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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2010**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

► Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

A For the 2010 calendar year, or tax year beginning **August 1**, 2010, and ending **July 31**, 20 **11****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**Zeta Sigma Chapter of Gamma Phi Beta Sorority****D** Employer identification number**20-1554454**

Number and street (or P.O. box, if mail is not delivered to street address)

Room/suite

527 Gadsden Street**E** Telephone number**803-606-4461**

City or town, state or country, and ZIP + 4

Columbia, SC 29201**F** Group ExemptionNumber ► **0198****G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ►**I** Website: ► **info.theginsystem.com/websites/gpbusc/****J** Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,

line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

► \$

191903**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I.)Check if the organization used Schedule O to respond to any question in this Part I ☐

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	191903
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	191903	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	186663
	17	Total expenses. Add lines 10 through 16	17	186663
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5240
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	45240
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	50480

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 106421

Form **990-EZ** (2010)

21P

S. J. (JAN 05 2012)

	Yes	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?	45	☒
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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45a	☒
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	☒

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

	Yes	No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	☒
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	☒
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	☒
b If "Yes," was the related organization a section 527 organization?	49b	☒

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000

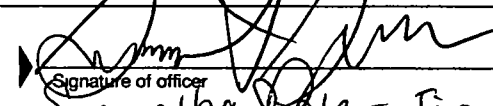
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here  **Date** 11/14/11
 Signature of officer
 Samantha Sipler Financial Vice President
 Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

Zeta Sigma Chapter of Gamma Phi Beta

Employer identification number

20-1554454

Schedule of Other Expenses, Page 1, 990-EZ, Part 1, Line 16 - See Attachment #5

Schedule of Other Assets, Page 2, 990-EZ, Part II, Line 24 - See Attachment #6

SCHEDULE O - SCHEDULE OF OTHER EXPENSES

Schedule O, Attachment #5: Page 1 – 990-EZ, Part I, Line 16

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

<u>Description of Other Expenses</u>	<u>Amount</u>
Cost of Chapter Activities – Membership Recruitment	\$ 51,791
Cost of Chapter Activities – Administration and Recordkeeping	\$ 19,543
Cost of Chapter Activities – Public Relations and Social Events	\$ 48,952
Travel to International Convention	\$ 5,726
Composite Photograph	\$ 2,500
President's Expenses	\$ 4,787
Dues and Assessments paid to International Gamma Phi Beta	\$ 29,824
Fees and Assessments paid to Zeta Sigma House Corporation Of Gamma Phi Beta Sorority Inc.	\$ 23,540

TOTAL	\$186,663

SCHEDULE O - SCHEDULE OF OTHER ASSETS

Schedule O, Attachment #6: Page 2 – 990-EZ, Part II, Line 24

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

<u>Description of Other Assets</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Prepaid Expenses	\$15,364	\$ 000
 TOTALS	 \$15,364	 \$ 000

PRIMARY EXEMPT PURPOSE

Attachment 1: Page 2 – 990-EZ, Part III

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

Primary Purpose

Operation of college sorority which is a social club.

PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: Page 2 – 990-EZ, Part III, Line 28

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

Program Service Expenses \$186,663

Exempt Purpose Achievements

The organization conducted various activities to promote cultural, social and education growth of members who are students at the University of South Carolina.

CURRENT OFFICERS, DIRECTORS, TRUSTEES **AND KEY EMPLOYEES**

Attachment 3: Page 2 – 990-EZ, Part IV

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

<u>(A) Name and Address</u>	<u>(B) Title and Average Hours per Week</u>	<u>(C) Compensation (If not paid enter 0)</u>	<u>(D) Cont to Emp Ben. Plans & Def. Comp.</u>	<u>(E) Expense Acct & Other Allowances</u>
Courtney Ruble 527 Gadsden Street Columbia, SC 29201	President 20	0	0	0
Sami Sipler 527 Gadsden Street Columbia, SC 29201	Vice Pres - Finance 10	0	0	0
Lauren Nottoli 527 Gadsden Street Columbia, SC 29201	Vice President - Administrative 5	0	0	0
Chelsea Ostebo 527 Gadsden Street Columbia, SC 29201	Vice President - Education 5	0	0	0
Brooke Lewis 527 Gadsden Street Columbia, SC 29201	Vice Pres – Public Relations 5	0	0	0
Rachel Gilbert 527 Gadsden Street Columbia, SC 29201	Vice President Pan-Hellenic 5	0	0	0
Alex Simpson 527 Gadsden Street Columbia, SC 29201	Vice President - Membership 5	0	0	0
Lauren Flannery 527 Gadsden Street Columbia, SC 29201	Recording Secretary 5	0	0	0

CURRENT OFFICERS, DIRECTORS, TRUSTEES **AND KEY EMPLOYEES**

Attachment 3: Page 2 – 990-EZ, Part IV

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

Jordan Bright 527 Gadsden Street Columbia, SC 29201	Past President 20	0	0	0
Justine Kenney 527 Gadsden Street Columbia, SC 29201	Past Vice Pres - Finance 10	0	0	0
Colleen White 527 Gadsden Street Columbia, SC 29201	Past Vice President - Administrative 5	0	0	0
Casey Roberts 527 Gadsden Street Columbia, SC 29201	Past Vice President - Education 5	0	0	0
Amanda Gruskos 527 Gadsden Street Columbia, SC 29201	Past Vice Pres – Public Relations 5	0	0	0
Courtney Ruble 527 Gadsden Street Columbia, SC 29201	Past Vice President Pan-Hellenic 5	0	0	0
Liz Sanders 527 Gadsden Street Columbia, SC 29201	Past Vice President - Membership 5	0	0	0
Chelsea Ostebo 527 Gadsden Street Columbia, SC 29201	Past Recording Secretary 5	0	0	0

BOOKS ARE IN CARE OF

Attachment 4: Page 3 – 990-EZ, Part V, Line 42a

For calendar year 08/01/2010 – 07/31/2011

Zeta Sigma Chapter of Gamma Phi Beta Sorority, Inc. EIN 20-1554454

Connie Woodham
527 Gadsden Street
Columbia, SC 29201