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Form

Department of the Treasury Internal Revenue Service

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

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

• The organization of the internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

| 20 | 01 | 1 |
|------|------|-------|
| Open | to P | ublic |
| Ins | pect | on |

| <u>A</u> | For the 2011 (| alendar year, or tax year beginning U9/U1/11, and ending U8/31/ | 12 | | |
|-------------------------|----------------------|---|---------------------|---------------------|-------------------------|
| В | Check if applicable | C Name of organization | | D Employe | r identification number |
| П | Address change | KAPPA FOUNDATION | | ł | |
| $\overline{\Box}$ | Nome change | Doing Business As | | 47-0 | 0809384 |
| = | Name change | Number and street (or P O box if mail is not delivered to street address) | Room/suite | | ne number |
| | Initial return | 1430 IDYLWILD DRIVE | | 102 | -873-8961 |
| $\overline{\Box}$ | Terminated | City or town, state or country, and ZIP + 4 | | 402 | -013-030I |
| = | reminated | | | į. | |
| | Amended return | LINCOLN NE 68410 | | G Gross receip | ots \$ 1,274,712 |
| | Application pending | F Name and address of pnncipal officer | 1 | | |
| | | | H(a) ISTINIS a g | roup retum for aff | filiates? Yes X No |
| | | | H(b) Are all af | filiates included? | Yes No |
| | | | If "No | o," attach a list (| see instructions) |
| _ | Toy overnat status | X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527 | \dashv | | |
| <u>-</u> | Tax-exempt status | X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527 | ┥ | | _ |
| <u></u> | | | | emption number | |
| | Form of organization | | Year of formation | <u>M</u> | State of legal domicile |
| F | art I Su | ımmary | <u> </u> | | |
| | 1 Briefly de | escribe the organization's mission or most significant activities | | | |
| a | AWAF | DING OF COLLEGE SCHOLARSHIPS | | | |
| ပ္ခ | | | | | |
| _ <u>=</u> | | | | | |
| e ₹3 | | | | | |
| ₹ <u>`</u> | 2 Check th | is box ▶ ☐ if the organization discontinued its operations or disposed of more than 2 | 5% of its net ass | sets. | |
| Activities & Governance | 3 Number | of voting members of the governing body (Part VI, line 1a) | | 3 | 10 |
| 38 | 4 Number | of independent voting members of the governing body (Part VI, line 1b) | | 4 | 10 |
| _ <u>≡</u> | 1 | nber of individuals employed in calendar year 2011 (Part V, line 2a) | | 5 | 0 |
| ĭ₹ï | 1 | | | | |
| - ĕ | 1 | nber of volunteers (estimate if necessary) | | 6 | 0 |
| j | | elated business revenue from Part VIII, column (C), line 12 | | 7a | 0 |
|] | b Net unre | ated business taxable income from Form 990-T, line 34 | | 7b | 0 |
| 3 | | | Prior Yea | | Current Year |
| | 8 Contribu | tions and grants (Part VIII, line 1h) | 33 | 0,447 | 436,711 |
| 2 | 9 Program | service revenue (Part VIII, line 2g) | 9 | 8,012 | 91,855 |
| Revenue | 10 investme | nt income (Part VIII, column (A), lines 3, 4, and 7d) | 2' | 7,858 | 73,641 |
| ž | 1 | venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0 | 0 |
| | 1 | | 45 | 6,317 | 602,207 |
| | | enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 43 | | |
| | 1 | nd similar amounts paid (Part IX, column (A), lines 1–3) | | 0 | 0 |
| | 14 Benefits | paid to or for members (Part IX, column (A), line 4) | | 0 | 0 |
| S | 15 Salaries, | other compensation, employee benefits (Part IX, column (A), lines 5–10) | | 0 | 0 |
| Se | 16a Professio | onal fundraising fees (Part IX, column (A), line 11e) | | 0 | |
| Expenses | b Total fun | draising expenses (Part IX, column (D), line 25) | | | |
| ŭ | 17 Other ev | penses (Part IX, column (A), lines 11a-11d, 11f=24e) | 6' | 2,246 | 79,705 |
| | | 1 000 | - 6 | 2,246 | |
| | | | | | 79,705 |
| - 4 | 19 Revenue | less expenses. Subtract line 18 from line 12 013 | | 4,071 | 522,502 |
| Net Assets or | | (2) (2) (2) | Beginning of Cur | | End of Year |
| Sset | 20 Total ass | ets (Part X, line 16) OGDEN, UT | | B,029 | 2,410,091 |
| Ž,E | 21 Total liab | ilities (Part X, line 2 6) | | 0,190 | 9,750 |
| Ž | 22 Net asse | ts or fund balances Subtract line 21 from line 20 | 1,87 | 7,839 | 2,400,341 |
| P | art II Si | gnature Block | | | · |
| | nder penalties of | periury. I declare that thrave examined this eturn uncluding accompanying schedules and statem | ents, and to the be | est of my knov | vledge and belief it is |
| tr | ue, correct, and c | perjury, I declare that I have examined this etern, including accompanying schedules and statem omplete peclaration of which preparer | has any knowledg | e | 1 |
| | | The Targuer | | | X/Daret |
| o: | • • • | Analyze of officer | _ | Date | 13/1/4/ |
| Sig | g" | | | Date | |
| He | | WillWiffler, Insusurer | | | |
| | | ype or print name and title | | | |
| | Print/Typ | e preparer's name Preparer's signature | Date | Check | X if PTIN |
| Pai | d DAVID | W. MCNALLY avrille July | 1-14- | /3 self-emplo | |
| Pre | narer | Description of the National Control of the Control | | | 47-0710166 |
| | e Only | | F | irm's EIN ▶ | -1-01T0T00 |
| U36 | - Jiny | 905 Meridian Ave | | | 000 -01 |
| | Firm's ad | | Р | hone no | <u>308-784-4080</u> |
| Ma | y the IRS discus | s this return with the preparer shown above? (see instructions) | | 0:/ | Yes No |
| For | Paperwork Re | duction Act Notice, see the separate instructions. | | 7115 | Form 990 (2011) |

| Form 990 (2011) | KAPPA FOUNDATION | 47- | 0809384 | Page 2 |
|-----------------------------|---|---|--------------------------------|------------------------|
| | Statement of Program Serv Check if Schedule O contains | ice Accomplishments a response to any question in this Pa | rt III | |
| 1 Bnefly desc | inbe the organization's mission. IG OF COLLEGE SCHO | | | |
| | | | | |
| prior Form 9 | anization undertake any significant 990 or 990-EZ? scribe these new services on Scher | program services during the year which were no | ot listed on the | Yes X No |
| 3 Did the organizers? | anization cease conducting, or mak | e significant changes in how it conducts, any pi | rogram | Yes X No |
| 4 Describe the expenses S | Section 501(c)(3) and 501(c)(4) orga | O. complishments for each of its three largest pro anizations and section 4947(a)(1) trusts are req nses, and revenue, if any, for each program sei | juired to report the amount of | |
| | ON OF EDUCATIONAL | 79,281 including grants of \$ SCHOLARSHIPS FOR STUDE OLLEGE OF AGRICULTURE |) (Revenue \$ | |
| | | | | |
| | | | | |
| | ····· | | | |
| 4b (Code: |) (Expenses \$ | including grants of \$ |) (Revenue \$ | |
| | | | | |
| | | | | |
| 4c (Code: |) (Expenses \$ | including grants of \$ |) (Revenue \$ | |
| | | | | |
| | | | | |
| | | | | |
| 4d Other progr (Expenses | ram services (Describe ın Schedule | | (Revenue \$ |) |
| | ram service expenses ▶ | 79,281 | TOTOTION W | |
| DAA | | | | Form 990 (2011) |

Part IV Checklist of Required Schedules

| | · | | Yes | No |
|-----|---|------------------|----------|--------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | [| |
| | complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | 37 |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | _ <u>X</u> _ |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | v |
| _ | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | x |
| 6 | | " | | |
| U | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| | "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | ├ ॅ ┤ | | |
| • | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | , | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | <u> </u> | | |
| - | 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 temporarily restricted | | | |
| | endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | | | |
| | VII, VIII, IX, or X as applicable | | | |
| 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 | | X |
| С | 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 | | X |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | X | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 446 | | x |
| 12- | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | ─┼ | |
| 124 | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12a | | x |
| h | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if | IZa | \dashv | <u> </u> |
| D | the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | x |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | x |
| | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | | | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | Ì | |
| | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | ļ | <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 | | X |
| | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

Form 990 (2011) KAPPA FOUNDATION
Part IV Checklist of Required Schedules (continued)

| | _ · | | Yes | No |
|-------------|--|----------------|--------------|---------------------------------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization | | | |
| | | 21 | | <u> </u> |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States | | | |
| | F | 22 | | <u> </u> |
| 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 | | | |
| | | 23 | | <u> </u> |
| 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 | | | |
| _ | | 24a | | <u> </u> |
| b | | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| | F | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 24d | | |
| 2 3a | | , ₋ | | x |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | 25a | | |
| D | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | ŀ | | |
| | | 25b | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | .30 | | |
| | | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | |
| | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | | |
| | | 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 | l | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | 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 |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | | | |
| | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | <u> </u> |
| 29 | – | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | ŀ | |
| | F | 30 | | <u> </u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | i | |
| | | 31 | | <u>_x</u> _ |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| | | 32 | | <u> </u> |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | v |
| 34 | | 33 | -+ | <u> </u> |
| 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 | , l | | v |
| 35a | - | 34 | | $\frac{\mathbf{x}}{\mathbf{x}}$ |
| b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the | 55a | | |
| - | | 5b | | x |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | 35 | | |
| | | 36 | | x |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, | | | |
| | | 37 | - 1 | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and | \neg | T | |
| | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | х | |
| | | | agn | (0044) |

Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 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 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 10a а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources 11b 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 b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which 13b the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c 14a X Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it_filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O b

| Pa | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below | | | ugo e |
|-------|--|----------|-------------|----------|
| | "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in \$ | cnea | uie | T |
| 500 | O. See instructions. Check if Schedule O contains a response to any question in this Part VI | | | X |
| Sec | tion A. Governing Body and Management | | | r |
| 1. | Enter the number of voting members of the governing body at the end of the tax year 1a 10 | | Yes | No |
| 1a | | - | | |
| | If there are material differences in voting rights among members of the governing body, or | | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | |
| | committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 10 | | | |
| b | | ┨ | | |
| 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? | | | . |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | 2 | | X |
| 3 | supervision of officers, directors, or trustees, or key employees to a management company or other person? | ١, | | х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 3 | | X |
| 5 | Did the organization make any significant changes to its governing documents since the prior Form 990 was lined? Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | - | | |
| | one or more members of the governing body? | 7a | | x |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | 'a | | -22 |
| _ | stockholders, or persons other than the governing body? | 7b | | x |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | 7.0 | | - 41 |
| a | 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 |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co | | | |
| | | <u> </u> | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | | 11a | х | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | x | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe in Schedule O how this was done | 12c | | X |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did 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 | | X |
| b | Other officers or key employees of the organization | 15b | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| | with a taxable entity during the year? | 16a | | <u> </u> |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | |
| | organization's exempt status with respect to such arrangements? | 16b | | |
| | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed None | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) | | | |
| | available for public inspection. Indicate how you made these available. Check all that apply | | | |
| 46 | Own website Another's website Upon request | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, | | | |
| | and financial statements available to the public during the tax year. | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the | | | |
| per - | organization ► WILL WITTLER 1724 S. 48TH RD | ~~ | | 10- |
| T.F | ALMAGE NE 68448 308 | -32 | 5- 1 | 125 |

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

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

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

K Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee (F) Name and Title Average Position Reportable Reportable Estimated (do not check more than one hours per compensation compensation from amount of box, unless person is both an from other (describe officer and a director/trustee) the organizations compensation hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization lividual trustee organizations employee and related ın Schedule organizations O) (1) RYAN BETKA X TRUSTEE 1.00 0 0 (2) DOYLE HULME 1.00 X 0 TRUSTEE 0 (3) RON GRAPES X 0 TRUSTEE 1.00 0 (4)W R STEPHENS X TRUSTEE 1.00 0 0 0 (5) CRAIG UDEN X 0 TRUSTEE 1.00 0 0 (6) NEIL BALFOUR TRUSTEE 1.00 X 0 0 0 (7) KEITH CARLSON TRUSTEE 1.00 X 0 0 0 (8) WILL WITTLER SEC\TREAS 2.00 X 0 0 0 (9) ROGER WEHRBEIN 1.00 X 0 0 PRESIDENT 0 (10) MERLE SCHINES SECRETARY 2.00 X 0 0 (11)(12)(13)(14)

| Name and title Page Pag | Pa | rt VII Section A. Officers | , Directors, Tru | stee | s, K | ey E | mpl | oyee | s, a | and Highest Compensated | Employees (continued) | | | | |
|---|------|---|---|----------------------------------|----------------------|-------------------|---------------|------------------------------|-------------|---|---|-----|---|------------------|----------|
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| Pa | irt V | III Staten | nent of Reve | nue | | | | | | |
|--|-------|---|--------------------------|-----------|-------------|--------------------|----------------------|--------------------------------|---|--|
| | ` | | | | | | (A) Total revenue | (B) Related or exempt function | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections |
| SS | | | | Y | ······ | | | revenue | | 512, 513, or 514 |
| Program Service Revenue Contributions, Gifts, Grants | 1a | Federated can | | <u>1a</u> | | | | | | |
| 200 | b | Membership d | | 1b | | | | i | | |
| A, | С | Fundraising ev | /ents | 1c | | | | | | |
| 필급 | d | Related organ | ızatıons | 1d | | | | | | |
| S, Ti | е | Government grants | (contributions) | 1e | | | | | | |
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| | • | 3 Investment income (including dividends, intere and other similar amounts) | | | | st, ▶ | 34,818 | | | 34 010 |
| | 4 | | • | | . 4 1 | · - | 34,610 | | | 34,818 |
| | 4 | | nvestment of tax | -exem | pt bona pi | oceeds - | | | | |
| | 5 | Royalties | | 1 | | P | | | | |
| | | | (ı) Real | | (II) P | ersonal | 1 | | | |
| | 6a | Gross rents | | | | | | | | |
| | b | Less rental exps | | | | | | 1 | | |
| | С | Rental inc or (loss) | | | | | | | | |
| | d | Net rental inco | me or (loss) | | | • | Į | | | [|
| | 7a | Gross amount from | (i) Secunties | | (ii) | Other | | | · · · · · · · · · · · · · · · · · · · | |
| | | sales of assets other than inventory 710,497 | | | 831 | Į. | 1 | | | |
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| nue | Вa | | om fundraising eve | nts | | | 1 | | | |
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| è | | | eported on line 1c) | | | | [| | | |
| Other Reve | | See Part IV, line | 18 | а | | | | | | |
| Ě | b | Less: direct ex | penses | b | | | | | | |
| ٥ | С | Net income or | (loss) from fund | raising | events | > | | | | |
| | 9a | Gross income fro | om gaming activitie | s [| | | | | | |
| | | See Part IV, line | | а | | | | | | |
| | b | Less: direct ex | | ь | | | | | | |
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| | С | Net income or | (loss) from sale | s of in | ventory | | | | | |
| | | Misc | cellaneous Revenue | | | Busn. Code | | | | |
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| | | Total. Add line | | | | • | | | | |
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| | . 2 | - otal levellue | Jee maduction | 13 | | | 002,201 | | | 34,818 |

Form 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| | Check if Schedule O contains a response to any question in this Part IX | | | | | | | | | | | |
|----------|---|---------------------------------------|---------------------|---------------------------------------|---|--|--|--|--|--|--|--|
| Do | not include amounts reported on lines 6b, | (A) Total expenses | (B) Program service | (C) Management and | (D) Fundraising | | | | | | | |
| 7b | 8b, 9b, and 10b of Part VIII. | Total depositor | expenses | general expenses | expenses | | | | | | | |
| 1 | Grants and other assistance to governments and | | | | | | | | | | | |
| | organizations in the U.S. See Part IV, line 21 | | | | | | | | | | | |
| 2 | Grants and other assistance to individuals in | | | | | | | | | | | |
| | the U.S See Part IV, line 22 | | | | | | | | | | | |
| 3 | Grants and other assistance to governments, | | | | | | | | | | | |
| | organizations, and individuals outside the | | | | | | | | | | | |
| | U.S. See Part IV, lines 15 and 16 | | | | | | | | | | | |
| 4 | Benefits paid to or for members | | | | ······································ | | | | | | | |
| 5 | Compensation of current officers, directors, | | | | | | | | | | | |
| | trustees, and key employees | | | | • | | | | | | | |
| 6 | Compensation not included above, to disqualified | | | | | | | | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | | | | | | | | |
| | persons described in section 4958(c)(3)(B) | | | | | | | | | | | |
| 7 | Other salanes and wages | | | ** | | | | | | | | |
| 8 | Pension plan accruals and contributions (include | | | | | | | | | | | |
| _ | section 401(k) and 403(b) employer contributions) | | | | | | | | | | | |
| 9 | Other employee benefits | | | | | | | | | | | |
| 10 | Payroll taxes | | | · · | | | | | | | | |
| 11 | Fees for services (non-employees): | | | | | | | | | | | |
| a | Management | | | | | | | | | | | |
| b | Legal | | | | | | | | | | | |
| C | Accounting | | | <u> </u> | | | | | | | | |
| d | Lobbying | · . · | | | | | | | | | | |
| e f | Professional fundraising services See Part IV, line 17 Investment management fees | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| _ | Other | | | | | | | | | | | |
| g 12 | Advertising and promotion | | | · · | | | | | | | | |
| 13 | Office expenses | 3,673 | 3,306 | 367 | | | | | | | | |
| 14 | Information technology | | 3,300 | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 15 | Royalties | | | | · · · <u> </u> | | | | | | | |
| 16 | Occupancy | 2,548 | 2,548 | | | | | | | | | |
| 17 | Travel | | | | | | | | | | | |
| 18 | Payments of travel or entertainment expenses | | | | | | | | | | | |
| - | for any federal, state, or local public officials | | | | | | | | | | | |
| 19 | Conferences, conventions, and meetings | | | | | | | | | | | |
| 20 | Interest | 21,164 | 21,164 | | | | | | | | | |
| 21 | Payments to affiliates | | | | | | | | | | | |
| 22 | Depreciation, depletion, and amortization | | | | | | | | | | | |
| 23 | Insurance | 3,734 | 3,734 | | | | | | | | | |
| 24 | Other expenses Itemize expenses not covered | | | | | | | | | | | |
| | above (List miscellaneous expenses in line 24e If | | | | | | | | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | | | | | | | | |
| | (A) amount, list line 24e expenses on Schedule O) | | | | | | | | | | | |
| а | REAL ESTATE TAXES | 20,964 | 20,964 | | | | | | | | | |
| b | SCHOLARSHIPS | 15,950 | 15,950 | | | | | | | | | |
| С | REPAIRS & MAINTENCE | 8,550 | 8,550 | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| d | MANAGEMENT FEES | 3,065 | 3,065 | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| | All other expenses | 57 | 70.001 | 57 | | | | | | | | |
| 25 26 | Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the | 79,705 | 79,281 | 424 | 0 | | | | | | | |
| 20 | organization reported in column (B) joint costs | | | | | | | | | | | |
| | from a combined educational campaign and | | | | | | | | | | | |
| | fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720) | | | | | | | | | | | |

| P | art) | Balance Sheet | | | - |
|---------------|----------|---|---------------------------------------|----|----------------------------|
| | <u> </u> | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest bearing | 8,670 | 1 | 40,306 |
| | 2 | Savings and temporary cash investments | 512,550 | 2 | 439,037 |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Receivables from current and former officers, directors, trustees, key | | | |
| | ł | employees, and highest compensated employees. Complete Part II of | | | |
| | | Schedule L | · | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section | | | |
| | | 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing | | | |
| | | employers and sponsoring organizations of section 501(c)(9) voluntary | | | |
| sts | | employees' beneficiary organizations (see instructions) | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | ·=· |
| ⋖ | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or | | | |
| | | other basis Complete Part VI of Schedule D 10a 1,678,537 | | | |
| | 1 | Less accumulated depreciation 10b | 1,366,716 | | 1,678,537 |
| | 11 | Investments—publicly traded securities | | 11 | 252,118 |
| | 12 | Investments—other securities See Part IV, line 11 | | 12 | · |
| | 13 | Investments—program-related See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | 93 | 15 | 93 |
| _ | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 1,888,029 | 16 | 2,410,091 |
| | 17 | Accounts payable and accrued expenses | | 17 | · |
| | 18 | Grants payable | | 18 | · |
| | 20 | Deferred revenue | | 19 | |
| | 21 | Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D | | 20 | |
| | 22 | Payables to current and former officers, directors, trustees, key | | 21 | |
| Liabilities | | employees, highest compensated employees, and disqualified persons. | | | |
| Ē | | Complete Part II of Schedule L | | 22 | |
| Lia | 23 | Secured mortgages and notes payable to unrelated third parties | · · · · · · · · · · · · · · · · · · · | 22 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | 24 | |
| | | parties, and other liabilities not included on lines 17-24) Complete Part X | | | |
| | | of Schedule D | 10,190 | 25 | 9,750 |
| | 26 | Total liabilities. Add lines 17 through 25 | 10,190 | 26 | 9,750 |
| | | Organizations that follow SFAS 117, check here ▶ X and complete | | | |
| es | | lines 27 through 29, and lines 33 and 34. | | | |
| anc | 27 | Unrestricted net assets | 1,877,839 | 27 | 2,400,341 |
| Fund Balances | 28 | Temporarily restricted net assets | | 28 | |
| pq | 29 | Permanently restricted net assets | | 29 | |
| Ŀ | | Organizations that do not follow SFAS 117, check here ▶ and | | | |
| ō | | complete lines 30 through 34. | | | |
| sets | 30 | Capital stock or trust principal, or current funds | | 30 | |
| As | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| Net Assets or | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| _ | 33 | Total net assets or fund balances | 1,877,839 | 33 | 2,400,341 |
| | 34 | Total liabilities and net assets/fund balances | 1,888,029 | 34 | 2,410,091 |

| Form | 990 (2011) KAPPA FOUNDATION | 47-0809384 | | | Pa | ige 12 |
|------|--|--------------------------------------|---|-----|-----|---------------|
| | rt XI Reconciliation of Net Assets | | | | | 35 -= |
| | ` Check if Schedule O contains a response to any ques | tion in this Part XI | | _ | | |
| | | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | | 1 | | | <u> 207</u> |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | | 2 | | | 705 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | | 3 | | | 502 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, lii | ne 33, column (A)) | 4 | 1,8 | 77, | <u>839</u> |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | | 5 | | | |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (| must equal Part X, line 33, | | | | |
| | column (B)) | | 6 | 2,4 | 00, | 341 |
| Pa | rt XII Financial Statements and Reporting | - | | | | |
| | Check if Schedule O contains a response to any ques | tion in this Part XII | | | | |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 X Cash | Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year | or checked "Other," explain in | | | | |
| | Schedule O | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by a | an independent accountant? | | 2a | | X |
| b | Were the organization's financial statements audited by an independen | it accountant? | | 2b | X | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that a | ssumes responsibility for oversight | | | | |
| | of the audit, review, or compilation of its financial statements and selection | ction of an independent accountant? | | 2c | X | |
| | If the organization changed either its oversight process or selection pro | cess during the tax year, explain in | | | | |
| | Schedule O. | | | | | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the final | ncial statements for the year were | | | | |
| | issued on a separate basis, consolidated basis, or both | • | | | | |
| | X Separate basis Consolidated basis Both consolidated | and separate basis | | | | |
| 3a | As a result of a federal award, was the organization required to undergo | • | | | | |
| | the Single Audit Act and OMB Circular A-133? | | | 3a | | х |
| b | If "Yes," did the organization undergo the required audit or audits? If the | e organization did not undergo the | | | | |
| | required audit or audits, explain why in Schedule O and describe any si | - | | 26 | | |

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Part 1

KAPPA FOUNDATION

47-0809384 Reason for Public Charity Status (All organizations must complete this part.) See instructions.

| he | orga | nization is not | a private foundation becaus | se it is: (For lines 1 through 11, | check on | y one box | () | | | | | | | | |
|-----|--------|-----------------|-------------------------------------|---|-------------|--------------------|-----------|------------------|-----------|-------------|---------------------------------------|--------|-------|----|--|
| 1 | | A church, co | nvention of churches, or ass | ociation of churches described | ın sectio | n 170(b)(| 1)(A)(i). | | | | | | | | |
| 2 | \Box | A school des | scribed in section 170(b)(1)(| A)(ii). (Attach Schedule E) | | | | | | | | | | | |
| 3 | \Box | | | ce organization described in se | ction 170 | (b)(1)(A) | (iii). | | | | | | | | |
| 4 | П | | | d in conjunction with a hospital | | | - |)(1)(A)(| iii). Ent | er the h | ospital's na | ame. | | | |
| | | city, and stat | | , | | | | | , | | - | , | | | |
| 5 | | An organizat | on operated for the benefit | of a college or university owned | or operat | ted by a g | ovemm | ental un | ıt descr | ibed ın | | | | | |
| | | section 170 | (b)(1)(A)(iv). (Complete Part | : II) | | | | | | | | | | | |
| 6 | | A federal, sta | ate, or local government or g | overnmental unit described in s | section 1 | 70(b)(1)(<i>A</i> | ۱)(۷). | | | | | | | | |
| 7 | X | An organizat | on that normally receives a | substantial part of its support fr | om a gov | ernmenta | I unit or | from the | e gener | al public | | | | | |
| | _ | described in | section 170(b)(1)(A)(vi). (C | omplete Part II.) | | | | | | | | | | | |
| 8 | | A community | trust described in section ? | st described in section 170(b)(1)(A)(vi). (Complete Part II) | | | | | | | | | | | |
| 9 | | An organizat | ion that normally receives (| 1) more than 33 1/3% of its sup | port from | contributi | ons, me | mbersh | ıp fees, | and gro | oss | | | | |
| | | receipts from | activities related to its exen | npt functions—subject to certain | n exceptio | ns, and (| 2) no mo | ore than | 33 1/3 | % of its | | | | | |
| | | support from | gross investment income ai | nd unrelated business taxable in | ncome (le | ss section | n 511 ta | x) from I | ousines | ses | | | | | |
| | | acquired by t | the organization after June 3 | 0, 1975 See section 509(a)(2) | . (Comple | ete Part III | ١) | | | | | | | | |
| 10 | | An organizat | ion organized and operated | exclusively to test for public saf | ety. See | section 5 | 09(a)(4) | | | | | | | | |
| 11 | | An organizat | ion organized and operated | exclusively for the benefit of, to | perform t | he functio | ns of, o | r to carr | y out th | е | | | | | |
| | | purposes of | one or more publicly support | ed organizations described in s | ection 50 | 9(a)(1) or | section | 509(a)(2 | 2) See | section | 1 | | | | |
| | | 509(a)(3). Ch | neck the box that describes t | he type of supporting organizati | ion and co | omplete li | nes 11e | through | 11h | | | | | | |
| | | a Type | | c Type III-Function | | | d | | e III–O | ther | | | | | |
| е | | By checking | this box, I certify that the org | ganization is not controlled direct | | | one or m | ore disc | qualified | person | ns | | | | |
| | | other than fo | undation managers and other | er than one or more publicly sup | ported or | ganizatioi | ns desci | nbed in s | section | 509(a)(| 1) | | | | |
| | | or section 50 | 9(a)(2) | | | _ | | | | | · | | | | |
| f | | If the organiz | ation received a written dete | ermination from the IRS that it is | a Type I | Type II, | or Type | III supp | orting | | | | | | |
| | | | check this box | | , | , ,, | ,, | | | | | | | | |
| g | | Since Augus | t 17, 2006, has the organiza | tion accepted any gift or contrib | ution fron | n any of th | ne | | | | | | | | |
| _ | | following per | | , ,,, | | • | | | | | | | | | |
| | | | | ontrols, either alone or together | with pers | ons descr | ibed in (| (u) and | | | | Γ | Yes | No | |
| | | | w, the governing body of the | · | | | | () | | | 110 | g(i) | | | |
| | | • • | member of a person describ | • • | | | | | | | | g(i) | | | |
| | | | | described in (i) or (ii) above? | | | | | | | | g(iii) | | | |
| h | | | • • | he supported organization(s) | | | | | | | (111) | 3771 | | | |
| | Name | e of supported | (ii) EIN | (III) Type of organization | (iv) Is the | organization | (v) Did | you notify | (vi) | Is the | (vii) | Amou | nt of | | |
| • | | janization | (.,, = | (described on lines 1–9 | | sted in your | the orga | nization in | organiza | tion in col | | suppor | | | |
| | | | | above or IRC section | governing | document? | | of your port? | | zed in the | | | | | |
| | | | | (see instructions)) | Yes | No | Yes | No | Yes | No | | | | | |
| A) | | | | | - | | | | 1 | | | | | | |
| • | | | | | | | | | | | | | | | |
| B) | | | | | | | | j | | | | | | | |
| - | | | | | | | | | | | | | | | |
| C) | | | | | | | | | | | | | | | |
| | | | | | ļ | | | | | - | · · · · · · · · · · · · · · · · · · · | | | | |
| D) | | | | | | | | | | | | | | | |
| E) | | | | | <u> </u> | | | | | | | | | | |
| | | | | | | ļ | | | <u> </u> | | | | | | |
| ota | | | | | | | | | | | | | | | |
| ULT | | | L | • | | + | | 4 | a a | | | | | | |

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

Schedule A (Form 990 or 990-EZ) 2011

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | tion A. Public Support | Tallo to qualify | dilder the teste | noted below, p | olease complet | or art iii.) | | | | |
|---------|---|----------------------|-----------------------|------------------------|------------------------|--------------|-------------|--|--|--|
| | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total | | | |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 18,398 | 39,844 | 244,994 | 330,447 | 436,712 | 1,070,395 | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | | | | |
| 4 | Total. Add lines 1 through 3 | 18,398 | 39,844 | 244,994 | 330,447 | 436,712 | 1,070,395 | | | |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount | | | | | | | | | |
| _ | shown on line 11, column (f) | | | | | | 314,804 | | | |
| Sec | Public support. Subtract line 5 from line 4 stion B. Total Support | | | | | <u> </u> | 755,591 | | | |
| | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total | | | |
| 7 | Amounts from line 4 | 18,398 | 39,844 | 244,994 | 330,447 | 436,712 | 1,070,395 | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 21,584 | 26,178 | 17,433 | 17,197 | 73,641 | 156,033 | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 1,226,428 | | | |
| 12 | Gross receipts from related activities, etc | (see instructions) | | | | 12 | 91,855 | | | |
| 13 | First five years. If the Form 990 is for the | - | t, second, third, fou | ırth, or fifth tax yea | ar as a section 501 | (c)(3) | . — | | | |
| <u></u> | organization, check this box and stop her | | 1000 | | | | > | | | |
| | tion C. Computation of Public St | • • | | - (0) | | | | | | |
| 14 | Public support percentage for 2011 (line 6 | | | n (t)) | | 14 | 61.61% | | | |
| 15 | Public support percentage from 2010 Sch | | | 12 and line 44 is 2 | 22 4/20/ 25 | 15 | 64.21% | | | |
| IVa | 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | | | | |
| b | box and stop here . The organization qualifies as a publicly supported organization 33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, | | | | | | | | | |
| | check this box and stop here . The organi | | | | 0 10 00 1/0 /0 0/ 1110 | 510, | ▶ □ | | | |
| 17a | 10%-facts-and-circumstances test—20° | | | | a. or 16b. and line | 14 is | | | | |
| | 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in | | | | | | | | | |
| | Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported | | | | | | | | | |
| | organization | · | | | | | | | | |
| b | 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line | | | | | | | | | |
| | 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. | | | | | | | | | |
| | Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly | | | | | | | | | |
| | supported organization | | | | | | ▶ _ | | | |
| 18 | Private foundation. If the organization di | d not check a box of | on line 13, 16a, 16l | o, 17a, or 17b, che | eck this box and se | ee | . — | | | |
| | instructions | | | | | | ▶ [_ | | | |

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

| | If the organization falls to | quality under t | ne tests listed t | pelow, please c | omplete Part I | .) | |
|-------|---|---------------------------------------|-----------------------|------------------------|---------------------|----------|-------------|
| | tion A. Public Support | r | T | | T | | |
| Caler | ndar year (or fiscal year beginning in) ▶ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | : | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | -· |
| 8 | Public support (Subtract line 7c from line 6.) | | | | | | |
| | tion B. Total Support | <u> </u> | | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | • | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | · |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12) | | <u> </u> | | | | |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop her | - | st, second, third, fo | urth, or fifth tax yea | ar as a section 50° | 1(c)(3) | ▶ [] |
| Sec | tion C. Computation of Public Su | upport Percen | tage | | | | |
| 15 | Public support percentage for 2011 (line 8 | , column (f) divide | d by line 13, colum | nn (f)) | | 15 | % |
| 16 | Public support percentage from 2010 Sch | | | | | 16 | % |
| Sec | tion D. Computation of Investme | | | | · - · | | |
| 17 | Investment income percentage for 2011 (I | · · · · · · · · · · · · · · · · · · · | - | , column (f)) | | 17 | %_ |
| 18 | Investment income percentage from 2010 | | | | | 18 | %_ |
| 19a | 33 1/3% support tests—2011. If the orga | | | | | | _ |
| _ | 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization | | | | | | |
| b | 33 1/3% support tests—2010. If the organization did not check a box on line 19 a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | |
| 20 | line 18 is not more than 33 1/3%, check the Private foundation. If the organization die | | = | - | | - | |
| 20 | r i ivate i outigation. Il the organization di | a HOLCHECK & DOX | on mic 14, 18a, 0f | TOD, CHECK HIS DO | n and see mistruct | U113 | |

Schedule A (Form 990 or 990-EZ) 2011 KAPPA FOUNDATION

47-0809384

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990. Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Open to Public

OMB No 1545-0047

Department of the Treasury ► Attach to Form 990. ► See separate instructions. Internal Revenue Service Inspection Name of the organization Employer identification number KAPPA FOUNDATION 47-0809384 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990. Part VIII. line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

a Revenues included in Form 990, Part VIII, line 1

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

| - | Double accession of dead of chaptering b | | ,, |
|----|--|-------------|---|
| b | Permanent endowment ▶ | % | |
| С | Temporarily restricted endowment ▶ | | % |
| | The percentages in lines 2a, 2b, and 2c | should equa | 1 100% |
| 3а | Are there endowment funds not in the po | ssession of | the organization that are held and administered for the |
| | organization by | | |
| | (i) unrelated organizations | | |

| | Yes | No |
|--------|-----|----|
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds

(ii) related organizations

| Part VI Land, Buildings, and Equip | ment. See Form 990 | , Part X, line 10. | | |
|---|-----------------------------|-------------------------|-----------------|----------------|
| Description of property | (a) Cost or other basis | (b) Cost or other basis | (c) Accumulated | (d) Book value |
| | (investment) | (other) | depreciation | |
| 1a Land | | 10,000 | | 10,000 |
| b Buildings | | 1,668,537 | | 1,668,537 |
| c Leasehold improvements | | | | |
| d Equipment | _ | | | |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must ed | qual Form 990, Part X, colu | mn (B), line 10(c)) | • | 1,678,537 |

| Part VII | Investments—Other Securities. See | Form 990, Part X, line 12. | rage |
|----------------|--|----------------------------|--|
| | (a) Description of security or category | (b) Book value | (c) Method of valuation |
| | (including name of security) | | Cost or end-of-year market value |
| (1) Financial | derivatives | | |
| (2) Closely-he | eld equity interests | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| (l) | (h) 15 000 B 1 V 1 (D) II 10 | | We will be a second of the sec |
| Part VIII | n (b) must equal Form 990, Part X, col (B) line 12 | | |
| Fait VIII | Investments—Program Related. See | | |
| | (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| (1) | | | Cost of end-di-year market value |
| (1) | | | |
| (3) | | | |
| (4) | · | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | | | |
| | n (b) must equal Form 990, Part X, col. (B) line 13 | • | 7 |
| Part IX | Other Assets. See Form 990, Part X, II | | |
| | (a) De | scription | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| _(7) | | | |
| (8) | | | |
| (9) | | | |
| <u>(10)</u> | | | |
| | n (b) must equal Form 990, Part X, col. (B) line 15. | | > |
| Part X 1. | Other Liabilities. See Form 990, Part 3 | | |
| | income taxes | (b) Book value | |
| (2) DEPOS | | 9,750 | |
| | R BANK LOANS | 3,750 | |
| (4) | | | |
| (5) | | | |
| (6) | ···· | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | - | | |
| (11) | - | | |
| | n (b) must equal Form 990, Part X, col. (B) line 25. | ▶ 9,750 | |
| | C 740) Footnote In Part XIV, provide the text of the | | statements that reports the |

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| che | dule D (Form 990) 2011 KAPPA FOUNDATION | | -0809384 | Page 4 |
|-----|--|------------------|------------------|--------|
| Pa | rt XI Reconciliation of Change in Net Assets from Form 990 | to Audited Finan | cial 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 a | ind 9 | 10 | |
| Pa | rt XII Reconciliation of Revenue per Audited Financial State | ments With Rever | nue per Return | - |
| 1 | Total revenue, gains, and other support per audited financial statements | <u> </u> | 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 | 2b | | |
| С | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIV.) | 2d | | |
| 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.) | 4b | | |
| C | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | | 5 | |
| Pa | rt XIII Reconciliation of Expenses per Audited Financial Stat | ements With Expe | enses 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 | 2a | | |
| b | Prior year adjustments | 2b | | |
| С | Other losses | 2c | | |
| d | Other (Describe in Part XIV) | 2d | | |
| е | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | 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) | 4b | | |
| 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 | |

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.

Part XIV Supplemental Information

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 **2011**Open to Public

Inspection

Name of the organization

KAPPA FOUNDATION

Employer identification number 47-0809384

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 OFFICERS REVIEW FORM 990 BEFORE FILING

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation GOVERNING DOCUMENTS ARE AVAILABLE FROM SEC/TREASURER