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SCANNED SEP 2 0 2014

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

<u>А , Е</u>	or the 2	013 calendar year, or tax year beginning JUL 1, 2013 and ending	JUN 30, 201	.4
Вс	heck if oplicable	C Name of organization	D Employer iden	tification number
X	Address change	PHI KAPPA TAU, ALPHA TAU CHAPTER		
	Name change	Doing Business As	15-	0537019
]Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
<u>_</u>	Termin- ated	Clo Sciarabba Walker & Co, 410 E. Upland Rd.	607	-272-5550
	Amended return	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	404,125.
_	Applica- tion pending	ITHACA, NY 14850	H(a) Is this a group	
		F Name and address of principal officer.LAWRENCE NAULT	for subordina	
	·	SAME AS C ABOVE	H(b) Are all subordinate	
		ppt status: $501(c)(3)$ \times $501(c)(7)$ (insert no.) $4947(a)(1)$ or $501(c)(1)$ or $101(c)(2)$		n a list (see instructions)
			H(c) Group exemp	M State of legal domicile: NY
		Summary	al of formation. 1950	WI State of legal dofficile. 14 1
		riefly describe the organization's mission or most significant activities PROVIDE I	HOUSING AND	FELLOWSHIP
Activities & Governance		O MATRICULATED UNDERGRADUATE MEMBERS OF PHI		
rna		neck this box if the organization discontinued its operations or disposed of m		
ove		umber of voting members of the governing body (Part VI, line 1a)		3 4
Š	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4 4
es {	5 To	otal number of individuals employed in calendar year 2013 (Part V, line 2a)		51
viti	6 To	otal number of volunteers (estimate if necessary)		6 4
Acti	7 a To	otal unrelated business revenue from Part VIII, column (C), line 12	<u> -</u>	7a 0.
	b N	et unrelated business taxable income from Form 990-T, line 34	-	7b 0.
		-	Prior Year	Current Year
Revenue	l	ontributions and grants (Part VIII, line 1h)		157.
	l	ogram service revenue (Part VIII, line 2g)	428,410	
	l	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		
	l	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,245.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	428,410	
		rants and similar amounts paid (Part IX, column (A), lines 1-3)	87,487	
		enefits paid to or for members (Part IX, column (A), line 4)		0.
Expenses		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	29,505	30,087.
)eu		rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25)		0.
Ä		otal fundraising expenses (Part IX, column (D), line 25) ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	358,640	350,995.
	1 11		475,632	
	19 R	otal expenses Aptilines 3-17 (must equal Part IX, column (A), line 25)	-47,222	
- Se	10		Beginning of Current Ye	
ages	20	tal assets (Part X, line 16)	178,729	
See See	21 To	otal liabilities (Part-X,-line-26)	30,138	
Net Assets or Fund Balances	22 N	et assets of tund balances Subtract line 21 from line 20	148,591	
Pa	irt II 🖟	Signature Block		
		es of perjury, I declare that I have examined this return, including accompanying schedules and stat		f my knowledge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prepare	arer has any knowledge.	
		2.J. Marly	9/8/	77
Sig	n J	Signature of officer	Date	
Her	e	LAWRENCE NAULT, TREASURER		
		Type or print name and title	Data	CTI DILL
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid		AROLYN AUSTIN (avolus Husty		P01433679
Prep	<u> </u>	irm's name SCIARABBA WALKER & CO., LLP	Firm's EIN	16-1071694
Use	ONLY	irm's address 410 EAST UPLAND ROAD		-07 070 EEE0
	. Ab = 170	ITHACA, NY 14850	Phone no.	507-272-5550
<u>мау</u>	tne IRS	discuss this return with the preparer shown above? (see instructions)		X Yes No

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

	n 990 (2013) PHI KAPPA TAU, ALPHA TAU CHAPTER art III Statement of Program Service Accomplishments	15-0537019	Page 2
-	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission.		
	SEE BELOW.		
			
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	X No
_	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as in Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
	revenue, if any, for each program service reported	s, the total expenses, t	2110
4a		\$)
	PROVIDE HOUSING AND FELLOWSHIP TO MATRICULATED UNDERGRAD	UATE MEMBER	S OF
	PHI KAPPA TAU AT CORNELL UNIVERSITY.		
	-		
4b	(Code) (Expenses \$ including grants of \$) (Revenue	•	
	(Code) (Expenses a) (Nevenue	Ψ	′
			
			
4c	(Code) (Expenses \$) (Revenue	·\$)
			
			
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses		00 (5515)
		Form 9	90 (2013)

332002 10-29-13

_	le the assessment of the state of the state of 504 ()(0) and 507 ()(4) (state of the state of		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			v
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	1_		<u>X</u> _
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2_		
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	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	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			37
44	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, VIII, VIII, IX, or X as applicable			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a		Х
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110		
_	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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII 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
D	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	145		
	foreign organization? 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 other assistance to			
	or for foreign individuals? 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 Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	<u> </u>	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	000	(0010)
		Form	990	つ013)

Note. All Form 990 filers are required to complete Schedule O

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Part V . Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
			`		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	(
С	Did the organization comply with backup withholding rules for reportable payments to vendors and i		ble gaming	1		
	(gambling) winnings to prize winners?		3	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1				
	filed for the calendar year ending with or within the year covered by this return	2a	1	j		
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)	•			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	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	Accou	nts.	ļ		
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action	•	5b		_X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		_X_
þ	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	r gifts	1		
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			İ		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	rovided to the payor?	7a_		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uıred	ļ		
	to file Form 8282?		1	7c	<u> </u>	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		4		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		ct?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F			<u>7g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization approximation of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, airplanes, or other vehicles, did the organization are size to the contribution of cars, boats, and the contribution of cars, and the cars,			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ie during the year?	8	$\vdash \vdash \vdash$	
9	Sponsoring organizations maintaining donor advised funds.			١.		
	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?			9a	\vdash	
ь 10	·			9b		
	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a	4,800			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	0,	1		
11	Section 501(c)(12) organizations. Enter:	וטט		1		
а	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against			1		
	amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which the			}		
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c]		
l4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		
			<u> </u>	Form	990	(2013)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

	,,,			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year [6] these are material differences and the second of the			
	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 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
2	officer, director, trustee, or key employee?	2_		<u> X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	,		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 become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		11	
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b	Х	:
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b		х
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 Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	<u> </u>
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		
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		
13	Did the organization have a written whistleblower policy?	13		<u>X</u> _
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?	۱		- T
	3	15a		X
D	Other officers or key employees of the organization	15b		_
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ioa	taxable entity during the year?	46.		X
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		 ^
b	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		
Sec	tion C. Disclosure	IOD		
<u> 17</u>	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) (- availab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	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 organiza	tion.	·	
	SCIARABBA WALKER & CO., LLP - 607-272-5550			
	410 E UPLAND RD., ITHACA, NY 14850			

Form	990	(2013)	
	330	120131	

PHI KAPPA TAU, ALPHA TAU CHAPTER

15-0537019

Page 7

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

Check if Schedule C	contains a response	or note to an	v line in this Part VII
Officer if Confedere C	CUITAILIS A FESDULISE	OI HOLE LO AH	v III le III Willo Fait 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

X Check this box if neither the organization n	or any related	organization compens			nper	nsat	ed any current officer, o	lirector, or trustee		
(A)	(B)		(C)		(D)	(E)	(F)			
Name and Title	Average	(do		Pos	ıtıor	l than	one	Reportable	Reportable	Estimated
	hours per	box	ox, unless person is both an fficer and a director/trustee)			is bot	h an	compensation	compensation	amount of
	week (list any					1	T	from the	from related organizations	other compensation
	hours for	Individual trustee or director				Ð		organization	(W-2/1099-MISC)	from the
	related	iee or	stee			ensate		(W-2/1099-MISC)	(** 27 : 000 111100)	organization
	organizations	l trus	nal tr		oyee	ompe				and related
	below	Ividua	Institutional trustee	Officer	E E	Highest compensated employee	Former			organizations
	line)	Ē	三	₹	ş	훈통	횬			
(1) JAVIER ORITZ	1.00				ł				_	
PRESIDENT	1 00	X	_	X				0.	0.	0.
(2) NITKIN RAJINKANTH	1.00		1							_
VICE PRESIDENT	4 00	X		X		ļ .	ļ	0.	0.	0.
(3) LAWRENCE NAULT	1.00					ļ				
TREASURER	1 00	X		X				0.	0.	0.
(4) ISAAC CORNELL	1.00	l l								
SECRETARY		X		X	-	<u> </u>	<u> </u>	0.	0.	0.
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	(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	itee or director	not cl	Posi heck ss pe	rson irecto	Highest compensated the population of the property of the prop	n an lee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimat amount other compens from the organiza and rela organizat	ation ne tion
		(list any hours for related organizations below							the organization	organizations	compens from the organiza and rela	ation ne tion ted
												_
					<u>-</u> .							
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					-							
			-									
	ib-total	U Continu A	<u>I</u>	!	L	<u> </u>		<u> </u>	0.	0.		0.
d To	tal from continuation sheets to Part V tal (add lines 1b and 1c)								0.	0.		0.
	tal number of individuals (including but r mpensation from the organization	ot limited to th	nose	liste	ed at	bov	e) wh	no re	eceived more than \$100	0,000 of reportable	Tv	0
	d the organization list any former officer,			e, ke	y er	nplo	yee,	orl	highest compensated e	employee on	Yes	
4 Fo	e 1a? If "Yes," complete Schedule J for s r any individual listed on line 1a, is the si d related organizations greater than \$15	um of reportab	le c							the organization	3	X
5 Di	d any person listed on line 1a receive or andered to the organization? If "Yes," con	accrue compe	nsat	ion f	rom	any	unr unr			ridual for services	5	X
	B. Independent Contractors	ipiete Scriedui		-		pers	3011					1 42
	omplete this table for your five highest co e organization. Report compensation for										ation from	
	(A)		rear	enui	ng v	VILII	OI W	10111	(B)		(C)	
	Name and business	address	N	INC	<u> </u>				Description of	services	Compensati	on
	<u>-</u>											
											· = 1	
	·							1				
	tal number of independent contractors (-	not li	mite	d to		se la	sted	above) who received r	more than		

		Check if Schedule O conta	ains a response	or note to any line	in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts str	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
S, E	С	Fundraising events	1c	,				
	d	Related organizations	1d					
ë.Ë	е	Government grants (contribut	ions) 1e			Ì		
is	f	All other contributions, gifts, gran-	ts, and					
불		similar amounts not included above	ve 1f	157.				
E O	g	Noncash contributions included in lines	1a-1f \$					
<u>යි ළ</u>	h	Total. Add lines 1a-1f		•	157.			
				Business Code				
8	2 a	ROOM AND BOARD		721310	176,165.			
او چَ	b			721310	136,935.			
Program Service Revenue	С	DUES AND FEES		900099	75,590.			
e a	d	PR YR INCOME		900099	8,906.			
<u>6</u>	е	SMC - REBATE		900099	2,931.	2,931.		
ਕ	f	All other program service reve	nue					<u> </u>
\blacksquare	g	Total. Add lines 2a-2f			400,527.			
	3	Investment income (including	dividends, inter	rest, and				
		other similar amounts)		▶				
İ	4	Income from investment of tax	x-exempt bond	proceeds 🕨				
i	5	Royalties		•				
			(i) Real	(II) Personal				1
	6 a	Gross rents						
	b	Less: rental expenses				ľ		
	C	Rental income or (loss)						
	đ	Net rental income or (loss)		•			· · · · · · · · · · · · · · · · · · ·	
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)		•				
<u>e</u>	8 a	Gross income from fundraising	g events (not					
enne		including \$	of					
Other Reve		contributions reported on line	1c) See					
er		Part IV, line 18	· ·	3,441.				
돭	b	Less. direct expenses	t	1,196.				
		Net income or (loss) from fund	-		2,245.			2,245.
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19		a				
	b	Less: direct expenses	ı	·				
		Net income or (loss) from gam	-					
	10 a	Gross sales of inventory, less	returns					
		and allowances		a				
	b	Less: cost of goods sold	ı					
	С	Net income or (loss) from sale	s of inventory	•				
,		Miscellaneous Revenu	ie	Business Code				
	11 a							
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		▶				
33200	12	Total revenue See instructions.		•	<u>402,929.</u>	400,527.	0	. 2,245.

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				-
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	750.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States 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 salaries and wages	26,056.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,031.			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	12,820.			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	3,041.			
12	Advertising and promotion				
13	Office expenses	436.			
14	Information technology				
15	Royalties				
16	Occupancy	133,872.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,550.			
20	Interest				
21	Payments to affiliates				· <u> </u>
22	Depreciation, depletion, and amortization				<u></u>
23	Insurance				
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 0.)				
а	COST OF FOOD	81,164.			
b	ACTIVITIES	47,198.			
С	NEW MEMBERS	17,051.			
d	DUES AND FEES	16,608.			
	All other expenses	36,255.			
25	Total functional expenses Add lines 1 through 24e	381,832.			
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here				

, ai		Check if Schedule O contains a response or note to any line in this Part X			
		The state of the s	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	148,129.	1	161,429.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	0.	4	163.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other 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			
Ø		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	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			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	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	30,600.	15	28,500.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	178,729.	16	190,092.
	17	Accounts payable and accrued expenses	2,196.	17	3,602.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
≝		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	27,942.		<u> 16,800.</u>
	26	Total liabilities. Add lines 17 through 25	30,138.	26	20,402.
		Organizations that follow SFAS 117 (ASC 958), check here and			
es		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets		27	
Bali	28	Temporarily restricted net assets		28	
Fund Balances	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗶			
ō		and complete lines 30 through 34.			_
ets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds	148,591.	32	169,690.
~	33	Total net assets or fund balances	148,591.	$\overline{}$	169,690.
	34_	Total liabilities and net assets/fund balances	178,729.	34	190,092.

	990 (2013) PHI KAPPA TAU, ALPHA TAU CHAPTER	<u> 15-053</u>	<u>7019 </u>	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	·····		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>2,929.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		.,832.
3	Revenue less expenses. Subtract line 2 from line 1	3		<u> ,097.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	148	3,591.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities .	6		
7	Investment expenses .	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	169	<u>,688.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	9 O		1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		
	separate basis, consolidated basis, or both.			l
	Separate basis Consolidated basis Both consolidated and separate basis			İ
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,	l i	
	consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sci	nedule O		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ıngle Audıt		
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired audit		1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form	990 (2013)

SCHEDULE D

(Form 990).

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

PHI KAPPA TAU, ALPHA TAU CHAPTER

Employer identification number

15-0537019 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 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 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 Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c 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 year > 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 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 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)? Yes In Part XIII, 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. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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 XIII, 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		<u>PA TAU, AL</u>							Page 2
Par	t III , Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, or Oth	<u>ier Sim</u>	nilar Asse	ts (contini	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that are a	significa	nt use of its	collection	rtems
	(check all that apply)								
а	Public exhibition	c			hange programs				
b	Scholarly research	e	• 📖	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co							t XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, h	storical trea	sures, or other simil	ar assets	· _	_	
	to be sold to raise funds rather than to be ma							Yes	<u> No_</u>
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	e organizatio	on answered "Yes" to	o Form 9	90, Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other assets no	ot include	ed		
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table [.]					
								Amount	
С	Beginning balance					_10	,		
d	Additions during the year					10	t l		
е	Distributions during the year					16	•		
f	Ending balance					11	<u> </u>		
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes	No
	If "Yes," explain the arrangement in Part XIII								
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to Fo	rm 990, Part IV, line	10		1	
		(a) Current year	(b) F	rior year	(c) Two years back	(d) Thre	ee years back	(e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses	_				<u> </u>			
đ	Grants or scholarships					ļ			
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses		ļ						
g	End of year balance					<u> </u>		l	
2	Provide the estimated percentage of the cur	-	ce (line 1	g, column (a	a)) held as.				
а	Board designated or quasi-endowment		%						
b	Permanent endowment -	%					•		
С	Temporarily restricted endowment	%							
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%.							
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administered for	the orga	anization	г	
	by								Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations						•	3a(ii)	
_	If "Yes" to 3a(ii), are the related organization:	•						3b	
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm	nent.							
	Complete if the organization answere	d "Yes" to Form 990	0, Part I\	/, line 11a. S	See Form 990, Part >	K, line 10			
	Description of property	(a) Cost or o		, , ,	' '	Accumu	I	(d) Book	value
		basis (investi	ment)	basis	(other) d	epreciat	ion		
1a	Land			<u> </u>				_	_
b	Buildings .								
С	Leasehold improvements								
d	Equipment	<u> </u>							
	Other								
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990 Part	t X colui	mn (R) line	10(c))				0.

Schedule D (Form 990) 2013

Schedule D	(Form 990) 2013 PHI KAPPA T	'AU, ALPHA 1	TAU CHAPTER	15-0537019 Page 3
Part VII	Investments - Other Securities.			
4 1 0	Complete if the organization answered "Yes"			
	tion of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market value
• •	al derivatives			
•	held equity interests			
(3) Other	101-01			
(<u>A)</u>				
(B)				
(C)				
(D)			-	
<u>(E)</u>				
(F)				-
(G)		 		
(H)	t)			
Dart VIII	b) must equal Form 990, Part X, col. (B) line 12.)			
rait VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	line 11c. See Form 990, F	Part X, line 13. aluation: Cost or end-of-year market value
	(a) Description of investment	(b) Book value	(c) Metriod of V	aluation. Cost or end-or-year market value
<u>(1)</u>				
(2)	·· <u>, -</u>			
(3)				
(4)				
(5)				
(6)		-		
(7)				
(8) (9)		-		
	h) must squal Form 000. Part V. sel. (P) line 12.)			
Part IX	b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.	<u> </u>		-
1 41 17 1	Complete if the organization answered "Yes"	to Form 990 Part IV	line 11d See Form 000 I	Part Y line 15
		Description	ille i id See i oilli 990, i	(b) Book value
(1) DE	POSITS			28,500.
(2)	100110			20,500.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	-	· · · · · · · · · · · · · · · · · · ·		
	mn (b) must equal Form 990, Part X, col (B) lin	ne 15)		▶ 28,500.
Part X	Other Liabilities.		· · · · · · · · · · · · · · · · · · ·	20,300.
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11e or 11f. See Form	990. Part X. line 25
1.	(a) Description of liability	Í	(b) Book value	, ,
	leral income taxes			
	POSITS		16,800.	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) lin	ne 25.)	16,800.	
	for uncertain tax positions in Part XIII, provide			inancial statements that reports the
	ation's liability for uncertain tax positions unde			

Schedule D (Form 990) 2013

<u>Sche</u>		<u>U CHAPTER</u>	15-0537019 Page 4
Par	t XI , Reconciliation of Revenue per Audited Financial Sta	tements With Reven	ue per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
C	Recoveries of prior year grants	_2c	
d	Other (Describe in Part XIII.)	_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	1 1	
_	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	. ,	4b	
	Add lines 4a and 4b		4c
5 Doi	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12,		5 Detum
rai	t XII Reconciliation of Expenses per Audited Financial St		nses per Heturn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e 12a	
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:	1 . 1	
а	Donated services and use of facilities	2a	
þ	Prior year adjustments	<u>2b</u>	
С	Other losses	2c	
	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	,	4b	
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8)	5
	t XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and		Part V, line 4, Part X, line 2, Part XI,
ines	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide a	ny additional information	
			· · · · · · · · · · · · · · · · · · ·
			·
	<u>, , , , , , , , , , , , , , , , , , , </u>		

SCHEDULE O (Form 990 or 990-EZ)

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number**

Inspection

PHI KAPPA TAU, ALPHA TAU CHAPTER	15-0537019
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
UNIVERSITY.	
FORM 990, PART VI, SECTION A, LINE 6:	
THE FELLOWS OF THE ORGANIZATION ARE MEMBERS.	
FORM 990, PART VI, SECTION A, LINE 7A:	
THE MEMBERS HAVE VOTING RIGHTS AND VOTE FOR THE OFFICERS.	
FORM 990, PART VI, SECTION A, LINE 7B:	
DECISIONS OF THE ORGANIZATION ARE VOTED ON BY ITS MEMBERS	
FORM 990, PART VI, SECTION A, LINE 8B:	
THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF O	F THE
GOVERNING BODY.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE RETURN IS SENT TO THE TREASURER FOR REVIEW & DISTRIBU	TION
BEFORE IT IS SIGNED.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE	ΨО
THE PUBLIC UPON REQUEST.	
THE TODATE OF THE COLOR TO THE	
	