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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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.

OMB No 1545-1150

2012**Open to Public Inspection**

A For the 2012 calendar year, or tax year beginning January 1, 2012, and ending December 31, 2012

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

C Name of organization
Circle of Sisterhood Foundation, Inc
 Number and street (or P O box, if mail is not delivered to street address) Room/suite
8137 Menlo Court East Drive
 City or town, state or country, and ZIP + 4
Indianapolis, IN 46240

D Employer identification number
27-2393582

E Telephone number
317-259-7307

F Group Exemption Number ►

G Accounting Method: ☐ Cash ☒ Accrual Other (specify) ►

I Website: ► **www.circleofsisterhood.org**

J Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

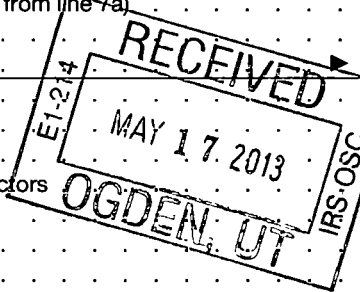
H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 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. ► \$ **115541**

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		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1	92766	18	Excess or (deficit) for the year (Subtract line 17 from line 9)
2	Program service revenue including government fees and contracts	2	0	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)
3	Membership dues and assessments	3	0	19	53831
4	Investment income	4	0	20	Other changes in net assets or fund balances (explain in Schedule O)
5a	Gross amount from sale of assets other than inventory	5a	0	20	0
5b	Less: cost or other basis and sales expenses	5b	0	21	Net assets or fund balances at end of year Combine lines 18 through 20
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0	21	86098
6	Gaming and fundraising events				
6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0		
6b	Gross income from fundraising events (not including \$ 92766 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	22775		
6c	Less: direct expenses from gaming and fundraising events	6c	9656		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	13119		
7a	Gross sales of inventory, less returns and allowances	7a	0		
7b	Less: cost of goods sold	7b	0		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0		
8	Other revenue (describe in Schedule O)	8	0		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	105885		
10	Grants and similar amounts paid (list in Schedule O)	10	50844		
11	Benefits paid to or for members	11	0		
12	Salaries, other compensation, and employee benefits	12	0		
13	Professional fees and other payments to independent contractors	13	6650		
14	Occupancy, rent, utilities, and maintenance	14	1112		
15	Printing, publications, postage, and shipping	15	2800		
16	Other expenses (describe in Schedule O)	16	13324		
17	Total expenses. Add lines 10 through 16	17	73618		



For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2012)

SCANNED JUN 11 2013

25 69

Part II Balance Sheets (see the instructions for Part II)

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

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	57094	22 80191
23	Land and buildings	0	23 0
24	Other assets (describe in Schedule O)	622	24 6383
25	Total assets	57716	25 86574
26	Total liabilities (describe in Schedule O)	3885	26 476
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) . . .	53831	27 86098

Part III	Statement of Program Service Accomplishments (see the instructions for Part III)
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Check if the organization used Schedule O to respond to any question in this Part III . . ☐

What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28	Build On's Golbal School Construction Program will faciliate the building of C of S funded school in Senegal's western Fatick region in Africa. This initial grant is to activate their mission on this African initiative to provide children (50% girls) in Senegal access to quality education (Grants \$ 30000) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	28a	30000
29	Girls Inc Smart College and Career Planning program servicing Indianapolis Indiana. Allows girls to interact with professional women from a variety of fields These women encourage education and help young women set future goals. This grant will provide 143 hours of programming. (Grants \$ 5000) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	29a	5000
30	Girl Forward is committed to increase opportunities and educational achievement amoung refgee girls harnessing the unique portential of girls to end cycles of proverty This grant will support 20 refugee girls at Camp Girl Forward to provide summer english, math, computer skills and enrichment activities. (Grants \$ 2500) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	30a	2500
31	Other program services (describe in Schedule O) (Grants \$ 13344) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	31a	13344
32	Total program service expenses (add lines 28a through 31a) ▶	32	50844

Part IV **List of Officers, Directors, Trustees, and Key Employees** List each one even if not compensated (see the instructions for Part IV)

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

[illegible]

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		<input checked="" type="checkbox"/>
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		<input checked="" type="checkbox"/>
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		<input checked="" type="checkbox"/>
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		<input checked="" type="checkbox"/>
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b 0	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a 0	
b Gross receipts, included on line 9, for public use of club facilities	39b 0	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	0	
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	0	
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		<input checked="" type="checkbox"/>
41 List the states with which a copy of this return is filed ▶ Indiana		
42a The organization's books are in care of ▶ Virginia Carroll Telephone no ▶ 317-259-7307 Located at ▶ 8137 Menlo Court East Drive; Indianapolis, IN ZIP + 4 ▶ 46240		
b 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)?		<input checked="" type="checkbox"/>
If "Yes," enter the name of the foreign country: ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside the U.S.?		<input checked="" type="checkbox"/>
If "Yes," enter the name of the foreign country: ▶ N/A		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
c Did the organization receive any payments for indoor tanning services during the year?		<input checked="" type="checkbox"/>
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
45b 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)		<input checked="" type="checkbox"/>

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

	Yes	No
46		<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations 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 ☐

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		<input checked="" type="checkbox"/>

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		<input checked="" type="checkbox"/>
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		<input checked="" type="checkbox"/>
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b If "Yes," was the related organization a section 527 organization?

49b		
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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 title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

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

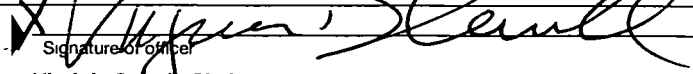
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

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 5/6/13
	Virginia Carol, Chairman	Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> 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 A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

Employer identification number

Cirlce of Sisterhood Foundation, Inc

27-2393582

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		✓
11g(ii)		✓
11g(iii)		✓
- (ii) A family member of a person described in (i) above?

11g(ii)		✓
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- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

11g(iii)		✓
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- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) N/A									0
(B) N/A									0
(C) N/A									0
(D) N/A									0
(E) N/A									0
Total									0

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	21039	75575	105885	202499
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	0	0	21039	75575	105885	202499
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)						25353
6 Public support. Subtract line 5 from line 4.						177146

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	0	0	21039	75575	105885	202499
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0	0	0
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
11 Total support. Add lines 7 through 10						202499
12 Gross receipts from related activities, etc. (see instructions)					12	202499
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a 33¹/₃% support test—2012. 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 <input type="checkbox"/>		
b 33¹/₃% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 ¹ / ₃ % or more, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2011. 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 <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

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 G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

Employer identification number

Circle of Sisterhood Foundation, Inc.

27-2393582

Part I

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

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

- | | |
|---|---|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 None						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

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

See attached

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

		(a) Event #1 SEPC (event type)	(b) Event #2 (event type)	(c) Other events 9 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	17613		5162	22775
	2 Less: Contributions	0		0	0
	3 Gross income (line 1 minus line 2)	17613		5162	22775
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	720	0	2562	3282
	7 Food and beverages	0	0	106	106
	8 Entertainment	133	0	0	133
	9 Other direct expenses	3131	0	3004	6135
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(9656)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				13119

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				0
Direct Expenses	2 Cash prizes				0
	3 Noncash prizes				0
	4 Rent/facility costs				0
	5 Other direct expenses				0
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				(0)
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				0

9 Enter the state(s) in which the organization operates gaming activities: None

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☒ No

b If "No," explain: Does not operate gaming activities

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☒ No

b If "Yes," explain: _____

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☒ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☒ No
- 13** Indicate the percentage of gaming activity operated in.
- | | | |
|--------------------------------------|------------|-----|
| a The organization's facility | 13a | 0 % |
| b An outside facility | 13b | 0 % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ N/AAddress ▶ N/A

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☒ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ 0 and the amount of gaming revenue retained by the third party ▶ \$ 0
- c** If "Yes," enter name and address of the third party:

Name ▶ N/AAddress ▶ N/A**16** Gaming manager information:Name ▶ N/AGaming manager compensation ▶ \$ 0Description of services provided ▶ N/A☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☒ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 0

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

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

2012

**Open to Public
Inspection**

Name of the organization

Circle of Sisterhood Foundation, Inc.

Employer identification number

27-2393582

Schedule Attached

Schedule G for Form 990 and 990EZ

27-2393582

Fundraising Activities		Part I	Item 3	Page 1							
Alabama, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming											
Fundraising Events		Part II	Page 2								
	AFA Annual	AFLV Central	AFLV West	NGLA	NPC Annual	Caro - \$2012 In	Mizzou	SJSU Walk-a-	Winter with the	SEPC	Total Fund Raising
Total Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 290	\$ 1,644	\$ 1,888	\$ 1,340	\$ 17,613	\$ 22,776
Gross Profit	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 290	\$ 1,644	\$ 1,888	\$ 1,340	\$ 17,613	\$ 22,776
Expenses											
60300 Awards and Grants											
68310 Rental/Facility Costs	\$ 515	\$ 2,047								\$ 720	\$ 3,282
68335 Food and beverage	\$ 63			\$ 53						\$ 133	\$ 106
68330 Meals & Entertainment											\$ 133
Other direct expenses											
62130 Fundraising Fees										\$ 70	\$ 70
65010 Books, Subscriptions, Reference	\$ 99									\$ 21	\$ 99
65040 Supplies											\$ 21
60930 Professional Dues	\$ 599										\$ 599
65110 Advertising Expenses	\$ 225	\$ 249	\$ 125	\$ 125	\$ 430					\$ 528	\$ 1,682
68320 Airfare				\$ 120						\$ 933	\$ 1,053
68340 Mileage, taxi, tolls & parking	\$ 3	\$ 109		\$ 103						\$ 129	\$ 344
68350 Hotel and lodging	\$ 205	\$ 612								\$ 1,450	\$ 2,267
Total Other direct expenses	\$ 1,131	\$ 969	\$ 125	\$ 348	\$ 430	\$ -	\$ -	\$ -	\$ -	\$ 3,131	\$ 6,135
Total Expenses	\$ 1,698	\$ 3,017	\$ 125	\$ 401	\$ 430	\$ -	\$ -	\$ -	\$ -	\$ 3,966	\$ 9,656
Net Income	\$ (1,698)	\$ (3,017)	\$ (126)	\$ (401)	\$ (430)	\$ 290	\$ 1,644	\$ 1,888	\$ 1,340	\$ 13,628	\$ 13,119

Supplemental Information to Form 990 or 990-EZ Tax Year 2012
Schedule O

Circle of Sisterhood Foundation, Inc.

27-2393582

Form 990EZ	Expenses	Page 1	Line 10
Build On	30,000		
Girls Inc.	5,000		
Girl Forward	2,500		
Shining Hope for Communities	2,500		
Bead for Life	2,250		
College Mentors for Kids	2,000		
EGBOK (Everything's Gonna Be OK Mission)	2,000		
Love146, Inc	2,000		
Mission Dispatch	1,794		
She's the First	800		
	<u>50,844</u>		

Form 990EZ	Expenses	Page 1	Line 16
Insurance - Liability, D and O	1,112		
Business Registration Fees	1,427		
Professional Dues	400		
Advertising Expenses	6,849		
Bank Fees	950		
Conference, Convention, Meeting	161		
Airfare	1,554		
Meals & Entertainment	-		
Meals subject to 50% deduction	229		
Mileage, taxi, tolls & parking	477		
Hotel and lodging	165		
	<u>13,324</u>		

Form 990EZ	Balance Sheets	Page 2	Line 24&26
		<u>2011</u>	<u>2012</u>
Line 24 Other assets	Accounts Receivable	622	6383
Line 26 Total Liabilities	Accounts Payable	3885	476

Supplemental Information to Form 990 or 990-EZ Tax Year 2012
Schedule O

Circle of Sisterhood Foundation, Inc.

27-2393582

Form 990EZ	Other Program Services	Page 2	Line 31
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Shining Hope for Communities 2,500

Shining Hope for Communities combats extreme poverty and gender inequity by linking girls' education to a comprehensive set of health and social services for all in the Kibera slum of Nairobi, Kenya. In August 2009, Shining Hope founded The Kibera School for Girls (KSG), the first entirely free primary school for girls in Kibera. This grant is for general program support at the Kibera School for Girls (KSG). KSG provides a superior education, two daily meals, uniforms, health care, and school supplies all free of charge to Kibera's brightest and most disadvantaged girls. KSG serves 100 students in pre-K through 3rd grade and is expanding to follow our students through 8th grade.

Bread for Life 2,250

Bread for Life's mission is *to eradicate extreme poverty by creating bridges of understanding between impoverished Africans and concerned citizens of the world*. This grant is funding the secondary education of 6 girls in Northern Uganda – tuition, school supplies, mattress, uniform, staff support, and empowerment activities.

College Mentors for Kids 2,000

College Mentors for Kids is in strong alignment with Circle of Sisterhood's priorities around educational engagement for at-risk girls as a means to leaving poverty, while getting college student women involved in service to their community. College Mentors pairs first- through eighth-grade children with local college student mentors. Through weekly after-school activities, mentors help their "Little Buddies" understand higher education opportunities, as well as the importance of self-reliance, self-confidence, taking initiative at school, and making wise academic and social choices. With the help of their mentor, these at-risk youth are exposed to the opportunities of higher education. The data shows that 77% of kids report trying harder in school. The Circle of Sisterhood grant will provide funding for two pairs for an academic year.

EGBOK (Everything's Gonna Be OK Mission) 2,000

Through EGBOK Mission, we provided a scholarship for an underprivileged young woman, Oeurn Sokea, in Cambodia. She received the highest level of vocational education possible. The grant has empowered Sokea to support herself as a hospitality professional within the growing tourism industry of the country.

Love146, Inc 2,000

Love 146's mission is to rescue sex trafficked victims and reintegrating them into society. How many times does a girl need to be rescued before she can be free? Love 146 believes the answer is until she is given access to education. Love146 works to end child sex slavery through Prevention and Aftercare. Love146 believes in helping grow the movement of abolition while providing thoughtful and impactful solutions. This grant is supporting the Educational Tract of the Aftercare Reintegration Program at the Round Home project, sponsoring 5 girls.

Mission Dispatch 1,794

The EKARI Foundation's mission is *to provide the resources necessary for the poor and excluded to emerge from poverty on their own*. This grant is providing six girls in Malawi with tuition, boarding fees, meal program, a uniform, transport home during holidays, basic necessities such as soap, feminine products, notebooks, and an allowance for additional school needs such as a calculator.

She's the First 800

She's the First works *to sponsor girls' education in the developing world*. This grant is sponsoring a comprehensive year of education for a student in India, who will then lead her peers' participation in one workshop at the XX Summit, via Skype. She would be a She's the First scholar in India. The sponsorship at the Shanti Bhavan school in India includes room, board, clothing, medical expenses, and all additional necessities at the boarding school.

13,344

Circle of Sisterhood Foundation, Inc.

Balance Sheet

As of December 31, 2012

	Total
ASSETS	
Current Assets	
Bank Accounts	
10000 Cash	
10100 BMO Harris Bank (M&I Bank)	76,354 03
10200 Pay Pal	271 64
10300 Crowdrise	3,565 00
Total 10000 Cash	<u>\$ 80,190.67</u>
Total Bank Accounts	<u>\$ 80,190.67</u>
Accounts Receivable	
11000 Accounts Receivable	5,404 16
Total Accounts Receivable	<u>\$ 5,404.16</u>
Other current assets	
12000 Undeposited Funds	0 00
13000 Miscellaneous Receivables	979 25
Total Other current assets	<u>\$ 979.25</u>
Total Current Assets	<u>\$ 86,574.08</u>
TOTAL ASSETS	<u>\$ 86,574.08</u>
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
20000 Accounts Payable	476 25
Total Accounts Payable	<u>\$ 476.25</u>
Total Current Liabilities	<u>\$ 476.25</u>
Total Liabilities	<u>\$ 476.25</u>
Equity	
32000 Unrestricted Net Assets	53,830 55
Net Income	32,267 28
Total Equity	<u>\$ 86,097.83</u>
TOTAL LIABILITIES AND EQUITY	<u>\$ 86,574.08</u>

Tuesday, Jan 29, 2013 11 30 54 PM PST GMT-5 - Accrual Basis

Circle of Sisterhood Foundation, Inc.
Profit & Loss
December 31, 2012

	<u>Total</u>
Income	
43400 Direct Public Support	
43410 Corporate Contributions	5,527 91
43420 Association Contributions	43,043 77
43421 Alumnae Panhellenic Contributions	1,207 67
43422 Collegiate Panhellenic Contributions	37,241 02
43423 Alumnae Chapter Contributions	456 00
43424 Collegiate Chapter Contributions	1,665 45
43425 National Organization	150 00
Total 43420 Association Contributions	<u>\$ 83,763.91</u>
43450 Individual Contributions	26,249 33
Total 43400 Direct Public Support	<u>\$ 115,541.15</u>
Total Income	<u>\$ 115,541.15</u>
Gross Profit	<u>\$ 115,541.15</u>
Expenses	
60300 Awards and Grants	
60320 Cash Awards and Grants	50,843 75
Total 60300 Awards and Grants	<u>\$ 50,843.75</u>
60900 Business Expenses	
60920 Business Registration Fees	1,427 15
60930 Professional Dues	999 00
Total 60900 Business Expenses	<u>\$ 2,426.15</u>
62100 Contract Services	
62130 Fundraising Fees	776 09
62140 Legal Fees	279 72
62150 Outside Contract Services	5,664 12
Total 62100 Contract Services	<u>\$ 6,719.93</u>
65000 Operations	
65010 Books, Subscriptions, Reference	560 70
65020 Postage, Mailing Service	858 08
65030 Printing and Copying	1,102 42
65040 Supplies	252 93
65050 Telephone, Telecommunications	146 57
Total 65000 Operations	<u>\$ 2,920.70</u>
65100 Other Types of Expenses	
65110 Advertising Expenses	8,531 02
65120 Insurance - Liability, D and O	1,112 00
65140 Bank Fees	949 66
65150 Reimbursable Expense	0 00
Total 65100 Other Types of Expenses	<u>\$ 10,592.68</u>
68300 Travel and Meetings	
68310 Conference, Convention, Meeting	3,442 74
68320 Airfare	2,606 93
68330 Meals & Entertainment	133 35
68335 Meals subject to 50% deduction	335 26
68340 Mileage, taxi, tolls & parking	821 45
68350 Hotel and lodging	2,430 93
Total 68300 Travel and Meetings	<u>\$ 9,770.66</u>
Total Expenses	<u>\$ 83,273.87</u>
Net Income	<u>\$ 32,267.28</u>