		but not i	ımıted	to the	se liste	ed above		received more than	\$100,000 in reporta	able con	npensa	ation
	from the organization ▶	`											
		-										Yes	No
	Did the organization list any						y employ	yee, o	r highest compensat	ed employee			7,
	on line 1a? If "Yes," complet For any individual listed on i							and	other compensation	from the	3	┼─	X
	organization and related org										4	1	x
	Did any person listed on line		•										1
	services rendered to the org									•_	5		X
	B. Independent Contracto												
1	Complete this table for your	five highes	st compe	ensate	d inde	epende	ent contr	actors	that received more	than \$100,000 of			
	compensation from the orga								(5)				
	Managana	(A)							(B)	nn#000		C)	
	Name and	business	address						Description of se	VICES	Compe	iiisauo	
 .									· · · · · · · · · · · · · · · · · · ·				
	Total number of independer				out no	t limite	d to thos	se liste	ed above) who received	ved more than			
	\$100,000 in compensation fr				0 :		T\4/					990	/2011
JVA	10 99078 TWF 41345	Copyrigh	nt Forms (oortwa	re Only	7-2010	ı VV				LOHI	330	(201

Part VIII Statement of Revenue (C) (D) (B) Related or Unrelated Revenue excluded from tax Total revenue exempt function revenue business under sections 512, 513, or 514 revenue GO CIT OFH NTE TSR 1a Federated campaigns 1b 5,600 **b** Membership dues 1c c Fundraising events GRANTS BUT! 1d d Related organizations . 1e e Government grants (contributions), f All other contributions, gifts, grants, & similar amounts not included above. 1f OAMS Noncash contributions included in lines 1a-1f 5,600 Total. Add lines 1a-1f **Business Code** P PROGRAM SERVIC SERVIC 372,532 372,532 531110 2a Rental Income E N All other program service revenue g Total. Add lines 2a-2f 372,532 investment income (including dividends, interest, and 158 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory . b Less' cost or other basis and sales expenses 0 c Gain or (loss) Т d Net gain or (loss) , Н 8a Gross income from fundraising E R events (not including \$ of contributions reported on line 1c). R See Part IV, line 18 E **b** Less: direct expenses ... , . . . ٧ c Net income or (loss) from fundraising events Ε N 9a Gross income from gaming activities See υ Part IV, line 19 Ε **b** Less: direct expenses , , b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold, c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11a d All other revenue e Total. Add lines 11a-11d 378,290 372,690 Total revenue. See instructions

Part IX Statement of Functional Expenses

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

	t Include amounts reported on lines 6b, , 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		Охронось	gerroral expenses	охропосо
•	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,		 		······
Ū	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,		 		
3	•				
c	trustees, and key employees	· · · · · · · · · · · · · · · · · · ·			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				·
7	Other salaries and wages	28,154	28,154		
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,335	2,335		
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	3,554	3,554		
ď	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	26	26		
13	Office expenses	26	26		
14	Information technology				
15	Royalties ,				
16	Occupancy				
17	Travel	170	170		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	13,086	13,086		
	Payments to affiliates			····	
	Depreciation, depletion, and amortization	27,011	27,011		
23	Insurance	5,314	5,314		
	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.)				
	Food Service Expenses	112,214	112,214		***************************************
	Utilities	23,469	23,469		
	Repairs & Maintenance	11,838	11,838		
	Landscape Services	11,636	11,636		
	Supplies	11,425	11,425		·
	All other expenses #3	32,184	32,184		
	Total functional expenses. Add lines 1 through 24f	282,442	282,442		
	Joint costs. Check here ▶ ☐ If following SOP 98-2				
	(ASC 958-720) Complete this line only if the organization				
1	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation			l.	

Part X **Balance Sheet** (B) (A) End of year Beginning of year 105,005 1 138,489 Cash -- non-interest bearing . . . 2 2 Savings and temporary cash investments . . . 3 3 Pledges and grants receivable, net ... 4 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L, ., ., ., ., 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 ASSETS 6 of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions), , 7 Notes and loans receivable, net 8 Inventories for sale or use . q 9 Prepaid expenses and deferred charges10 a Land, buildings, and equipment cost or other 10a 589,110 basis. Complete Part VI of Schedule D ... 10b 429,921 10c 429,482 159,628 b Less accumulated depreciation 11 11 Investments -- publicly traded securities . 12 12 Investments -- other securities See Part IV, line 11 13 13 Investments -- program-related. See Part IV, line 11 ... 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 16 567,971 534,926 16 Total assets. Add lines 1 through 15 (must equal line 34) . 17 15,625 9,435 18 19 19 Deferred revenue . L 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D. . 22 Payables to current and former officers, directors, trustees, key Ļ employees, highest compensated employees, and disqualified 22 persons Complete Part II of Schedule L , . . T 254,780 23 198,170 23 Secured mortgages and notes payable to unrelated third parties . . Ε 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 270,405 26 207,605 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. N F U N D 264,521 27 360,366 27 Unrestricted net assets . 28 N D 28 Temporarily restricted net assets 29 Permanently restricted net assets ASSETS Organizations that do not follow SFAS 117, check here ▶ A L A and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds ... N 31 31 Paid-in or capital surplus, or land, building, or equipment fund 0 32 Retained earnings, endowment, accumulated income, or other funds 32 Ě 33 360,366 264,521 567,971 534,926 34 Total liabilities and net assets/fund balances.

Forn	n 990 (2	2010)			Paç	ge 12
	rt XI	Reconciliation of Net Assets				
٠		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	378	,290	
2	Total	2	282	,442		
3	Reve	nue less expenses Subtract line 2 from line 1	3	95	,848	
4	Net a	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	264	,521	
5	Other	changes in net assets or fund balances (explain in Schedule O)	5			
6	Net as	ssets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,	1			
	colum	ın (B))	6	360	, 366	
Pa	rt XII	Financial Statements and Reporting	•			
		Check if Schedule O contains a response to any question in this Part XII				
1 2a	If the In Sch Were	inting method used to prepare the Form 990 🗵 Cash 🗌 Accrual 📗 Other organization changed its method of accounting from a prior year or checked "Other," explain sedule O the organization's financial statements compiled or reviewed by an independent accountant?		2a 2b	Yes	No
b		the organization's financial statements audited by an independent accountant?	of the	25	├─	
С	audıt,	"to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
ď	If "Yes	" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is:	sued on	į		1
3a	a sepa X Sep As a re	trate basis, consolidated basis, or both parate basis Consolidated basis Both consolidated and separate basis esult of a federal award, was the organization required to undergo an audit or audits as set forth in angle Audit Act and OMB Circular A-133?		За		X
b		"did the organization undergo the required audit or audits? If the organization did not undergo the				
		ed audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	N/A	3b		
VA		99012 99011 TWF 41349 Copyright Forms (Software Only) - 2010 TW		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. OMB No 1545-0047

2010

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate Instructions.

Inspection
Employer Identification number

Εp	silon Nu House Corporation	06-1	696568	3	
_	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accoun	ts. Complete	ıf		
سسا	the organization answered "Yes" to Form 990, Part IV, line 6	•			
	(a) Donor advised funds	(b) Fu	inds and of	ther accoun	ts .
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	auviseu		□ v	П.,.
	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 c				
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other pur	ipose comem	ing	Пи	
Da	impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization answered "Yes" to Form 990, Per properties of the organization and the	art IV line 7		Yes	No
	······································	art iv, line 7			
1	Purpose(s) of conservation easements held by the organization (check all that apply)				
		vation of an h	-	•	id area
		vation of a ce	rtitied nistoi	ric structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	form of a con	servation		
	easement on the last day of the tax year				
			Held at the	End of the Ta	ax Year
a		2a			
þ	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	by the organiz	ation 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	ig of violations	s, and	□	<u></u>
	enforcement of the conservation easements it holds?		• •	Yes	∐No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easemed		_		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements di				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	170(h)(4)(B)	(1)	П.,	гэ
_	and section 170(h)(4)(B)(ii)?			Yes	∐ No
9	in Part XIV, describe how the organization reports conservation easements in its revenue and exp				
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial sta	itements that	describes		
D-1	the organization's accounting for conservation easements				
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar	Assets.			
4-	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	A-A	la al conse a la		
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue s art, historical treasures, or other similar assets held for public exhibition, education, or research in				
	in Part XIV, the text of the footnote to its financial statements that describes these items.	10.11.070.100	, public co	1100, provid	
L	16 Abo average and a second and a second and a CEAC 440 (ACC 250) to report in the volume is stated				
D	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue state historical treasures, or other similar assets held for public exhibition, education, or research in further similar assets.				,
	the following amounts relating to these items	nerance or pe	IDIIC SEI VICE	, provide	
	(I) Revenues included in Form 990, Part VIII, line 1		\$		
_	(II) Assets included in Form 990, Part X		\$		
	If the organization received or held works of art, historical treasures, or other similar assets for final following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	anciai gain, pr	ovide the		
	•				
	Revenues included in Form 990, Part VIII, line 1		\$		
Ð	Assets included in Form 990, Part X		▶ S		

Pa	rt III Organizations Mainta	ining Collections of	Art, Historical Trea	sures, or Other Sim	illar Assets (continued)		
•			- 41				
3	Using the organization's acquir	silion, accession, and	other records, chec	k any or the following	g that are a significant u	se of its collecti	on
	Items (check all that apply)		. [7			
a	Public exhibition		d	Loan or exchange	e programs		
b	Scholarly research		e [Other			
c	Preservation for future gen			and the second second			
4	Provide a description of the org	ganization's collection	s and explain now ti	ney turtner the organ	ization's exempt purpos	ie in	
_	Part XIV			4			
5	During the year, did the organi				tO	Пусс	ГП м .
10.	assets to be sold to raise funds rt IV Escrow and Custodia					Yes	No
		•			10 FOITH 990,		
	Part IV, line 9, or repor	ted an amount on For	m 990, Part A, line 2	<u> </u>			
4.	le the ergenization on egent tr	uetas austadian ar et	har intermediani for	contributions or othe	ar accete not		
1a	Is the organization an agent, tri					Пу	□ .
_	included on Form 990, Part X?				• • • • • • • • • • • • • • • • • • • •	Yes	∐ No
þ	If "Yes," explain the arrangeme	nt in Part XIV and con	npiete the following	lable		A	_
_	Description belows				4-	Amount	
Ç	Beginning balance				10		
ď	Additions during the year				1d		
e	Distributions during the year			,	1e		
f	-	· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •	1f		
2a	Did the organization include an		, Paπ X, line 217		••	Yes	∐ No
b Da	rt V Endowment Funds. Co		ation analysis d "Var	" to Form 000 Part I	N/ Imp 10		
ra	endowment Funds. C				ck (d) Three years ba	ak (a) Faur va	are book
4.	Bogunnung of woor holonoo	(a) Current year	(b) Prior year	(c) Two years ba	(u) Thee years ba	CK (e) Four ye	ars back
1a	Beginning of year balance						
b	Contributions			. 			<u></u>
C	Net investment earnings,						
	gains, and losses			 			······
ď	Grants or scholarships			 			
e	Other expenditures for						
	facilities and programs ,						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percenta						
a	Board designated or quasi-end		[%]				
b	Permanent endowment >	%					
C	Term endowment ▶	<u></u> %	4b ava-av-at tha	t are bald and admin	untared for the		
3a	Are there endowment funds not	in the possession of	the organization tha	t are neid and admir	istered for the	<u></u>	es No
	organization by						es No
	(i) unrelated organizations .				• • • • • • • • • • • • • • • • • • • •	3a(l)	
L	(ii) related organizations			lule DO	••	3a(II)	
b	If "Yes" to 3a(II), are the related	-	•		• • • • • • • • • • • • • • • • • • • •	. 3b	
4 Danie	Describe in Part XIV the intende						
Fai	t VI Land, Bulldings, and				(a) A a composit = 4 = 4	(a) David	
	Description of investment	1. ,		b) Cost or other	(c) Accumulated	(d) Book	value
4-	Land	(in	vestment)	basis (other)	depreciation	 	
1a	Land	.	91,000		CC 244		,000
b	Buildings		226,365		66,344	160,	,021
C	Leasehold improvements ,				2= 214	 	
ď	Equipment , , , , ,		46,224		35,244	10,9	
e 	Other		225,522	tumon (D) to a 40(1)	58,041	167,4	
otal	. Add lines 1a through 1e (Colui	mn (a) should equal F	orm 990, Part X, co	ıurnn (ʁ), IINe 10(c).)	· · · · · · · · · ·	429,4	182

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

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount Federal income taxes

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

^{2.} 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)

Epsilon	Nu	House	Corporati	06-1696568	
ange in Net Asse	ts fro	m Form 990	to Audited Financia	I Statements	

SCH	Epsiton Nu House Corporact 00-109050	<u> </u>	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
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	
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
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 2a	_	
b	Donated services and use of facilities	_	
С	Recoveries of prior year grants	_}	
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:		
а	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 revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
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		
а	Donated services and use of facilities	1 1	
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:		
а	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	
	week Mil		

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

10 990D4

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization

Epsilon Nu House Corporation

Employer Identification number

06-1696568

Part VI line 11: The return is reviewed by the Treasurer before it is signed and sent to the Internal Revenue Service.

Part VI line 19: The organization makes its governing documents and financial statements available to the public upon request.

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2010

Department of the Treasury

Attachment

Internal Revenue Service (99)	See separate	instructions.	► Attach to y	our tax return			Sequence No 67
Name(s) shown on return		Business	or activity to which the	his form relates	3		Identifying number
Epsilon Nu House (Corporati	on FOR FO	ORM 990				06-1696568
Part I Election To Expe							
Note: If you have any	listed property, o	complete Part V befo	re you complete Pa	rt I			
1 Maximum amount (see instructi	ons)					1	
2 Total cost of section 179 proper	rty placed in serv	rice (see instructions	, .			2	
3 Threshold cost of section 179 p	roperty before re	duction in limitation	(see instructions)			3	
4 Reduction in limitation, Subtract	t line 3 from line :	2 If zero or less, ent	er -0			4	
5 Dollar limitation for tax year. Sul	otract line 4 from	line 1. If zero or less	s, enter -0- If marrie	ed filing separa	ately,		
see instructions		<u> </u>	., <u>.</u> . <u>.</u>	<u></u>		5	500,000
6 (a) Description	n of property	(b)	Cost (busn use or	nly) (c) Ele	cted cos		
7 Listed property Enter the amou	nt from line 29	,		7			
8 Total elected cost of section 179	property. Add a	mounts in column (d	c), lines 6 and 7			8	
9 Tentative deduction. Enter the s	maller of line 5 of	or line 8 , , ,				9	
0 Carryover of disallowed deducti	on from line 13 o	of your 2009 Form 45	662 , .,			10	
1 Business income limitation Enter	er the smaller of b	ousiness income (no	t less than zero) or l	ine 5 (see insti	uctions)	11	500,000
2 Section 179 expense deduction	Add lines 9 and	10, but do not ente	r more than line 11		. 1	12	
3 Carryover of disallowed deducti	on to 2011 Add	lines 9 and 10, less	line 12 ► 13	3			
lote: Do not use Part II or Part III b	elow for listed pr	operty Instead, use	Part V				
Part II Special Deprecia	tion Allowan	ce and Other D	epreciation (Do	not include lis	ted prop	erty.) ((See instructions.)
4 Special depreciation allowance	for qualified prop	erty (other than liste	d property) placed i	n service			·
during the tax year (see instructi	ons)					14	
5 Property subject to section 168(f)(1) election					15	
6 Other depreciation (including AC	CRS)	•				16	
Part III MACRS Deprecia		clude listed property	.) (See instructions.)	.—		
			ction A				
7 MACRS deductions for assets p	laced in service i	n tax years beginnin	g before 2010			17	24,897
8 If you are electing to group any	assets placed in	service during the ta	x year into one or m	nore			
general asset accounts, check h	ere				▶ □		
Section B A		Service During 20		the General D	epreciati	on Sy	stem
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment) only see instruction	use horiod	(e) Convention	(f) Met	hod	(g) Depreciation deduction
9a 3-year property							
b 5-year property	j						
c 7-year propertySee Sta	tement						1,207
d 10-year property	1 [
e 15-year propertySee Sta	tement						907
f 20-year property	[
g 25-year property			25 yrs		S/L		
h Residential rental			27.5 yrs.	MM	S/L		
property			27 5 yrs	MM	S/L		
i Nonresidential real			39 yrs	MM	S/L		
property				MM	S/L		
	sets Placed In S	Service During 2010	Tax Year Using th				ystem
Da Class life	[]	<u></u>		T	S/L		
b 12-year	l †		12 yrs		S/L		
c 40-year			40 yrs.	MM	S/L		
Part IV Summary (See instr	uctions.)						
Listed property Enter amount fro						21	
2 Total. Add amounts from line 12		h 17. lines 19 and 20) in column (a), and	line 21 Enter	here	 +	
and on the appropriate lines of y						22	27,011
For assets shown above and pla							2.,011
enter the portion of the basis attr		-	23				

990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachmen	nt 1: Form 990 Pa	ge 2, Pa	rt III		
Open to Public					
Inspection	For calendar year 2010, or tax	period beginnin	9 07 - 01 - 2010, and ending	06-30-2	2011
Name of Organiz	ation			Employer Identific	ation Number
Epsilon 1	Nu House Corporat:	ion		06-1696568	3
Part III - Statem	ent of Program Service Accomp	lishments			
Code	Expenses :	282,030	including Grants of.	Revenue:	372,532
		Exe	mpt Purpose Achievements		

Providing housing and related activities for sorority members while they obtain higher education.

990 BOOKS ARE IN CARE OF

Attachment	2: Form 990	<u>Page 6, Part VI</u>	, Section C, Line	20
Open to Public			-	
Inspection	For calendar year 2010 o	tax period beginning (07-01 , and ending	06-30-2011
Name of Organization				Employer Identification Number
Epsilon Nu	House Corpor	ation		06-1696568
Part VI - Line 20				
Individual Name			Mark E Gunkel,	CPA
or				
Business Name				
		····		
Oh h A dadaa			oos a Moin	
Street Address .			903 S Main_	
				
U.S Address.				
o.o /laaroos.				
Zıp code "	74074	Cuty Stillwater	Sta	e OK
or	71071	City DCTTTWACCT		<u> </u>
Foreign Address				
Tarcigii Maarooo				
City .				
, .				
Province or S	State			
Country		*		
Postal code				
Phone Numb	er			(405)624-9999
Fax Number				
				

990 PAGE 10, OTHER EXPENSES
Attachment 3: Form 990 Page 10, Line 24 - Other Expenses

Open to Public 07 - 01 - 2010, and ending 06-30-2011 Inspection For calendar year 2010 or tax period beginning

Name of Organization Epsilon Nu House Corporation	1		06-16965	tification Number 68
Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Scholarship Award	4,690	4,690		
Miscellaneous	4,200	4,200		
Cleaning Services	3,690	3,690		
Deposit Refund	3,639	3,639		
Equipment Rental	3,565	3,565		
Telephone	3,076	3,076		
Credit Card Merchant Fees	2,730	2,730		
Cable	2,530	2,530		
Storage Expense	1,169	1,169		
Pest Control	799	799		
Security Expense	566	566		
Linens	538	538		
Postage and Delivery	396	396		
Printing and Reproduction	348	348		
Bank Service Charges	142	142		
Dues and Subscriptions	50	50		
Safety Deposit Box Rental	50	50		
Licenses and Permits	6	6		
Total:	32,184	32,184		

7-YEAR ASSETS PLACED IN SERVICE DURING 2010 USING GENERAL DEPRECIATION SYSTEM

Epsilon Nu House Corporation 06-1696568

19c.	(b)	(c)	(d)	(e)	(f)	(g)
Asset Description	Date in Service	Basis	Period	Convention	Method	Depreciation
		350 450 535 3,345 728 2,350 225 250		HY		

Total

1,207

15-YEAR ASSETS PLACED IN SERVICE DURING 2010 USING GENERAL DEPRECIATION SYSTEM

Epsilon Nu House Corporation 06-1696568

19e Asset Description	(b) Date in Service	(c) Basis	(d) Period	(e) Convention	(f) Method	(g) Depreciation
Building Improvemnts Parking Lot Improve PUD 412 S Walnut	07-07-2010 10-11-2010 04-04-2011 09-25-2010	1,602 1,690	15 15 15 15	HY HY	150 DB 150 DB 150 DB 150 DB	710 80 85 32
					13 13 13 13	
			;	,		

Total 907

2010 Federal Depreciation Schedule

Epsilon Nu House Corporation 06-1696568

06-1696568	orporation					,	v			,			:	01-10-2012
Description	Date	Method	Year	Cost	Land/ Other	Prior §179	Current §179	Pr Spec Allow	Cur Spec Allow	Basis	Prior	Current	Accum	Adj Basis
Home Improvements	nts													
Building	12-31-03	S/LMM	27 5	122,292	0	0	0	0	0	122,292	29,091	4,447	33,538	88,754
Building	08-26-04	S/LMM	27 5	2,624	0	0	0 (0	0	2,624	558	95	653	1,971
Building Improvement	07-27-04	S/LMM	27 5	7,700	0	0	0	0	0	7,700	1,668	280	1,948	5,752
Building Improvement	08-26-04	S/LMM	27 5	1,600	0	0	0 0	0	0	1,600	341	58	399	1,201
Building Improvempts	07-07-10	07-07-10 150DBHY	15	14,200	0	0	0	0	0	14,200	0	710	710	13,490
Carpet	07-29-09	07-29-09 150DBMQ	15	373	0	J	0 0	0	0	373	33	34	29	306
Improvements-Carp	10-12-04	10-12-04 S/LMM	27 5	11,424	0	U	0	0	0	11,424	2,369	415	2,784	8,640
New Carpet	07-18-07	07-18-07 150DBHY	15	6,002	0	Ü	0	0	0	6,002	1,383	462	1,845	4.157
Reroof Building	12-10-07	12-10-07 150DBHY		13,800	0	_	0 0	0	0	13,800	3,181	-	4,244	9,556
Yard Sprinkler House	08-20-08	08-20-08 150DBHY	15	6,200	0	J	0	0		6,200	899	530	1,429	
10 Assets	8		Totals	186,215	0		0 0	0	0	186,215	39,523	8,094	47,617	138,598
Buildings														
Building	07-01-03	S/LMM	27 5	226,365	0		0 0	0	0	226,365	58,113	8,231	66,344	160,021
1 Asset			Totals	226,365	0		0	0	0	226,365	58,113		66,344	
Furniture/Fixtures	.													
2 Armoires		07-20-08 200DBHY		716	0		0 0	0		716	277		405	314
2 Sofas	07-05-07	07-05-07 200DBHY	7	1,860	0		0	0	0	1,860	1,047	232	1,279	
50Gal Hot Water Tank	05-17-10	05-17-10 200DBMQ		1,194	0			0		1,194	43		372	822
52" NO Ceiling Fan		OR-06-09 200 BMO		109	C			C		109	7.0	23	5	S.
52" Spfd Ceiling Fan		08-06-09 200DBMQ	. ~	160	0		0	0	0	160	40		74	
Bed	05-16-11	05-16-11 200DBHY		350	0		0 0	0		350	0	50	20	300
Carpet	01-07-11	01-07-11 200DBHY		450	0			0	0	450	0		64	
Chairs - Big Lots	05-04-09	05-04-09 200DBHY		103	0		0 0	0		103	40		58	
Door	02-24-11	02-24-11 200DBHY	7 .	535	0		0 0	0	0	535	0	9/	9/	4
Double Door Freezer	09-08-10	09-08-10 200DBHY		3,345	0					3,345	0	478	478	7,
Furniture	06-13-07	06-13-07 200DBHY	7	1,936	0		0	0	0	1,936	1,332	173	1,505	431
Kitchn Equip & Utens	12-03-10	12-03-10 200DBHY		728	0			0		728	0	104	104	624
Matresses	04-21-10	04-21-10 200DBMQ	7 ~	4,805	0		0 0	0	0	4,805	172	1,324	1,496	3,309
* Asset disposed this year	is vear													

^{*} Asset disposed this year
~C Carryover basis in like-kind exchange transaction
~B Excess basis in like-kind exchange transaction

2010 Federal Depreciation Schedule

Epsilon Nu House Corporation 06-1696568

Fundamental Particle Fundamental Particle	Description	Date Method Y	Year	Cost	Land/ Other	Prior §179	Current §179	Pr Spec Allow	Cur Spec Allow	Basis	Prior	Current	Accum	Adj Basis
Furnitre Color C	Furniture/Fixtures	6												
Furniver 11-03-10 2000BHY 7 2360 0 0 0 0 0 235 0 0 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 236 2	Mattresses	07-31-08 200DBHY	7	290	0	0	0	0	0	290	112		163	107
Furniture 09-25-10 (2000BHV 15 850 0 0 0 0 0 1674 471 229 890	Onyx Shower	11-03-10 200DBHY	7	2,350	0	0	0	0	C	2 350			326	121
Barrolloon 1.53.40 2000BHY 7 157.4 0 0 0 0 157.4 471 298 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 890 8	Rm 101 Furniture	09-25-10 150DBHY	15	630	0	0	0	0	c	630			920	4,014
Digital Color 11-03-1 COLOBEHY 7 225 0 0 0 0 0 0 229 0 0 0 0 0 0 0 0 0	Sectional	06-10-08 200DBHY	7	1,674	0	0	0	0	· c	1 674	471		76	290
Panel GG-07-11 2000BHY 7 250 0 256 0 256 0 35 35 state stress GG-07-12 2000BHY 7 218 0 0 0 0 218 0 0 0 444 46 111 157 about a control of the control o	Shower Door	11-03-10 200DBHY	7	225	0	0	0	· C	o C	725	- C	7	000	499
State 09-30-10 2000BHY 7 218	Shutter Panel	05-07-11 200DBHY	7	250	0	0	0	0	0	250	0		36 36	193
12.25-ii 2000BHY 7 218 0 0 0 0 0 108 12 21 31 31 31 31 31 31	Dining										•		3	<u>+</u> ,
ss 01-18-10 COODEMING 7 1048 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Table Base	09-30-10 200DBHY	7	218	0	0	0	0	0	218	0		34	187
C2-25-10 CODBHY 7	Twin Mattress	01-18-10 200DBMQ	7	108	0	0	0	0	0	108	12		2 4	è
Second	Vaccum	02-25-10 200DBMQ	7	434	0	0	0	0	0	434	46	•	157	50 777
ssets Totals 22,915 0 0 0 22,915 4,006 3,936 7,942 g 07-01-09 LandMO 0 91,000 91,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Work Table	06-08-05 200DBHY	7	445	0	0	0	0	0	445	387	-	707	178
g 07-01-09 LandMO 91,000 91,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <td>23 Asset</td> <td></td> <td>otals</td> <td>22,915</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>22,915</td> <td>4,006</td> <td></td> <td>7,942</td> <td>14,973</td>	23 Asset		otals	22,915	0	0	0	0	0	22,915	4,006		7,942	14,973
g 0.7-24-08 LandIMQ 0 91,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Parking Lot													
1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,429 1,42	Land for Parking Lot	J	0	91,000		0	0	0	0	0	0		0	0
Oost	Parking Lot	07-24-08 150DBHY	15	6,200	0	0	0	0	C	6 200	808		420	
story 06-14-10 150DBMQ 15 5,900 0 0 0 5,900 74 583 571 10-11-10 150DBHY 15 1,602 0 0 0 0 1,690 0 85 85 ssels Totals 1,07,392 91,000 0 0 0 1,690 0 85 85 ssels Totals 10,7392 91,000 0 0 0 1,690 0 85 85 ssels Totals 10,7392 91,000 0 0 0 1,690 0 85 85 selet Totals 10,7392 91,000 0 0 0 1,690 0 1,184 1,384 87 selet Totals 0 0 0 0 0 0 1,690 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Parking Lot deposit		15	1,000	0	0	0	0	0	1,000	145		1,429	ŧ.
10-11-10 150DBHY 15 1,602 0 0 0 0 0 1,602 0 0 0 0 0 0 0 0 0	Parking Lot Improv		15	5,900	0	0	0	0	0	5,900	47	u	551 657	109
Seets Totals To	Parking Lot	10-11-10 150DBHY	15	1,602	0	0	0	0	0	1,602	C		<u> </u>	
Inter 104-04-11 50DBHY 15 1,690 0 0 0 1,690 0 0 1,690 0 0 1,690 0 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0 1,690 0	Improve												8	
Perf	PUD 412 S Walnut	04-04-11 150DBHY	15	1,690		0	0	0	0	1,690	0		85	
Co-Eo-Go ZOODBHY 7,747 0 0 0 7,747 6,019 691 6,710 07-19-05 ZOODBHY 7,747 0 0 0 0 1,500 1,164 134 1,298 09-07-05 ZOODBHY 7 3,151 0 0 0 0 1,164 134 1,298 09-07-05 ZOODBHY 7 3,151 0 0 0 0 0 1,164 134 1,298 10-12-04 ZOODBHY 7 9,500 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <td< td=""><td>6 Asset</td><td></td><td>otals</td><td>107,392</td><td></td><td>0</td><td>0</td><td>0</td><td>0</td><td>16,392</td><td>1,118</td><td></td><td>2,482</td><td></td></td<>	6 Asset		otals	107,392		0	0	0	0	16,392	1,118		2,482	
06-26-06 200DBHY 7,747 0 0 0 0 7,747 6,019 691 6,710 07-19-05 200DBHY 7 1,500 0 0 0 0 1,164 134 1,298 09-07-06 200DBHY 7 3,151 0 0 0 0 0 3,151 2,167 281 1,298 09-07-06 200DBHY 7 9,500 0 0 0 0 0 3,151 2,167 281 2,448 07-24-08 200DBHY 7 9,500 0 0 0 0 0 0 6,038 0,508 6,038 0 6,038 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <t< td=""><td>Shop Equipment</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>`</td><td></td><td></td></t<>	Shop Equipment											`		
07-19-05 200DBHY 7 1,500 0 0 0 0 1,500 1,164 134 1,208 09-07-06 200DBHY 7 3,151 0 0 0 0 3,151 2,167 281 2,448 09-07-06 200DBHY 7 9,500 0 0 0 0 6,038 6,038 0 6,038 10-12-04 200DBHY 5 6,038 0 0 0 0 0 6,038 0 6,038 10-12-04 200DBHY 5 6,318 0 0 0 0 0 6,038 0 0 6,038 0 0 6,038 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2 Air Units	06-26-06 200DBHY	7	7,747	。 	0	0	0	0	7 7 4 7	6.019		A 710	
09-07-06 200DBHY 7 3,151 0 0 0 0 3,151 2,167 2,148 2,448 07-24-08 200DBHY 7 9,500 0 0 0 0 9,600 3,685 1,662 5,448 10-12-04 200DBHY 5 6,038 0 0 0 0 0 6,038 0,038 0 6,038 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </td <td>6 Burner Stove</td> <td>07-19-05 200DBHY</td> <td>7</td> <td>1,500</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>1.500</td> <td>1.164</td> <td></td> <td>1,208</td> <td><u>-</u></td>	6 Burner Stove	07-19-05 200DBHY	7	1,500	0	0	0	0	0	1.500	1.164		1,208	<u>-</u>
07-24-08 200DBHY 7 9,500 0 0 0 0 0,500 3,685 1,662 5,347 10-12-04 200DBHY 5 6,038 0 0 0 0 0 6,038 1,662 5,347 10-12-04 200DBHY 5 6,038 0 0 0 0 0 496 0 496 0 496 0 496 0 496 0 496 0 496 0 0 496 0 0 496 0 0 496 0 0 496 0 0 496 0 0 496 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	AC Condenser	09-07-06 200DBHY	7	3,151	0	0	0	0	0	3,151	2.167		2,448	
10-12-04 200DBHY 5 6,038 0 0 0 0 6,038 6,038 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 496 0 0 496 0 496 0 496 0 496 0 496 0 496 0 496 0 496 0 496 0 496 0 496 0 496 496 0 496 0 496 0 496 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <td>Air Conditioner</td> <td>07-24-08 200DBHY</td> <td>7</td> <td>9,500</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>9,500</td> <td>3,685</td> <td>•</td> <td>5,347</td> <td></td>	Air Conditioner	07-24-08 200DBHY	7	9,500	0	0	0	0	0	9,500	3,685	•	5,347	
rs 04-22-09 200DBHY 5 6,318 0 0 0 0 0 6,318 3,286 1,213 4,999 11-12-03 200DBHY 5 496 0 0 0 0 0 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 496 0 0 496 498 3,127 406 3,533	Computers	10-12-04 200DBHY	5	6,038	0	0	0	0	0	6,038	6,038	•	6.038	
11-12-03 200DBHY 5 496 0 0 0 0 496 496 496 496 496 496 496 496 496 496 496 496 496 496 496 496 496 69 496 69 69 69 69 69 69 69 69 69 69 69 69 69 69 69 69 69 69 69 68 68 68 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 686 <td>Dell Computers</td> <td>04-22-09 200DBHY</td> <td>S.</td> <td>6,318</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>6.318</td> <td>3,286</td> <td>•</td> <td>4 499</td> <td></td>	Dell Computers	04-22-09 200DBHY	S.	6,318	0	0	0	0	0	6.318	3,286	•	4 499	
11-13-03 200DBHY 5 98 0 0 0 0 0 98 98 0 98 0 98 0 98 0 9	Equipment	11-12-03 200DBHY	2	496	0	0	0	0	0	496	496	•	496	
Printer 12-10-07 200DBHY 7 4,548 0 0 0 0 0 4,548 3,127 406 3,533 Printer 12-10-07 200DBHY 5 829 0 0 0 0 0 829 590 96 686 Iment 01-11-05 200DBHY 7 1,452 0 0 0 0 0 1,452 1,258 130 1,388 Iment 02-14-05 200DBHY 7 508 0 0 0 0 0 508 439 45 484 Init 07-31-09 200DBMY 7 1,612 0 0 0 0 0 1,612 403 345 748	Fax Machine	11-13-03 200DBHY	2	86	0	0	0	0	0	86	86		86	
12-10-07 200DBHY 5 829 590 96 686 01-11-05 200DBHY 7 1,452 0 0 0 0 1,452 1,258 130 1,388 02-14-05 200DBHY 7 508 0 0 0 0 439 45 484 09-01-06 200DBHY 7 488 0 0 0 0 488 336 44 380 07-31-09 200DBMQ 7 1,612 0 0 0 1,612 403 345 748	Garland Oven-Griddle		7	4,548	0	0	0	0	0		3,127		3,533	
01-11-05 200DBHY 7 1,452 0 0 0 0 1,452 1,258 130 1,388 02-14-05 200DBHY 7 508 0 0 0 0 439 45 484 09-01-06 200DBHY 7 488 0 0 0 0 488 336 44 380 07-31-09 200DBMQ 7 1,612 0 0 0 1,612 403 345 748	HP LaserJet Printer		2	829	0	0	0	0	0	829	290		686	
02-14-05 200DBHY 7 508 0 0 0 0 508 439 45 484 09-01-06 200DBHY 7 488 0 0 0 0 0 488 336 44 380 07-31-09 200DBMQ 7 1,612 0 0 0 0 1,612 403 345 748	Kitchen Equipment	01-11-05 200DBHY	7	1,452	0	0	0	0	0	1,452	1,258	_	1,388	
09-01-06 200DBHY 7 488 0 0 0 0 0 488 336 44 380 Unit 07-31-09 200DBMQ 7 1,612 0 0 0 0 0 1,612 403 345 748	Kitchen Equipment	02-14-05 200DBHY	7	208	0	0	0	0	0	508	439		484	
07-51-09.200DBINIQ / 1,512 403 345 748	Retngerator Stonmtoble Heit	09-01-06 200DBHY	7	488	0 0	0	0 0	0	0	488	336		380	108
	oreannable Onl	U/-31-09 ZUUDBIMU	_	7,612	ɔ	0	0	0	0	1,612	403		748	864

^{*} Asset disposed this year
~C Carryover basis in like-kind exchange transaction
~B Excess basis in like-kind exchange transaction

2010 Federal Depreciation Schedule

Epsilon Nu House Corporation 06-1696568

01-10-2012

Description	Date	Date Method Year	Cost	Land/ Other	Prior §179	Current §179	Pr Spec Allow	Current Pr Spec Cur Spec §179 Allow	Basis	Prior	Current	Accum	Adj Basis
Shop Equipment													
Washer & 3 Dryers 04-20-09 200DBHY	04-20-0	3 200DBHY 7	1,939	0	J	0	0	0	1,939	752	339	1,091	848
15 Assets	,,	Totals	46,224	0	ر	0 (0	0	46,224	29,858	5,386	35,244	10,980
55 Assets		Grand Totals	589 111	91 000		0	C	C	498 111	132 618	27 011	159 629	338 482

Asset disposed this year
 C Carryover basis in like-kind exchange transaction
 B Excess basis in like-kind exchange transaction

Epsilon Nu House Corporation 06-1696568

Description	Date	Method	Year	Bus. Use %	Cost	Land/Other	§179	Spec	Basis	Prior	AMT	Regular	Adjust
Home Improvements													
Building Improvement	12-31-03	S/LMM	27 5	100 00	122,292	0	0	0	122,292	29,091	4,447	4,447	0
Building Improvement	08-26-04	S/LMM	27 5	100 00	2,624	0	0	0	2,624	558	95	95	0
Building Improvement	07-27-04	S/LMM	27 5	100 00	7,700	0	0	0	7,700	1,668	280	280	0
Building Improvement	08-26-04	S/LMM	27 5	100 00	1,600	0	0	0	1,600	341	58	58	0
Building Improvemnts	07-07-10	150DBHY	15	100 00	14,200	0	0	0	14,200	0	710	710	0
Carpet	07-29-09	150DBMQ	15	100 00	373	0	0	0	373	33	34	34	0
Improvements-Carpet	10-12-04	S/LMM	27 5	100 00	11,424	0	0	0	11,424	2,369	415	415	0
New Carpet	07-18-07	150DBHY	15	100 00	6,002	0	0	0	6,002	1,383	462	462	0
Reroof Building	12-10-07	150DBHY	15	100 00	13,800	0	0	0	13,800	3,181	1,063	1,063	0
Yard Sprinkler House	08-20-08	150DBHY	15	100 00	6,200	0	0	0	6,200	899	530	530	0
10 Assets		Totals			186,215	0	0	0	186,215	39,523	8,094	8,094	0
Buildings													
Building	07-01-03	S/LMM	27 5	100 00	226,365	0	0	0	226,365	58,113	8,231	8,231	0
1 Asset		Totals			226,365	0	0	0	226,365	58,113	8,231	8,231	0
Furniture/Fixtures													
2 Armoires	07-20-08	150DBHY	7	100 00	716	0	0	0	716	214	108	125	17
2 Sofas	07-05-07	150DBHY	7	100 00	1,860	0	0	0	1,860	835	228	232	4
50Gal Hot Water Tank	05-17-10	150DBMQ	7	100 00	1,194	0	0		1,194	32	249	329	80
52" NO Ceiling Fan	60-90-80	150DBMQ	7	100 00	109	0	0		109	20	19	23	4
52" Spfd Ceiling Fan	60-90-80	150DBMQ	7	100 00	160	0	0		160	30	28	34	9
Bed	05-16-11	150DBHY	7	100 00	320	0	0		320	0	37	50	13
Carpet	01-07-11	150DBHY	7	100 00	450	0	0		450	0	48	64	16
Chairs - Big Lots	05-04-09	150DBHY	7	100 00	103	0	0		103	31	15	18	က
Door	02-24-11	150DBHY	7	100 00	535		0		535	0	57	76	19
Double Door Freezer	09-08-10	150DBHY	7	100 00	3,345		0		3,345	0	358	478	120
Furniture	06-13-07	150DBHY	7	100 00	1,936		0		1,936	1,105	237	173	-64
Kitchn Equip & Utens	12-03-10	150DBHY	7	100 00	728		0		728	0	78		56
Matresses	04-21-10	150DBMQ		100 00	4,805		0		4,805	129	1,002	_	322
Mattresses	07-31-08	150DBHY	7	100 00	290		0		290	86	44		7
Onyx Shower	11-03-10	150DBHY		100 00	2,350		0		2,350	0	252		84
Rm 101 Furniture	09-25-10	150DBHY	•	100 00	630		0		630	0	32		0
Sectional	06-10-08	150DBHY	7	100 00	1,674		0		1,674	471	205		4
Shower Door	11-03-10	150DBHY	7	100 00	225		0		225	0	24		80
Shutter Panel Dining	05-07-11	150DBHY	7	100 00	250	0	0		250	0	27		60
Table Base	09-30-10	150DBHY	7	100 00	218	0	0		218	0	23		6 0
Twin Mattress	01-18-10	150DBMQ	_	100 00	108	0	0	0	108	თ	21	28	7
Vaccum	02-25-10	150DBMQ	7	100 00	434	0	0		434	35	86	111	25
Work Table	06-08-05	150DBHY	7	100 00	445	0	0		445	365	55	40	-15

^{*} Asset disposed this year

C Carryover basis in like-kind exchange transaction

B Excess basis in like-kind exchange transaction

2010 AMT Depreciation Schedule

Epsilon Nu House Corporation 06-1696568

Description													
•	Date	Method Year	ear	Bus. Use %	Cost	Land/Other	§179	Spec Allow	Basis	Prior	AMT	Regular	Adjust
23 Assets		Totals			22,915	0	0	0	22,915	3,362	3,233	3,936	703
Parking Lot													
rking Lot	07-01-09	LandMQ	0	100 00	91,000	91,000	0	0	0	0	0	0	C
Parking Lot 0	07-24-08	150DBHY	15	100 00	6,200	0	0	0	6,200	899	530	530) C
_	04-18-09	150DBHY	5	100 00	1,000	0	0	0	1,000	145	86	86	0
	06-14-10	150DBMQ	15	100 00	5,900	0	0	0	5,900	74	583	583	0
O	10-11-10	150DBHY	15	100 00	1,602	0	0	0	1,602	0	80	80	0
PUD 412 S Walnut 0	04-04-11	150DBHY	15	100 00	1,690	0	0	0	1,690	0	85	85	0
6 Assets		Totals			107,392	91,000	0	0	16,392	1,118	1,364	1,364	0
Shop Equipment													
2 Air Units 0	06-26-06	150DBHY	7	100 00	7,747	0	0	0	7,747	5,374	949	691	-258
6 Burner Stove 0	07-19-05	150DBHY	7	100 00	1,500	0	0	0	1,500	1,041	184	134	-50
AC Condenser 0	90-20-60	150DBHY	7	100 00	3,151	0	0	0	3,151	1,800	386	281	-105
Air Conditioner 0	07-24-08	150DBHY	7	100 00	9,500	0	0	0	9,500	2,834	1,428	1,662	234
	10-12-04	150DBHY	2	100 00	6,038	0	0	0	6,038	6,038	0	0	0
uters	04-22-09	150DBHY	2	100 00	6,318	0	0	0	6,318	2,559	1,128	1,213	85
Equipment 1	11-12-03	150DBHY	S.	100 00	496	0	0	0	496	496	0	0	0
Fax Machine	11-13-03	150DBHY	2	100 00	86	0	0	0	86	26	0	0	0
Je	09-19-06	150DBHY	7	100 00	4,548	0	0	0	4,548	2,598	557	406	-151
_	12-10-07	150DBHY	2	100 00	829	0	0	0	829	483	138	96	42
	01-11-05	150DBHY	7	100 00	1,452	0	0	0	1,452	1,186	178	130	48
Inpment	02-14-05	150DBHY	7	100 00	208	0	0	0	508	413	62	45	-17
	09-01-06	150DBHY	7	100 00	488	0	0	0	488	278	99	44	-16
	07-31-09	150DBMQ	7	100 00	1,612	0	0	0	1,612	302	281	345	64
Washer & 3 Dryers	04-20-09	150DBHY	7	100 00	1,939	0	0	0	1,939	579	291	339	48
15 Assets		Totals			46,224	0	0	0	46,224	26,078	5,642	5,386	-256
55 Assets	Gran	Grand Totals			589,111	91,000	0	0	498,111	128,194	26,564	27,011	447

⁷

ELECTION NOT TO DEDUCT 100% SPECIAL DEPRECIATION ALLOWANCE

Epsilon Nu House Corporation 06-1696568

Taxpayer elects under IRC Sec 168(k)(5) to not claim the additional 100% first-year special depreciation allowance for the following classes of property placed in service during the tax year ended June 30, 2011

3-Year Property

5-Year Property

7-Year Property

10-Year Property

15-Year Property

20-Year Property

Water Utility Property

Depreciable Computer Software

Qualified Leasehold Improvement Property

ELECTION NOT TO DEDUCT 50% SPECIAL DEPRECIATION ALLOWANCE

Epsilon Nu House Corporation

06-1696568

Taxpayer elects under IRC Sec. 168(k)(2)(C)(III) to not claim the additional 50% first-year special depreciation allowance for the following classes of property placed in service during the tax year ended $\underline{June} 30$, $\underline{2011}$

3-Year Property

5-Year Property

7-Year Property

10-Year Property

15-Year Property

20-Year Property

Water Utility Property

Depreciable Computer Software

Qualified Leasehold Improvement Property

2010 DETAIL STATEMENTS

. ZOTO DETAIL OTATEMENTO		
Epsilon Nu House Corporation 06-1696568		Domo 1
00-1030308		Page 1
STATEMENT #1 - Acct. payable and exp. end yr (990-E	O PG 11 Line	17b)
	Beginning	Ending
Accounts Payable	11,07 6	
Housing Deposits	1,970	1,970
	2,579	388
Payroll Liabilities	2,319	200
TOTAL CARRIED TO 990-EO PG 11 Line 17b	15,625	9,435
STATEMENT #2 - Other investment (SCH D, PG 2 Line 1	e(a))	
Parking Lot	16,392	
Furniture & Fixtures		
Building Improvements	186,215	
Darraing improvements	100,213	
TOTAL CARRIED TO SCH D, PG 2 Line 1e(a)		225,522
STATEMENT #3 - Other depreciation (SCH D, PG 2 Line	le(c))	
Parking Lot	2,482	
Furniture & Fixtures	7,942	
Building Improvements	47,617	
TOTAL CARRIED TO SCH D, PG 2 Line 1e(c)		58,041