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Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

▶ 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. Open to Public Inspection

Form **990** (2013)

<u>A I</u>	-or the	2013 calendar year, or tax year beginning JUL I, 2013	and ending	<u> </u>	<u> 30, 2014</u>					
В	Check if	C Name of organization		D	Employer identifi	cation number				
á	pplicable	KAPPA ALPHA THETA FRATERNITY								
	Addres	GROUP RETURN								
=	Name		•••		26 6	125207				
늗	lchang: □ Initial		Τ		36-6135287					
느	return	Number and street (or P.O. box if mail is not delivered to street address)	Room/s	uite E	Telephone numbe					
느	Termir ated	6740 FOUNDERS KOAD			<u> 317-</u>	<u>876-1870</u>				
L	Ameno	City or town, state or province, country, and ZIP or foreign postal code	e	G	G Gross receipts \$ 49,885,240.					
	Applic	I INDIANAPODIS, IN 40200		H(a) Is this a group re	eturn STMT 1				
	pendir	F Name and address of principal officer:ELIZABETH CORRII	DAN		for subordinates? X Yes No					
	SAME AS C ABOVE H(b) Are all subordinates included? Yes X N									
_										
_										
		te: WWW.KAPPAALPHATHETA.ORG	·····			n number ▶ 0154				
_		organization: Corporation Trust Association X Other	<u> LY</u>	ear of for	mation:	State of legal domicile:				
P	art I	Summary								
Φ	1	Briefly describe the organization's mission or most significant activities: The	HE ADMI	NIST	RATION OF	LOCAL				
ဋ	1	CHAPTERS.								
Ę.		Check this box if the organization discontinued its operations or organization.	disposed of r	nore that	n 25% of its net as	ssets				
Š		Number of voting members of the governing body (Part VI, line 1a)	a.opoooa o	,,,,,,	3	7				
පි										
త		Number of independent voting members of the governing body (Part VI, line			. 4	5.62				
ies		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			. 5	563				
Activities & Governance	6	Total number of volunteers (estimate if necessary)			6	2235				
ţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	2,707.				
_	Ь	Net unrelated business taxable income from Form 990-T, line 34			7b	0.				
					Prior Year	Current Year				
_	8	Contributions and grants (Part VIII, line 1h)		-	725,007.	928,702.				
<i>ુ</i> .5	1	Program service revenue (Part VIII, line 2g)	•	11	,682,770.	48,953,831.				
ुंड	i i			- 44						
	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-	825.	2,707.				
AN ROOM		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			<413,309.					
7	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line	12)	44	<u>,995,293.</u>	49,354,529.				
J	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			<u>592,907.</u>	803,869.				
=	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.				
= S8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines	5-10)	7	,540,410.	5,680,227.				
Ō	16a	Professional fundraising fees (Pan X Column (4) Iline 11e)	,		0.	0.				
energeneral Company	, OL	Total fundraising expenses (Part X-column D)—ine 25)	0.		•					
" ⊼	_B		<u> </u>	26	CEA ADD	41 002 607				
, –	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11t24e)			<u>,654,400.</u>					
i	18	Total expenses. Add lines 3-1/1/ (h) ist equal Party, comm (A), line 25)		44	<u>,787,717.</u>					
	19	Revenue less expenses Subtract line 18 from line 12		ļ	207,576.	<u>976,826.</u>				
Net Assets or	<u> </u>	@63@6304 A A T		Beginn	ing of Current Year	End of Year				
Sets	20	Total assets (Part X, Ine 16)		7	,696,392.	8,863,028.				
Sec.	21	Total liabilities (Part X, line 26)		1	,570,089.					
푈	22	Net assets or fund balances. Subtract line 21 from line 20			,126,303.	7,103,129.				
ΓP	art II	Signature Block		<u> </u>	1220,000.	7,710071250				
	_	alties of perjury, I declare that I have examined this return, including accompanying sc	hadulae and et	otomonto	and to the heat of m	ny kaoniladao and haliof it is				
						ly knowledge and belief, it is				
true	e, corre	ct, and complete Declaration of preparer (other than officer) is based on all information	n of which prej	parer nas	any knowledge.					
		N Chiper Win			5/1	5/15				
Sign Signature of difficer Date										
Here ELIZABETH CORRIDAN, EXECUTIVE DIRECTOR										
Type or print name and title										
		Print/Type preparer's name Preparer's signature		Date	Check	PTIN				
Pai	id		•	- 1	11					
			R	1 2-	Firm's EIN					
						35-0905983				
US	e Only	Firm's address 6840 EAGLE HIGHLANDS WAY								
		INDIANAPOLIS, IN 46254			Phone no. (3	317)347-5200				
Ma	v the I	RS 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.

KAPPA ALPHA THETA FRATERNITY

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Par	rt III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	
1 .	Briefly describe the organization's mission: TO ADMINISTER LOCAL CHAPTERS OF THE KAPPA ALPHA THET.	A FRATERNITY.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sentit "Yes," describe these changes on Schedule O.	vices?Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$)
4b	(Code) (Expenses \$ including grants of \$)	(Revenue \$)
4c	(Code) (Expenses \$ including grants of \$)	(Revenue \$	
			· · · · · · · · · · · · · · · · · · ·
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
46	Total program service expenses		

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? if "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? Х 2 - Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X 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 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 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 X Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D, Part III ... X 8 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 X 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V X 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c 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 X 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b 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 X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I X 17 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

19

20a

X

complete Schedule G, Part III ...

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

..

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
-	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete]		
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			ľ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	<u> </u>	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1	i	
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		ł	1
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			-
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	ŀ		
	Part V, line 1	34	X	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	_36	<u>L</u> _	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Forn	990	(2013)

Form 990 (2013) GROUP RETURN

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			\Box
		1	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		. 03	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ļ
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 563			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			Ī
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			1
5a	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?	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 the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a	_X_	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	_7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		_
d	· · · · · · · · · · · · · · · · · · ·	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>g</u> 7h		
8 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	/11		
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	D. Liberton and a section and the section of the se	9a		
b		9b		
10	Section 501(c)(7) organizations. Enter:			<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	0			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
	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			
С	Enter the amount of reserves on hand		<u> </u>	
14a		14a	 	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	. 000	(2013
		rate of the second		

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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	- 1		
			Yes	No
1a -	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5_		X
6	Did the organization have members or stockholders?	6_	<u> </u>	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	_7a	_X	
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			<u> </u>
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u></u>
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	X	<u> </u>
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		ĺ	
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	_14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
þ	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	_
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X 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, ar	d finar	nciał	
	statements available to the public during the tax year.	iui		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion 🖹	>	
	KAPPA ALPHA THETA FRATERNITY - 317-876-1870		_	
	8740 FOUNDERS ROAD, INDIANAPOLIS, IN 46268			

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

Check if Schedule O contains a response or note to any line in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (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.

(A)	(B)		(C) Position		(D)	(E)	(F)				
Name and Title	Average		(do not check more than one box, unless person is both an			than		Reportable compensation	Reportable compensation	Estimated amount of	
	hours per week	officer and a director/tr						from	from related	other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) AMY KATES	1.00										
FORMER_PRESIDENT	5.00	X						0.	0.	0.	
(2) ASHLEY ATKINS	1.00					ļ					
FORMER VICE PRESIDENT		X						0.	0.	0.	
(3) LAURA DOERRE	1.00]							İ		
PRESIDENT		X		X				0.	0.	0.	
(4) PAIGE ELLERMAN	1.00										
FORMER VICE PRESIDENT	5.00	X						0.	0.	0.	
(5) JULIE GILPIN	1.00										
FORMER VICE PRESIDENT		X						0.	0.	0.	
(6) KIMI MARTIN	1.00										
VICE PRESIDENT		X	L_	X				0.	0.	0.	
(7) MANDY WUSHINSKE	1.00										
VICE PRESIDENT		X		X				0.	0.	0	
(8) JANE DICK	1.00										
VICE PRESIDENT		X	_	X	<u> </u>			0.	0.	0.	
(9) JOAN KREIGER	1.00	1	İ								
VICE_PRESIDENT		X		X		ļ		0.	0.	0.	
(10) ABBEY MANSFIELD	1.00									_	
VICE PRESIDENT		X	_	X	<u> </u>	╙	_	0.	0.	0 .	
(11) KATHY SCHWEER	1.00	1	İ		İ				_	_	
VICE PRESIDENT		X	<u> </u>	X	↓_		_	0.	0.	0	
(12) ELIZABETH CORRIDAN	1.00	1	1				1				
EXECUTIVE DIRECTOR	50.00	<u> </u>	_	X	↓_	<u> </u>	<u> </u>	0.	163,917.	34,519	
(13) JEFFERY RISSER	1.00	4			1						
DIRECTOR OF FINANCE	50.00	<u> </u>	<u> </u>	<u> </u>	<u> </u>	X	<u> </u>	0.	116,534.	11,808	
		-			ŀ						
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Part VII Section A. Officers, Directors, To		ploy	ees,			ghe	st C			Г		4,550.7	
(A)	(B)			(C Posi	-	,		(D)	(E)		_	(F)	
Name and title	Average hours per		Position (do not check more than one box, unless person is both ar			than		Reportable compensation	Reportable			timate iount	
	week					or/trus		from	compensation from related	'		other	
	(list any	ctor						the	organizations	.		pensa	
•	hours for	ır dıre	_			ted		organization	(W-2/1099-MIS		fre	om th	ie
	related	stee 0	ruste(_	Sue		(W·2/1099·MISC)			_	anızat	
	organizations below	aal tru	onalt		ployee	E COM						d relat	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			1	orga	ınızatı	ions
	, ,	트	트	0	<u> </u>	¥ 5	<u>.</u>						
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			1			†		 					
		1											
1b Sub-total	· · · · · · · · · · · · · · · · · · ·					•	<u> </u>	0.	280,45	11.	4	6.3	27.
c Total from continuation sheets to Par	t VII. Section A			•	•	••	•	0.		0.		- , -	0.
d Total (add lines 1b and 1c)			•		•	•	•	0.	280,45	_	4	6,3	27.
2 Total number of individuals (including b	ut not limited to th	nose	liste	ed a	bov	e) w	no r	eceived more than \$100					
compensation from the organization						•			•				0
	•											Yes	No
3 Did the organization list any former office	cer, director, or tr	uste	e, ke	ey er	mple	oyee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J f	or such individual	•									3		X
4 For any individual listed on line 1a, is th	e sum of reportab	ole c	omp	ensa	atioi	n an	d ot	her compensation from	the organization				
and related organizations greater than \$	\$150,000? If "Yes	, " cc	mpl	ete :	Sch	edul	e J	for such individual	•		4	Х	
5 Did any person listed on line 1a receive	or accrue compe	nsat	tion	from	an	y uni	elat	ted organizatıon or ındıv	idual for services				
rendered to the organization? If "Yes,"	complete Schedu	le J	for s	uch	per	son					5		X
Section B. Independent Contractors													
1 Complete this table for your five highes	t compensated in	dep	ende	ent c	ont	racte	ors 1	that received more than	\$100,000 of com	pensa	ation f	rom	
the organization. Report compensation	for the calendar	/ear	end	ıng v	vith	or w	/ithi	n the organization's tax	year.				
(A)								(B)		_	(C		
Name and busin	ess address	N	ON:	E				Description of s	services	C	ompe	nsatio	on
		, -				-		<u> </u>		-			
2 Total number of independent contractor		not l	ımıte	ed to	the	_	stec	d above) who received r	nore than				
\$100,000 of compensation from the or	ganization >					0			L			000	45.5
											Form	-will	120113

Form 990 (2013) GROUP RETURN
Part VIII Statement of Revenue

		Check if Schedule O conta	uns a respons	se or note to any line	n this Part VIII			
	-		\ <u>-</u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
<u>e</u> <u>a</u>	b	Membership dues	1b					
A, (c	Fundraising events .	1c	608,370.				
直	d	Related organizations	1d					
S,E	е	Government grants (contribution	ons) <u>1e</u>					
흥합	f	All other contributions, gifts, grants	1 1					
독취		sımılar amounts not included abov	re 1f	320,332.				
Contributions, Gifts, Grants and Other Similar Amounts	g		1a-1f \$					
<u>0 e</u>	<u>h</u>	Total. Add lines 1a-1f			928,702.			
_	_			Business Code				
<u> </u>		BOARD FEES		900099	22,670,798.	22,670,798,		
le g	b			900099	14,696,654.	14,696,654.		
E e	C	CHAPTER FEES		900099	10,680,576,	10,680,576.		
Pa	d			-				
Program Service Revenue	f	All other program service rever	0110	900099	905,803,	005 903	·	<u></u> ,
İ	' a		iuc	300033	48 953 831.	905,803,		
	3	Investment income (including	dıvıdends. ınt	erest, and	40,555,051.			
	Ū	other similar amounts)	u,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	2,707.		2.707.	
	4	Income from investment of tax	exempt bon	d proceeds	2,707.		2,707.	
	5	Royalties	•	. •				
		Í	(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less. rental expenses				1		
	С	Rental income or (loss)						
	d	Net rental income or (loss)	·	▶				
	7 a	Gross amount from sales of	(i) Securitie	s (ii) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
	С	` '						
		Net gain or (loss)		·				
e n	8 a	Gross income from fundraising						
Ven		including \$ 608						
Be		contributions reported on line Part IV, line 18	10). See					
Other Reven	h	Less. direct expenses		a 0. b 530,711.		•		
δ		Net income or (loss) from fund	Iraising event		<530,711.			<530,711 <u>.</u> :
		Gross income from gaming ac	-	-	<u> </u>			2330,/11.
		Part IV, line 19		a				
	b	Less direct expenses		b				
	С	Net income or (loss) from gam	ing activities		_			
	10 a	Gross sales of inventory, less	returns					
		and allowances		a				
	b	Less: cost of goods sold		b				
	С	Net income or (loss) from sale:	s of inventory	· •			·	
		Miscellaneous Revenue	e	Business Code				
	11 a			_				
	b			_				
	С			- }				
		All other revenue						
	-			•				
33200	9	Total revenue. See instructions.		P	49 354 529.	48 953 831	<u>2,707.</u>	<530_711_:
10-29	-13							Form 990 (2013)

Form 990 (2013) GROUP RETURN
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
	Check if Schedule O contains a respon			(C)	. <u>X</u>
	ot 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	803,869.			
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
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)	4 062 221			
7	Other salaries and wages	4,863,321.			
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	391,453.			
9	Other employee benefits	425,453.			
10	Payroll taxes Fees for services (non-employees):	445,455.			
11	` ' ' '				
a	Management			,	
b	Accounting	142,995.			
d	Lobbying	142,000			
u	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				v
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	·			
13	Office expenses	631,515.			-
14	Information technology	9,724.			
15	Royalties				
16	Occupancy	13,629,109.			
17	Travel	76,351.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	585,125.			
20	Interest .	1,523.		ļ	
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization				
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 O.)	7 115 000			
a	FOOD/KITCHEN	7,115,223.			<u> </u>
b	SOCIAL EVENTS	4,417,395.			
C	FACILITY FEES	2,404,977.	·	-	
d	CHAPTER PROGRAMMING	2,086,216. 10,793,454.			
	All other expenses SEE SCH O	48,377,703.			
<u>25</u>	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	±0,311,103•			
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

KAPPA ALPHA THETA FRATERNITY GROUP RETURN

Form 990 (2013)
Part X Balance Sheet

Рап х	Check if Schedule O contains a response or note to any line in this Part X			
	Shock if correction of contains a response of note to any into in time i at x	(A) Beginning of year		(B) End of year
	Cook populatorest hearing	6,874,684.	1	7,631,066
1 2	Cash - non-interest-bearing	0,014,004.	2	7,031,000
2	Savings and temporary cash investments		3	
3	Pledges and grants receivable, net	300,654.	4	448,588
4	Accounts receivable, net	300,034.	4	440,500
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			
_ est	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets 6	Notes and loans receivable, net		7	
8	Inventories for sale or use	215 066	8	285,472
9	Prepaid expenses and deferred charges	215,866.	9	265,472
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
	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	205 100	14	407 000
15	Other assets See Part IV, line 11	305,188.	15	497,902
16	Total assets. Add lines 1 through 15 (must equal line 34)	7,696,392.	16	8,863,028
17	Accounts payable and accrued expenses	258,920.	17	285,483
18	Grants payable	200 (54	18	440 500
19	Deferred revenue	300,654.	19	448,588
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<u>ဖ</u> 22	Loans and other payables to current and former officers, directors, trustees,			
≝	key employees, highest compensated employees, and disqualified persons			
Liabilities 8	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	1 010 515		1 005 000
	Schedule D	1,010,515.		1,025,828
26	Total liabilities. Add lines 17 through 25	1,570,089.	26	1,759,899
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Sec	complete lines 27 through 29, and lines 33 and 34.	6 126 202		7 102 120
	Unrestricted net assets	6,126,303.		7,103,129
E 28	Temporarily restricted net assets		28	-
일 29	Permanently restricted net assets		29	
Net Assets or Fund Balances 22 8 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	Organizations that do not follow SFAS 117 (ASC 958), check here			
õ	and complete lines 30 through 34.			
w 30	Capital stock or trust principal, or current funds		30	
ğ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	6 406 333	32	7 400 400
2 33	Total net assets or fund balances	6,126,303.		7,103,129
34_	Total liabilities and net assets/fund balances	7,696,392.	34	8,863,028

KAPPA ALPHA THETA FRATERNITY

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

orm	990 (2013) GROUP RETURN	36-613	35287	Pag	_{je} 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
4 5 6 7	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments		19,354 18,377 976 6,126	7,70 5,82	03. 26.
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	7,103	3,1:	29.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	•			Ш
1 2a	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 Were the organization's financial statements compiled or reviewed by an independent accountant?	O	2a	Yes	No X
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	d on a	2b		х
С	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
За	review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil Act and OMB Circular A-133?		2c 3a		x
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			

332012 10-29-13 Form **990** (2013)

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

▶ 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

KAPPA ALPHA THETA FRATERNITY GROUP RETURN

Employer identification number 36-6135287

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		_
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
_	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	-	ed only
•	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		☐ Yes ☐ No
Pai		ganization answered "Yes" to Form 990, Part	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or		rically important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the o	rganization during the tax
	year >		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	rt holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements duri	ng the year ►
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during th	e year > \$
8	Does each conservation easement reported on line 2(d) about	ive satisfy the requirements of section 170(h)	(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the	e organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections		er Similar Assets.
	Complete if the organization answered "Yes" to Forn		
1a	If the organization elected, as permitted under SFAS 116 (A	*	
	historical treasures, or other similar assets held for public ex	chibition, education, or research in furtheranc	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc	nbes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement a	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of publi	c service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		. • \$
	(ii) Assets included in Form 990, Part X		. • \$
2	If the organization received or held works of art, historical tr	easures, or other similar assets for financial g	ain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990, Part X		▶ \$

KAPPA ALPHA THETA FRATERNITY

	lule D (Form 990) 2013							<u>36-61</u>			<u>ge 2</u>
Par											
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the f	following that	are a s	ignificant	use of its o	collection	ı ıtems	
	(check all that apply):										
а	Public exhibition	d	ı	oan or exch	nange program	ms					
b	Scholarly research	e		Other							
C-	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ey further th	ne organizatio	n's exe	mpt purpo	ose in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations	of art, his	torical treas	sures, or othe	r sımılaı	r assets		_		
	to be sold to raise funds rather than to be ma					<u> </u>			Yes		No
Par	t IV Escrow and Custodial Arrang		ete if the	organızatıoı	n answered "	Yes" to	Form 990), Part IV, II	ne 9, or		
	reported an amount on Form 990, Par	t X, line 21									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for d	contribution	s or other ass	sets not	ıncluded		,		1
	on Form 990, Part X?							L.	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able:							
									Amount	<u> </u>	
C	Beginning balance .	• •					1c				
d	Additions during the year	• •					1d				
е	Distributions during the year						1e_				
f	Ending balance		-		-		1f		-		
	Did the organization include an amount on Fe								Yes ■	<u> </u>	No
	If "Yes," explain the arrangement in Part XIII.						<u>.</u>	<u></u>			<u> </u>
Par	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo							
		(a) Current year	(b) P	nor year	(c) Two years	s back	(d) Three	years back	(e) Four	years	oack_
1a	Beginning of year balance		 				-				
b	Contributions										
С	Net investment earnings, gains, and losses			-			-				
d	Grants or scholarships .										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses		-								
g	End of year balance		1								
2	Provide the estimated percentage of the cur	-	•	g, column (a	a)) held as						
а	Board designated or quasi-endowment		%								
	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c short							_			
3a	Are there endowment funds not in the posse	ession of the organia	zation tha	it are neid a	ind administe	rea for 1	the organi	zation	ſ	1	
	by:								[<u>a-</u>	Yes	No
	(i) unrelated organizations	•			•		• •		3a(i)		
	(ii) related organizations		on Coba	lula DO					3a(ii)		
	If "Yes" to 3a(ii), are the related organization			-		-	•	•	3b		
Dai	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipn		owment	iunas.							
L al	Complete if the organization answere		n partiv	line 11a S	ee Form 000	Dart ∨	fine 10				
		(a) Cost or			- 1			od T	(d) Da-	ا برجاد د	
	Description of property	basis (invest		` '	or other (other)		Accumulat epreciation		(d) Boo	k value)
	Lond	Dasis (ii vesi		Dasis	(Curion)	uc	Picciation	' 			
	Land	•									
	Buildings										
	Leasehold improvements	• •						- +			
	Equipment Other										
	I. Add lines 1a through 1e (Column (d) must	equal Form 990 Pai	t X colu	nn (R) line '	10(c))			•			0.
. v.ud	ii , waa mioo ta wii qagii to (Qolanin (a) Masti	oquari omi ooo, i al	,	,	1-/-/		1				•

Schedule D (Form 990) 2013

Part VII Investments - Other Securities. Complete if the organization answered "Yes" to	o Form 990, Part IV. line	11b. See Form 990. Part X. line 12	<u>)</u>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cos	
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" to	o Form 990, Part IV, line	11c. See Form 990, Part X, line 13	3
(a) Description of investment	(b) Book value	(c) Method of valuation: Cos	
(1)			
(2)			
(3)			
(4)			
(5)	. ,,,		
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			·
Part IX Other Assets.			
Complete if the organization answered "Yes" t	to Form 990, Part IV, line	11d. See Form 990, Part X, line 19	5
(a) [[]	Description		(b) Book value
(1) SECURITY DEPOSITS			497,902
(2)			
(3)			
(4)			
(5)		-	
(6)			
(7)			
(8)			
(9)			-
Total. (Column (b) must equal Form 990, Part X, col (B) line	9 15)		▶ 497,902
Part X Other Liabilities.			
Complete if the organization answered "Yes" i	to Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X	, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) REFUNDABLE DEPOSITS		1,025,828.	
(3)			
(4)			
(5)			
(6)			
(7)		-	
(8)			
(9)			
Total, (Column (b) must equal Form 990, Part X, col. (B) line	25.)	1,025,828.	

Schedule D (Form 990) 2013

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

KAPPA ALPHA THETA FRATERNITY

GROUP RETURN 36-6135287 Page 4 Schedule D (Form 990) 2013 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a 2b b- Donated services and use of facilities c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses . . 2c d Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990. KAPPA ALPHA THETA FRATERNITY

Name of the organization **Employer identification number** GROUP RETURN 36-6135287 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ flers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a 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? No Yes 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. (iii) Did (v) Amount paid (vi) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts tò (or retained by) (ii) Activity have custody or control of contributions? fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes No Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration

KAPPA ALPHA THETA FRATERNITY 36-6135287 Page 2 Schedule G (Form 990 or 990-EZ) 2013 GROUP RETURN 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. (b) Event #2 (c) Other events (a) Event #1 (d) Total events NONE VARIOUS (add col. (a) through CHAPTER FUND col (c)) (event type) (total number) (event type) 608,370. <u>608,370.</u> Gross receipts 608,370 608,370. 2 Less: Contributions 3 Gross income (line 1 minus line 2) Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 530,711. 530,711 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 530,711 <530,71 11 Net income summary Subtract line 10 from line 3, column (d) 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, ine 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue col. (a) through col (c)) bingo/progressive bingo Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes 6 Volunteer labor No No 7 Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization operates gaming activities: Yes No a is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes

Schedule G (Form 990 or 990-EZ) 2013

b If "Yes," explain

332082 09-12-13

KAPPA ALPHA THETA FRATERNITY m 990 or 990-EZ) 2013 GROUP RETURN

Sch	edule G (Form 990 or 990-EZ) 2013 GROUP RETURN 36-	<u>-013</u>	<u>548</u>	/ Page 3
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?	\Box	Yes	☐ No
	Indicate the percentage of gaming activity operated in:			
а	The organization's facility	13	а 📗	%
	•An outside facility	13	<u> </u>	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$			
c	of "Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions			
ŧ	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	_	Yes	□ No
	retain the state gaming license?		_ res	NO
	organization's own exempt activities during the tax year > \$,		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part I	Linos	Q Qb	10b 15b
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)		ə, əb,	
_				

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

General Information on Grants and Assistance

Part

GROUP RETURN

criteria used to award the grants or assistance?

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Open to Public OMB No 1545-0047 2013

Inspection

2 Employer identification number 36-6135287 X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection KAPPA ALPHA THETA FRATERNITY

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Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered Tes to Form 590, Fat IV, line 21, for any received more than \$5,000. Part II can be duplicated if additional space is needed.	Governments and	d Organizations in the he duplicated if additi	• United States. Conal space is need	ompiete ir tne orga led.	inization answered T	es to rolli 990, rati	v, iii e z i, iOi da iy
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONT VERTICAL CONTROL VERTICAL							
AMERICAN CANCER SOCIEII, INC. 250 WILLIAMS STREET, SUITE 400							
ATLANTA GA 30303	13-1788491	501(C)(3)	12,000.	0			CHARITABLE CONTRIBUTION
NATIONAL COURT APPOINTED SPECIAL							
ADVOCATE ASSOCIATION - 100 WEST							
HARRISON STREET, SUITE 500 -			ı	,			
SEATTLE, WA 98119	91-1255818	501(C)(3)	127,245.	0			CHARITABLE CONTRIBUTION
THE CHARLES THE COLUMN TO THE							
CASA - VOICES FOR CHILDREN							
P.O. BOX 1870				,			
CORVALLIS, OR 97339	94-3265415	501(C)(3)	14,985,	0			CHARITABLE CONTRIBUTION
CASA OF LANCASTER COUNTY							
53 NORTH DUKE STREET, SUITE 218		-					
LANCASTER, PA 17602	26-1826650	501(C)(3)	11,060.	0.			CHARITABLE CONTRIBUTION
CASA OF FRESNO & MADERA COUNTIES				-			
1252 FULTON MALL							
FRESNO, CA 93721	77-0401361	501(C)(3)	10,247.	0.			CHARITABLE CONTRIBUTION
CASA OF LANE COUNTY							
174 DEADMOND FERRY ROAD							
SPRINGFIELD, OR 97477	93-1185120	501(C)(3)	7,906,	0.			CHARITABLE CONTRIBUTION
2 Enter total number of section 501(c)(3) and government organizations	nd government or	ganizations listed in th	listed in the line 1 table				▼ 25.
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					•0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

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KAPPA ALPHA THETA FRATERNITY

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Schedule I (Form 990) GROUP RETURN	URN						36-6135287 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	edule I (Form 990), Pa	(;) L	-
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF LOS ANGELES 201 CENTRE PLAZA DRIVE, #100 MONTEREY PARK, CA 91754	95-3890446	501(C)(3)	14,958,	0			CHARITABLE CONTRIBUTION
CASA OF TARRANT COUNTY 101 SUMMIT AVE, SUITE 505 FORT WORTH , TX 77802	75-1895412	501(C)(3)	61,343,	0			CHARITABLE CONTRIBUTION
CASA OF MISSISSIPPI, INC. 11975 SEAWAY ROAD, SUITE A-320 GULPPORT CT 39503	43-2002765	501(C)(3)	8,961,	*0			CHARITABLE CONTRIBUTION
CHAMPAIGN COUNTY CASA, INC. 154C LINCOLN SQUARE URBANA, IL 61801	37-1325204	501(C)(3)	.506,9	.0			CHARITABLE CONTRIBUTION
CHILDREN IN PLACEMENT 300 WHALLEY AVENUE NEW HAVEN CT 06511	06-1182114	501(0)(3)	11,848	0			CHARITABLE CONTRIBUTION
	73-1231247	501(C)(3)	7 1	0.			CHARITABLE CONTRIBUTION
DANE COUNTY CASA, INC. 210 MARTIN LUTHER KING JR. BLVD #35 MADISON WI 53703	l _	501(C)(3)	6,300,	*0			CHARITABLE CONTRIBUTION
CASA OF DOUGLAS COUNTY INC 1000 SE STEPHENS ST ROSEBURG, OR 97470	93-1220479	501(C)(3)	10,634,	0		:	CHARITABLE CONTRIBUTION
FRIENDS OF WAKE COUNTY GUARDIAN AD LITEM PROGRAM - P.O. BOX 4919 - CARY, NC 27519	58-1930264	501(C)(3)	19,770.	*0			CHARITABLE CONTRIBUTION
ı							Schedule I (Form 990)

N.	
FRATERNITY	
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KAPPA	GROUP

Schedule I (Form 990) GROUP RETURN	URN						36-6135287 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Orga	nizations in the Ur	ited States (Sche	dule I (Form 990), Par	(iii t	-
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KAPPA ALPHA THETA FOUNDATION, INC. 8740 FOUNDERS ROAD INDIANAPOLIS IN 46268	36-6066531	501(C)(3)	122,203,	0,			CHARITABLE CONTRIBUTION
] 2:"	58-1413499	501(C)(3)	11,526,	0			CHARITABLE CONTRIBUTION
PROKIDS 2605 BURNET AVENUE CINCINNATI, OH 45219	31-1020021	501(C)(3)	8 368	0			CHARITABLE CONTRIBUTION
SCARLET LAWRENCE AKINS FOUNDATION 683 GLEN ALLEN COVE COLLIERVILLE, TN 38017	83-0489892	501(C)(3)	8,500,	0			CHARITABLE CONTRIBUTION
SCOTTY'S HOUSE BRAZOS VALLEY CHILD ADVOCACY CENTER, INC 2424 KENT STREET - BRYAN TX 76102	74-2650616	501(C)(3)	5,897,	0		:	CHARITABLE CONTRIBUTION
AST CASA PR 0X 7017 1 SD 57078	27-5055055	501(C)(3)	6,853,	0			CHARITABLE CONTRIBUTION
SUNFLOWER CASA PROGRAM, INC. P.O. BOX 158 MANHATTAN, KS 66505	48-1061447	501(C)(3)		0			CHARITABLE CONTRIBUTION
	20-5098101	501(C)(3)	7,705.	0			CHARITABLE CONTRIBUTION
VOICES FOR CASA CHILDREN, INC. 849 N. 3RD AVENUE PHOENIX, AZ 85003	45-3359395	501(C)(3)	15,720.	0.			CHARITABLE CONTRIBUTION Schedule Form 990)

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Page 1 36-6135287 Schedule I (Form 990) GROUP RETURN

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of (b) EIN (c) IRC section organization or government (a) Amount of (b) Amount of (c) Amount of (c) Amount of (d) Amount of (d) Method of (e) Amount of (e) Amount of (f) Method	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOICES FOR CHILDREN, INC. 5550 STERRETT PLACE, SUITE 215 COLUMBIA, MD 21044	52-1700254	501(C)(3)	16,905,	0			CHARITABLE CONTRIBUTION
							Schedule I (Form 990)

KAPPA ALPHA THETA FRATERNITY

36-6135287

Page 2

GROUP RETURN

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2013)

Part III Grants and Other

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990) 2013

Employer identification number

Internal Revenue Service Name of the organization

Department of the Treasury

Part I

KAPPA ALPHA THETA FRATERNITY

GROUP RETURN 36-6135287 **Questions Regarding Compensation**

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
Ū	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			İ
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<u> </u>	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			1
	contingent on the revenues of:			
а	The organization?	5a		ļ
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a	ļ	
b	Any related organization?	6b	ļ	<u> </u>
	If "Yes" to line 6a or 6b, describe in Part III.	1	Ì	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		1
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	1	1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

36-6135287

GROUP RETURN

Schedule J (Form 990) 2013 GROUP

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (ii) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	ļ	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported as deferred in prior Form 990
- 1	1	o	0	0	0	0.	0.	0
(I) ELITABEIR CORKILAN EXECUTIVE DIRECTOR	€ €	154,26		9,653.	8,71	25,801.	198,43	
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332112				70			Sched	Schedule J (Form 990) 2013

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information. 36-6135287 KAPPA ALPHA THETA FRATERNITY GROUP RETURN Schedule J (Form 990) 2013

| Part III | Supplemental Information

Page 3

Schedule J (Form 990) 2013	

SCHEDULE O

Department of the Treasury Internal Revenue Service

(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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

KAPPA ALPHA THETA FRATERNITY GROUP RETURN

Employer identification number 36-6135287

FORM 990, PART VI, SECTION A, LINE 6:
EXPLANATION: THE ORGANIZATION HAS CONVENTION DELEGATES THAT CAN ELECT
MEMBERS OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 7A:
EXPLANATION: THE CONVENTION DELEGATES ELECT THE FRATNERITY'S GOVERNING
BODY.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: THE FORM 990 WILL BE REVIEWED BY THE BOARD OF DIRECTORS PRIOR
TO BEING FILED.
FORM 990, PART VI, SECTION B, LINE 12:
EXPLANATION: THE CENTRAL ORGANIZATION FILING THE GROUP RETURN HAS A
CONFLICT OF INTEREST POLICY, WHICH IS REVIEWED ON AN ANNUAL BASIS.
HOWEVER, EACH OF THE CHAPTERS INCLUDED IN THE GROUP RETURN DOES NOT HAVE A
CONFLICT OF INTEREST POLICY.
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: THE ORGANIZATIONS INCLUDED IN THIS 990 MAKE THEIR GOVERNING
DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO PUBLIC UPON REQUEST.
EXEMPTION DOCUMENTS AND TAX RETURNS AVAILABLE UPON REQUEST THROUGH CONTACT
OF THE KAPPA ALPHA THETA FRATERNITY. ANNUAL FORM 990S CAN ALSO BE ATTAINED
VIA THE KAPPA ALPHA THETA FRATERNITY WEBSITE AND THROUGH THIRD PARTY
WEBSITES SUCH AS WWW.GUIDESTAR.COM.

SCHEDULE R (Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

GROUP RETURN

Name of the organization Department of the Treasury Internal Revenue Service

Part |

► See separate instructions.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. KAPPA ALPHA THETA FRATERNITY

Employer identification number

36-6135287

Direct controlling entity End-of-year assets e Total income ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

(b) (c) Primary activity Legal domicile (state or foreign country)
TO PROVIDE HOUSING FOR CHAPTER MEMBERS OF KAPPA ALPHA THETA FRATERNITY

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

332161 09-12-13 LHA

Schedule R (Form 990) 2013

KAPPA ALPHA THETA FRATERNITY

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Schedule R (Form 990) 2013 GROUP RETURN

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

General or Percentage managing ownership Schedule R (Form 990) 2013 Yes No (i) Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Code V-UBI General or Pramount in box managing or 20 of Schedule Pariner?
K-1 (Form 1065) Yes No Percentage ownership Ξ Share of end-of-year assets 6 Disproportionate Yes No allocations? \equiv Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) **e** Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) € e Legal domicile (state or foreign country) (d)
(Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization 332162 09-12-13 Part IV

KAPPA ALPHA THETA FRATERNITY GROUP RETURN

Schedule R (Form 990) 2013 GROUP RETURN

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				_	Yes No	اہ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	elated organizations listed	ın Parts II·IV?			- 1
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity				a	×	- 1
				9	×	- 1
				2	×	
				7	×	l
d Loans or loan guarantees to or for related organization(s)				2 ,	: Þ	1
 Loans or loan guarantees by related organization(s) 				9	4	-
					-	
f Dividends from related organization(s)				=	×	-
a Sale of assets to related organization(s)				19	×	I
				£	×	
				F	×	ı
I Exchange of assets with related organization(s)				;	>	1
 j Lease of facilities, equipment, or other assets to related organization(s) 				=	4	1
1. I among fooulities assistant or atter secate from related progentation(e)				¥	×	
A Lease of racinities, equipment, or other assets from each arguments ()	anization(s)			=	×	1
religionalist of services of montaining or fundamental solutions by	anization(s)			Ę	×	1
	hon(s)			Ę	×	i i
 מומות משלים של ה	(c) 101				>	1
 Sharing of paid employees with related organization(s) 				2	4	1
					>	
 P Reimbursement paid to related organization(s) for expenses 				<u>a</u>	< ;	1
 Reimbursement paid by related organization(s) for expenses 				5	×	- 1
					;	
 r Other transfer of cash or property to related organization(s) 				-	4 :	- 1
s Other transfer of cash or property from related organization(s)				15	×	- 1
	who must complete t	nis line, including covered	relationships and transaction thresholds.		į	- 1
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	nvolved		
	type (a-s)					ı
(0)						1
(2)						- 1
(3)						1
(4)						- 1
1						
(5)						1
(9)		į				1
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KAPPA ALPHA THETA FRATERNITY

GROUP RETURN Schedule R (Form 990) 2013 Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37 Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) Percentage ownership						Schedule R (Form 990) 2013
(j) General or managing partner? Yes NO						- E
Gene Dart Yes	_					E.
(h) (i) (j) (k) (k) Dispropor Code V-UBI General or Percentage unount in box 20 managing ownership of Schedule K-1 partner? Ves No (Form 1065) ves No						Schedule
(h) Disproportionate allocations?			-		_	
(g) Share of end-of-year assets						
(f) Share of total income				•		
(e) Are all Are all 501(c)(3) 00ps 7					_	
Predominant income paties sec (related, unrelated, ougs beckludde from tax under section 512-514) yes No						
(c) Legal domicile (state or foreign country)						
(b) Primary activity						
(a) Name, address, and EIN of entity						

KAPPA ALPHA THETA FRATERNITY 36-6135287 Page 5 Schedule R (Form 990) 2013 GROU Part VII Supplemental Information GROUP RETURN Provide additional information for responses to questions on Schedule R (see instructions).

FORM 990 LINE H(B) - ORGANIZATIONS IN	LIST OF AFFILIATED CLUDED IN GROUP RETURN	STATEMENT 1
NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
ALPHA CHAPTER OF KAPPA ALPHA THETA	904 S COLLEGE AVE - GREENCASTLE, IN 46135-1951	35-0867562
BETA CHAPTER OF KAPPA ALPHA THETA	441 N. WOODLAWN AVENUE - BLOOMINGTON, IN 47408-3932	35-0432050
GAMMA CHAPTER OF KAPPA ALPHA THETA	825 W. HAMPTON DRIVE - INDIANAPOLIS, IN 46208	35-0867363
DELTA CHAPTER OF KAPPA ALPHA THETA	611 EAST DANIEL STREET - CHAMPAIGN, IL 61820-6213	37-0359350
ETA CHAPTER OF KAPPA ALPHA THETA	1414 WASHTENAW AVE - ANN ARBOR, MI 48104-3183	38-1375371
IOTA CHAPTER OF KAPPA ALPHA THETA	519 STEWART AVENUE - ITHACA, NY 14850	16-1164377
KAPPA CHAPTER OF KAPPA ALPHA THETA	1433 TENNESSEE - LAWRENCE, KS 66044-3481	48-0543691
LAMBDA CHAPTER OF KAPPA ALPHA THETA	215 S PROSPECT ST - BURLINGTON, VT 05401-3519	46-2452857
GAMMA DEUTERON CHAPTER OF KAPPA ALPHA THETA	179 W. WINTER STREET - DELAWARE, OH 43015	31-4389978
MU CHAPTER OF KAPPA ALPHA THETA	ALLEGHENY COLLEGE, BOX 178 - MEADVILLE, PA 16335	25-6086538
NU CHAPTER OF KAPPA ALPHA THETA	PO BOX 159 HANOVER COLLEGE - HANOVER, IN 47243	35-1041334
OMICRON CHAPTER OF KAPPA ALPHA THETA	653 W. 28TH STREET - LOS ANGELES, CA 90007	95-0890340
PI CHAPTER OF KAPPA ALPHA THETA	CAMPUS PROGRAMS & ORGANIZATIONS - ALBION, MI 49224	38-2510011
RHO CHAPTER OF KAPPA ALPHA THETA	1545 'S' STREET - LINCOLN, NE 68508	47-0207480
TAU CHAPTER OF KAPPA ALPHA THETA	619 UNIVERSITY PLACE - EVANSTON, IL 60201	36-2191771
UPSILON CHAPTER OF KAPPA ALPHA THETA	1012 5TH STREET S.E MINNEAPOLIS, MN 55414	41-0345972

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KAPPA	ALPHA	THETA	PRATERNITY	GROUP	RETUR

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_	v		v	_	_	_	~	v	•

		30 0133207
	637 PRESIDENT'S DRIVE - STOCKTON, CA 95211	94-1490664
CHI CHAPTER OF KAPPA ALPHA THETA	306 WALNUT PLACE - SYRACUSE, NY 13210	15-0354780
PSI CHAPTER OF KAPPA ALPHA THETA	108 LANGDON ST MADISON, WI 53703	39-0385840
	2723 DURANT AVE - BERKLEY, CA 94704	94-1158472
	1861 INDIANOLA AVE COLUMBUS, OH 43201	31-4221872
	75 WATERMAN ST., BOX 1656 - PROVIDENCE, RI 02912-1168	05-0401170
ALPHA ETA CHAPTER OF KAPPA ALPHA THETA	204 24TH AVENUE S NASHVILLE, TN 37212	62-1316998
	2401 PEARL STREET - AUSTIN, TX 78705	74-1135209
	4521 17TH AVENUE NE - SEATTLE, WA 98105	91-0277810
ALPHA MU CHAPTER OF KAPPA ALPHA THETA	603 KENTUCKY BOULEVARD - COLUMBIA, MO 65201	43-0349100
ALPHA NU CHAPTER OF KAPPA ALPHA THETA	1020 GERALD AVE MISSOULA, MT 59801	81-0230943
ALPHA XI CHAPTER OF KAPPA ALPHA THETA	1472 KINCAID STREET - EUGENE, OR 97401	93-0202225
ALPHA OMICRON CHAPTER OF KAPPA ALPHA THETA	845 CHAUTAUQUA AVENUE - NORMAN, OK 73069	73-0308390
ALPHA PI CHAPTER OF KAPPA ALPHA THETA	2500 UNIVERSITY AVE GRAND FORKS, ND 58203	45-0173340
ALPHA RHO CHAPTER OF KAPPA ALPHA THETA	725 E. CLARK - VERMILLION, SD 57069	46-0224824
ALPHA SIGMA CHAPTER OF KAPPA ALPHA THETA	850 NE MONROE ST PULLMAN, WA 99163	91-0123837
ALPHA TAU CHAPTER OF KAPPA ALPHA THETA	2711 CLIFTON AVE CINCINNATI, OH 45220	31-0539242
ALPHA UPSILON CHAPTER OF KAPPA ALPHA THETA	1700 SW COLLEGE - TOPEKA, KS 66621	48-0291460

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KAPPA ALPHA THETA FRATERNITY GROUP RETUR

ALPHA PHI CHAPTER OF KAPPA ALPHA THETA	928 BROADWAY STREET - NEW ORLEANS, LA 70118-5137	72-0804517
ALPHA CHI CHAPTER OF KAPPA ALPHA THETA	607 N RUSSELL ST - WEST LAFAYETTE, IN 47906-2826	35-1578646
ALPHA PSI CHAPTER OF KAPPA ALPHA THETA	711 E. BOLDT WAY SPC 502 - APPLETON, WI 54911	39-1251208
	1050 N. MOUNTAIN AVENUE - TUCSON, AZ 85719	86-0031005
BETA EPSILON CHAPTER OF KAPPA ALPHA THETA	465 NW 23RD STREET - CORVALLIS, OR 97330	93-0202220
BETA ZETA CHAPTER OF KAPPA ALPHA THETA	1323 W. UNIVERSITY AVENUE - STILLWATER, OK 74074	73-0308395
BETA ETA CHAPTER OF KAPPA ALPHA THETA	130 SOUTH 39TH STREET - PHILADELPHIA, PA 19104	23-2496933
BETA THETA CHAPTER OF KAPPA ALPHA THETA	PO BOX 3007 - MOSCOW, ID 83843	82-0200817
BETA IOTA CHAPTER OF KAPPA ALPHA THETA	1333 UNIVERSITY AVE BOULDER, CO 80302-6213	84-0241230
BETA KAPPA CHAPTER OF KAPPA ALPHA THETA	1335 - 34TH ST DES MOINES, IA 50311	42-0351495
BETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	155 RICHMOND ROAD - WILLIAMSBURG, VA 23185-3627	54-0819839
	863 N. SIERRA STREET - RENO, NV 89503	88-0034267
BETA NU CHAPTER OF KAPPA ALPHA THETA	510 W. PARK AVENUE - TALLAHASSEE, FL 32301	59-0636363
BETA XI CHAPTER OF KAPPA ALPHA THETA	736 HILGARD AVENUE - LOS ANGELES, CA 90024	95-0890350
BETA OMICRON CHAPTER OF KAPPA ALPHA THETA	823 E. BURLINGTON ST IOWA CITY, IA 52240-5113	42-0351500
BETA PI CHAPTER OF KAPPA ALPHA THETA	303 OAKHILL AVENUE - EAST LANSING, MI 48823-3243	38-0706010
BETA RHO CHAPTER OF KAPPA ALPHA THETA	006 BRYAN CENTER BOX 90840 - DURHAM, NC 27708-0840	56-6086402
GAMMA NU CHAPTER OF KAPPA ALPHA THETA	1262 12TH STREET NORTH - FARGO, ND 58102	45-0226532

DELTA EPSILON CHAPTER OF KAPPA ALPHA THETA	SUN DEVIL INVOLVEMENT CTR, PO BOX 871301 - TEMPE, AZ 85287-1301	86-6030844
DELTA OMEGA CHAPTER OF KAPPA ALPHA THETA	1503 ATHENS DRIVE - COLLEGE STATION, TX 77840	74-2107148
EPSILON RHO CHAPTER OF KAPPA ALPHA THETA	39 UNIVERSITY DRIVE - B838 - BETHLEHEM, PA 18015	23-2319235
EPSILON SIGMA CHAPTER OF KAPPA ALPHA THETA	1014 ARROYO DRIVE - IRVINE, CA 92617	33-0087836
EPSILON TAU CHAPTER OF KAPPA ALPHA THETA	277 CROWN STREET - NEW HAVEN, CT 06511	62-1252143
EPSILON UPSILON CHAPTER OF KAPPA ALPHA THETA	534 W 114TH ST - NEW YORK, NY 10025-7804	06-1164535
EPSILON PHI CHAPTER OF KAPPA ALPHA THETA	REYNOLDS CLUB, ROOM 001, 5706 S. UNIVERSITY AVE CHICAGO, IL 60637	36-3497845
EPSILON PSI CHAPTER OF KAPPA ALPHA THETA	28 WESTHAMPTON WAY - RICHMOND, VA 23173	54-1411448
EPSILON OMEGA CHAPTER OF KAPPA ALPHA THETA	50 S. LINCOLN ST. BOX 1440 - WASHINGTON, PA 15301-4812	25-1565046
ZETA ETA CHAPTER OF KAPPA ALPHA THETA	429 N. CHURCH STREET, CPO F - SPARTANBURG, SC 29303-3663	57-0876739
ZETA THETA CHAPTER OF KAPPA ALPHA THETA	180 CALIFORNIA BLVD - SAN LUIS OBISPO, CA 93405	93-0987363
EPSILON EPSILON CHAPTER OF KAPPA ALPHA THETA	PO BOX 85615 - WACO, TX 76798	74-2422871
PHI DEUTERON CHAPTER OF KAPPA ALPHA THETA	585 COWELL LANE - STANFORD, CA 94305-8512	94-2747663
EPSILON ZETA CHAPTER OF KAPPA ALPHA THETA	PO BOX 2289 - OXFORD, MS 38655	64-0652494
EPSILON ETA CHAPTER OF KAPPA ALPHA THETA	600 W. WALNUT STREET - DANVILLE, KY 40422	61-0982125
EPSILON IOTA CHAPTER OF KAPPA ALPHA THETA	501 WESTMINSTER AVE, CBOX 660 - FULTON, MO 65251-8660	43-1238588
	PO BOX 1773 - CARLISLE, PA 17013-2896	23-2237448
	KAPPA ALPHA THETA, 4143 FRIST CAMPUS CTR - PRINCETON, NJ 08544	22-2547141

EPSILON OMICRON CHAPTER OF KAPPA ALPHA THETA	201 COLLEGE AVENUE - ASHLAND, VA 23005	54-1264288
EPSILÓN PI CHAPTER OF KAPPA ALPHA THETA	BUCKNELL UNIVERSITY BOX C3945 - LEWISBURG, PA 17837	23-2343442
DELTA ZETA CHAPTER OF KAPPA ALPHA THETA	KAO EMORY UNIV. PKG CTR, 605 ASBURY CIR, PO MM - ATLANTA, GA 30322	23-7105000
DELTA ETA CHAPTER OF KAPPA ALPHA THETA	1517 MCCAIN LANE - MANHATTAN, KS 66502	48-0673098
DELTA THETA CHAPTER OF KAPPA ALPHA THETA	715 SW 10TH STREET - GAINESVILLE, FL 32601	59-0968099
DELTA IOTA CHAPTER OF KAPPA ALPHA THETA	1119 WHEELOCK STUDENT CENTER - TACOMA, WA 98416	91-6057588
DELTA KAPPA CHAPTER OF KAPPA ALPHA THETA	101 LSU STUDENT UNION BX 25112 - BATON ROUGE, LA 70803	72-0626670
DELTA OMICRON CHAPTER OF KAPPA ALPHA THETA	PO BOX 866629 - TUSCALOOSA, AL 35486 0060	63-0514585
DELTA UPSILON CHAPTER OF KAPPA ALPHA THETA	128 POWELL BUILDING, EASTERN KY UNIVERSITY - RICHMOND, KY 40475	61-1060002
DELTA PHI CHAPTER OF KAPPA ALPHA THETA	5454 UNIVERSITY STATION - CLEMSON, SC 29632 1001	23-7271773
DELTA CHI CHAPTER OF KAPPA ALPHA THETA	127 CHANCELLOR STREET - CHARLOTTESVILLE, VA 22903	54-1086861
GAMMA PI CHAPTER OF KAPPA ALPHA THETA	2239 KNAPP STREET - AMES, IA 50014	42-0681123
	6551 EL COLEGIO ROAD - GOLETA, CA 93117	95-3467067
GAMMA TAU CHAPTER OF KAPPA ALPHA THETA	3210 E 5TH PL - TULSA, OK 74104-3115	73-6112078
GAMMA UPSILON CHAPTER OF KAPPA ALPHA THETA	2026 ARMSTRONG STUDENT CENTER, 550 E. SPRING ST - OXFORD, OH 45056	23-7109591
GAMMA PHI CHAPTER OF KAPPA ALPHA THETA	19 GREEK CIRCLE - LUBBOCK, TX-79416-5815	75-6061280
	5317 N. MILLBROOK AVENUE - FRESNO, CA 93710-7315	94-1376051

		
GAMMA PSI CHAPTER OF KAPPA ALPHA THETA	TCU BOX 294515 - FT. WORTH, TX 76129	75-1510946
	7407 PRINCETON AVE - COLLEGE PARK, MD 20740-3304	52-0608426
GAMMA OMEGA CHAPTER OF KAPPA ALPHA THETA	201 WIRE RD., THE VILLAGE, BOX #14 - AUBURN, AL 36849	23-7094288
DELTA DELTA CHAPTER OF KAPPA ALPHA THETA	280 BOYER AVE - WALLA WALLA, WA 99362-2044	36-3195441
BETA SIGMA CHAPTER OF KAPPA ALPHA THETA	3108 UNIVERSITY BLVD - DALLAS, TX 75205	75-0834624
BETA TAU CHAPTER OF KAPPA ALPHA THETA	200 N. MULBERRY ST - GRANVILLE, OH 43023	31-6077958
BETA PHI CHAPTER OF KAPPA ALPHA THETA	400 LYONS HALL - UNIVERSITY PARK, PA 16802	23-7097425
BETA OMEGA CHAPTER OF KAPPA ALPHA THETA	1015 N NEVADA AVE - COLORADO SPRINGS, CO 80903-2469	84-0405198
GAMMA DELTA CHAPTER OF KAPPA ALPHA THETA	338 S. MILLEDGE AVENUE - ATHENS, GA 30605-1048	58-0595274
GAMMA ZETA CHAPTER OF KAPPA ALPHA THETA	U OF CONNECTICUT, HUSKY VILLAGE, A2 - STORRS MANSFIELD, CT 06269	51-0243424
GAMMA THETA CHAPTER OF KAPPA ALPHA THETA	1077 MOREWOOD AVE - PITTSBURGH, PA 15213	25-1309163
GAMMA IOTA CHAPTER OF KAPPA ALPHA THETA	329 COLUMBIA TERRACE - LEXINGTON, KY 40508	61-0450152
ZETA MU CHAPTER OF KAPPA ALPHA THETA	350 MEMORIAL DRIVE - CAMBRIDGE, MA 02139	04-3098428
ZETA NU CHAPTER OF KAPPA ALPHA THETA	200 PARKWAY CIRCLE - DAVIS, CA 95616	68-0291571
ZETA XI CHAPTER OF KAPPA ALPHA THETA	10 ARROW ST - CAMBRIDGE, MA 02138-5102	04-3177955
ZETA OMICRON CHAPTER OF KAPPA ALPHA THETA	PO BOX 7243 - WINSTON SALEM, NC 27109	46-2468733
ZETA RHO CHAPTER OF KAPPA ALPHA THETA	9500 GILMAN DRIVE, DEPT 0077 - LA JOLLA, CA 92093-0077	31-1469417
ZETA SIGMA CHAPTER OF KAPPA ALPHA THETA	402 W. COLLEGE AVE, UNIT 1077 - ADA, OH 45810	34-1770652

ZETA TAU CHAPTER OF KAPPA ALPHA THETA	301B DAVID HOLLOWELL DRIVE - NEWARK, DE 19716	31-1469420
ZETA ÙPSILON CHAPTER OF KAPPA ALPHA THETA	PO BOX 830688, SU 21 - RICHARDSON, TX 75083-0688	31-1469422
ETA ETA CHAPTER OF KAPPA ALPHA THETA	2112 CLEVELAND BOULEVARD - CALDWELL, ID 83605	82-0525909
ETA THETA CHAPTER OF KAPPA ALPHA THETA	4400 GREEK COURT - ORLANDO, FL 32816	59-3671767
ETA IOTA CHAPTER OF KAPPA ALPHA THETA	5998 ALCALA PARK, SLP301 - SAN DIEGO, CA 92110	91-2078836
ETA KAPPA CHAPTER OF KAPPA ALPHA THETA	1 JOHN CARROLL BLVD - CLEVELAND, OH 44118	34-1968556
ETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	981 FREMONT ST SANTA CLARA, CA 95050	04-3777901
ETA MU CHAPTER OF KAPPA ALPHA THETA	C/O: SAC, 1600 CAMPUS ROAD - LOS ANGELES, CA 90041	32-0126362
ETA NU CHAPTER OF KAPPA ALPHA THETA	555 N SHERIDAN ROAD - LAKE FOREST, IL 60045	33-1104233
ETA XI CHAPTER OF KAPPA ALPHA THETA	275 MOUNT CARMEL AVE. BOX #31 - HAMDEN, CT 06518-1733	20-5477391
ETA OMICRON CHAPTER OF KAPPA ALPHA THETA	1 UNF DRIVE - JACKSONVILLE, FL 32224	65-1296813
ETA RHO CHAPTER OF KAPPA ALPHA THETA	285 WARREN SERVICE DR, MSC3518 - HARRISONBURG, VA 22807	51-0645634
ETA SIGMA CHAPTER OF KAPPA ALPHA THETA	1 UNIVERSITY DRIVE - ORANGE, CA 92866	61-1551175
	401 W. KENNEDY BLVD., BOX P - TAMPA, FL 33606	27-3259553
	2130 FULTON ST, UNIVERSITY CENTER 4TH FLOOR, ATTN: SLE - SAN FRANCISCO, CA	45-3013965
ETA PHI CHAPTER OF KAPPA ALPHA THETA	1900 BELMONT BLVD - NASHVILLE, TN 37212-3757	45-3014286
ETA PI CHAPTER OF KAPPA ALPHA THETA	11921 CARLTON ROAD - CLEVELAND, OH 44106	51-0645633
	1 LMU DR., STUDENT PROG. & LEADERSHIP - LOS ANGELES, CA 90045-2623	95-4839344

ZETA PHI CHAPTER OF KAPPA ALPHA THETA	CAMPUS LIFE OFFICE, 24255 PACIFIC COAST HWY - MALIBU, CA 90263	91-1829440
ZETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	COLLEGE OF CHARLESTON/97 WENTWORTH ANX - CHARLESTON, SC 29424	57-0904066
ZETA IOTA CHAPTER OF KAPPA ALPHA THETA	4 FRANK PARSONS WAY - LEXINGTON, VA 24450-1787	54-1489157
ETA CHI CHAPTER OF KAPPA ALPHA THETA	C/O MONICA ALMEIDA, ETA CHI CEO, 872 BEACON STREET APT 3 - BOSTON, MA 02215	
ALPHA BETA CHAPTER OF KAPPA ALPHA THETA	500 COLLEGE AVENUE - SWARTHMORE, PA 19081	46-2270360
BETA GAMMA CHAPTER OF KAPPA ALPHA THETA	708 CITY PARK AVENUE - FT. COLLINS, CO 80521	47-3250290
ZETA CHI CHAPTER OF KAPPA ALPHA THETA	3400 N. CHARLES ST; MATTIN CENTER 131 - BALTIMORE, MD 21218	46-3368874
ETA PSI CHAPTER OF KAPPA ALPHA THETA	94 CURTIS STREET - SOMERVILLE, MA 02144	46-3379272
ETA OMEGA CHAPTER OF KAPPA ALPHA THETA	20 N. GRAND BLVD MSC #1280 - ST. LOUIS, MO 63103	46-3485657
THETA THETA CHAPTER OF KAPPA ALPHA THETA	2709A FRATERNITY COURT - RALEIGH, NC 27606	46-3360201
THETA IOTA CHAPTER OF KAPPA ALPHA THETA	1800 NORTH OAK STREET, #421 - ROSSLYN, VA 22209	46-4555348
THETA KAPPA CHAPTER OF KAPPA ALPHA THETA	8740 FOUNDERS ROAD - INDIANAPOLIS, IN 46268	47-3139896

, KAPPA ALPHA THETA FRATERNITY G	ROUP RETUR	36-6135287
ALPHA PHI CHAPTER OF KAPPA ALPHA THETA	392 AUDUBON STREET - NEW ORLEANS, LA 70118-5137	72-0804517
ALPHA CHI CHAPTER OF KAPPA ALPHA THETA	607 N RUSSELL ST - WEST LAFAYETTE, IN 47906-2826	35-1578646
ALPHA PSI CHAPTER OF KAPPA ALPHA THETA	711 E. BOLDT WAY SPC 502 - APPLETON, WI 54911	39-1251208
BETA DELTA CHAPTER OF KAPPA ALPHA THETA	1050 N. MOUNTAIN AVENUE - TUCSON, AZ 85719	86-0031005
BETA EPSILON CHAPTER OF KAPPA ALPHA THETA	465 NW 23RD STREET - CORVALLIS, OR 97330	93-0202220
BETA ZETA CHAPTER OF KAPPA ALPHA THETA	1323 W. UNIVERSITY AVENUE - STILLWATER, OK 74074	73-0308395
BETA ETA CHAPTER OF KAPPA ALPHA THETA	130 SOUTH 39TH STREET - PHILADELPHIA, PA 19104	23-2496933
BETA THETA CHAPTER OF KAPPA ALPHA THETA	PO BOX 3007 - MOSCOW, ID 83843	82-0200817
BETA IOTA CHAPTER OF KAPPA ALPHA THETA	1333 UNIVERSITY AVE BOULDER, CO 80302-6213	84-0241230
BETA KAPPA CHAPTER OF KAPPA ALPHA THETA	1335 - 34TH ST DES MOINES, IA 50311	42-0351495
BETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	155 RICHMOND ROAD - WILLIAMSBURG, VA 23185-3627	54-0819839
BETA MU CHAPTER OF KAPPA ALPHA THETA	863 N. SIERRA STREET - RENO, NV 89503	88-0034267
BETA NU CHAPTER OF KAPPA ALPHA THETA	510 W. PARK AVENUE - TALLAHASSEE, FL 32301	59-0636363
BETA XI CHAPTER OF KAPPA ALPHA THETA	736 HILGARD AVENUE - LOS ANGELES, CA 90024	95-0890350
BETA OMICRON CHAPTER OF KAPPA ALPHA THETA	823 E. BURLINGTON ST IOWA CITY, IA 52240-5113	42-0351500
BETA PI CHAPTER OF KAPPA ALPHA THETA	303 OAKHILL AVENUE - EAST LANSING, MI 48823-3243	38-0706010
BETA RHO CHAPTER OF KAPPA ALPHA THETA	006 BRYAN CENTER BOX 90840 - DURHAM, NC 27708-0840	56-6086402
GAMMA NU CHAPTER OF KAPPA ALPHA THETA	1262 12TH STREET NORTH - FARGO, ND 58102	45-0226532

DELTA EPSILON CHAPTER OF KAPPA ALPHA THETA	SUN DEVIL INVOLVEMENT CTR, PO BOX 871301 - TEMPE, AZ 85287-1301	86-6030844
DELTA OMEGA CHAPTER OF KAPPA ALPHA THETA	1503 ATHENS DRIVE - COLLEGE STATION, TX 77840	74-2107148
EPSILON RHO CHAPTER OF KAPPA ALPHA THETA	39 UNIVERSITY DRIVE - B838 - BETHLEHEM, PA 18015	23-2319235
EPSILON SIGMA CHAPTER OF KAPPA ALPHA THETA	1014 ARROYO DRIVE - IRVINE, CA 92617	33-0087836
EPSILON TAU CHAPTER OF KAPPA ALPHA THETA	CT 06511	
EPSILON UPSILON CHAPTER OF KAPPA ALPHA THETA	534 W 114TH ST - NEW YORK, NY 10025-7804	06-1164535
EPSILON PHI CHAPTER OF KAPPA ALPHA THETA	REYNOLDS CLUB, ROOM 001, 5706 S. UNIVERSITY AVE CHICAGO, IL 60637	36-3497845
EPSILON PSI CHAPTER OF KAPPA ALPHA THETA	28 WESTHAMPTON WAY - RICHMOND, VA 23173	54-1411448
EPSILON OMEGA CHAPTER OF KAPPA ALPHA THETA	50 S. LINCOLN ST. BOX 1440 - WASHINGTON, PA 15301-4812	25-1565046
ZETA ETA CHAPTER OF KAPPA ALPHA THETA	429 N. CHURCH STREET, CPO F - SPARTANBURG, SC 29303-3663	57-0876739
ZETA THETA CHAPTER OF KAPPA ALPHA THETA	180 CALIFORNIA BLVD - SAN LUIS OBISPO, CA 93405	93-0987363
EPSILON EPSILON CHAPTER OF KAPPA ALPHA THETA	PO BOX 85615 - WACO, TX 76798	74-2422871
PHI DEUTERON CHAPTER OF KAPPA ALPHA THETA	585 COWELL LANE - STANFORD, CA 94305-8512	94-2747663
EPSILON ZETA CHAPTER OF KAPPA ALPHA THETA	PO BOX 908 - UNIVERSITY, MS 38677	64-0652494
EPSILON ETA CHAPTER OF KAPPA ALPHA THETA	600 W. WALNUT STREET - DANVILLE, KY 40422	61-0982125
EPSILON IOTA CHAPTER OF KAPPA ALPHA THETA	501 WESTMINSTER AVE, CBOX 660 - FULTON, MO 65251-8660	43-1238588
EPSILON LAMBDA CHAPTER OF KAPPA ALPHA THETA	PO BOX 1773 - CARLISLE, PA 17013-2896	23-2237448
EPSILON MU CHAPTER OF KAPPA ALPHA THETA	KAPPA ALPHA THETA, C/O HELEN DAIFOTIS, 4143 FRIST CAMPUS CTR - PRINCETON, NJ	22-2547141

KAPPA ALPHA THETA FRATERNITY GROUP RETUR 36-6135287			
<u> </u>	201 COLLEGE AVENUE - ASHLAND, VA 23005		
EPSILON PI CHAPTER OF KAPPA ALPHA THETA	BUCKNELL UNIVERSITY BOX C3945 - LEWISBURG, PA 17837	23-2343442	
DELTA ZETA CHAPTER OF KAPPA ALPHA THETA	KAO EMORY UNIV. PKG CTR, 605 ASBURY CIR, PO MM - ATLANTA, GA 30322	23-7105000	
DELTA ETA CHAPTER OF KAPPA ALPHA THETA	1517 MCCAIN LANE - MANHATTAN, KS 66502	48-0673098	
DELTA THETA CHAPTER OF KAPPA ALPHA THETA	715 SW 10TH STREET - GAINESVILLE, FL 32601	59-0968099	
DELTA IOTA CHAPTER OF KAPPA ALPHA THETA	1119 WHEELOCK STUDENT CENTER - TACOMA, WA 98416	91-6057588	
DELTA KAPPA CHAPTER OF KAPPA ALPHA THETA	101 LSU STUDENT UNION BX 25112 - BATON ROUGE, LA 70803	72-0626670	
DELTA OMICRON CHAPTER OF KAPPA ALPHA THETA	PO BOX 866629 - TUSCALOOSA, AL 35486 0060	63-0514585	
DELTA UPSILON CHAPTER OF KAPPA ALPHA THETA	128 POWELL BUILDING, EASTERN KY UNIVERSITY - RICHMOND, KY 40475	61-1060002	
DELTA PHI CHAPTER OF KAPPA ALPHA THETA	5454 UNIVERSITY STATION - CLEMSON, SC 29632 1001	23-7271773	
DELTA CHI CHAPTER OF KAPPA ALPHA THETA	127 CHANCELLOR STREET - CHARLOTTESVILLE, VA 22903	54-1086861	
GAMMA PI CHAPTER OF KAPPA ALPHA THETA	2239 KNAPP STREET - AMES, IA 50014	42-0681123	
GAMMA RHO CHAPTER OF KAPPA ALPHA THETA	6551 EL COLEGIO ROAD - GOLETA, CA 93117	95-3467067	
GAMMA TAU CHAPTER OF KAPPA ALPHA THETA	3210 E 5TH PL - TULSA, OK 74104-3115	73-6112078	
	C/O 380 SHRIVER CENTER - OXFORD, OH 45056	23-7109591	
GAMMA PHI CHAPTER OF KAPPA ALPHA THETA	19 GREEK CIRCLE - LUBBOCK, TX 79416-5815	75-6061280	
GAMMA CHI CHAPTER OF KAPPA ALPHA THETA	5317 N. MILLBROOK AVENUE - FRESNO, CA 93710-7315	94-1376051	

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GAMMA PSI CHAPTER OF KAPPA

ALPHA THETA

TCU BOX 294515 - FT. WORTH, TX 75-1510946

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GAMMA MU CHAPTER OF KAPPA ALPHA THETA	7407 PRINCETON AVE - COLLEGE PARK, MD 20740-3304	52-0608426
GAMMA OMEGA CHAPTER OF KAPPA ALPHA THETA	201 WIRE RD., THE VILLAGE, BOX #14 - AUBURN, AL 36849	23-7094288
DELTA DELTA CHAPTER OF KAPPA ALPHA THETA	280 BOYER AVE - WALLA WALLA, WA 99362-2044	36-3195441
BETA SIGMA CHAPTER OF KAPPA ALPHA THETA	3108 UNIVERSITY BLVD - DALLAS, TX 75205	75-0834624
BETA TAU CHAPTER OF KAPPA ALPHA THETA	200 N. MULBERRY ST - GRANVILLE, OH 43023	31-6077958
BETA PHI CHAPTER OF KAPPA ALPHA THETA	10 WOLF HALL POLLOCK COMMONS AREA - UNIVERSITY PARK, PA 16802	23-7097425
BETA OMEGA CHAPTER OF KAPPA ALPHA THETA	1015 N NEVADA AVE - COLORADO SPRINGS, CO 80903-2469	84-0405198
GAMMA DELTA CHAPTER OF KAPPA ALPHA THETA	338 S. MILLEDGE AVENUE - ATHENS, GA 30605-1048	58-0595274
GAMMA ZETA CHAPTER OF KAPPA ALPHA THETA	U OF CONNECTICUT, HUSKY VILLAGE, A2 - STORRS MANSFIELD, CT 06269	51-0243424
GAMMA THETA CHAPTER OF KAPPA ALPHA THETA	1077 MOREWOOD AVE - PITTSBURGH, PA 15213	25-1309163
GAMMA IOTA CHAPTER OF KAPPA ALPHA THETA	329 COLUMBIA TERRACE - LEXINGTON, KY 40508	61-0450152
ZETA MU CHAPTER OF KAPPA ALPHA THETA	350 MEMORIAL DRIVE - CAMBRIDGE, MA 02139	04-3098428
ZETA NU CHAPTER OF KAPPA ALPHA THETA	200 PARKWAY CIRCLE - DAVIS, CA 95616	68-0291571
ZETA XI CHAPTER OF KAPPA ALPHA THETA	10 ARROW ST - CAMBRIDGE, MA 02138-5102	04-3177955
ZETA OMICRON CHAPTER OF KAPPA ALPHA THETA	PO BOX 7243 - WINSTON SALEM, NC 27109	46-2468733
ZETA RHO CHAPTER OF KAPPA ALPHA THETA	9500 GILMAN DRIVE, DEPT 0077 - LA JOLLA, CA 92093-0077	31-1469417
ZETA SIGMA CHAPTER OF KAPPA ALPHA THETA	402 W. COLLEGE AVE, UNIT 1077 - ADA, OH 45810	34-1770652
ZETA TAU CHAPTER OF KAPPA ALPHA THETA	301B DAVID HOLLOWELL DRIVE - NEWARK, DE 19716	31-1469420

, KAPPA ALPHA THETA FRATERNITY G	ROUP RETUR	36-6135287
ZETA UPSILON CHAPTER OF KAPPA ALPHA THETA	PO BOX 830688, SU 21 - RICHARDSON, TX 75083-0688	31-1469422
ETA ETA CHAPTER OF KAPPA ALPHA THETA		
ETA THETA CHAPTER OF KAPPA ALPHA THETA	4400 GREEK COURT - ORLANDO, FL 32816	59-3671767
ETA IOTA CHAPTER OF KAPPA ALPHA THETA	5998 ALCALA PARK, SLP301 - SAN DIEGO, CA 92110	91-2078836
ETA KAPPA CHAPTER OF KAPPA ALPHA THETA	1 JOHN CARROLL BLVD - CLEVELAND, OH 44118	34-1968556
ETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	981 FREMONT ST SANTA CLARA, CA 95050	04-3777901
ETA MU CHAPTER OF KAPPA ALPHA THETA	C/O: SAC, 1600 CAMPUS ROAD - LOS ANGELES, CA 90041	32-0126362
ETA NU CHAPTER OF KAPPA ALPHA THETA	555 N SHERIDAN ROAD - LAKE FOREST, IL 60045	33-1104233
ETA XI CHAPTER OF KAPPA ALPHA THETA	275 MOUNT CARMEL AVE. BOX #31 - HAMDEN, CT 06518-1733	20-5477391
ETA OMICRON CHAPTER OF KAPPA ALPHA THETA	1 UNF DRIVE - JACKSONVILLE, FL 32224	65-1296813
ETA RHO CHAPTER OF KAPPA ALPHA THETA	285 WARREN SERVICE DR, MSC3518 - HARRISONBURG, VA 22807	51-0645634
ETA SIGMA CHAPTER OF KAPPA ALPHA THETA	1 UNIVERSITY DRIVE - ORANGE, CA 92866	61-1551175
ETA TAU CHAPTER OF KAPPA ALPHA THETA	401 W. KENNEDY BLVD., BOX P - TAMPA, FL 33606	27-3259553
ETA UPSILON CHAPTER OF KAPPA ALPHA THETA	2130 FULTON ST, UNIVERSITY CENTER 4TH FLOOR, ATTN: SLE - SAN FRANCISCO, CA	45-3013965
ETA PHI CHAPTER OF KAPPA ALPHA THETA	1900 BELMONT BLVD - NASHVILLE, TN 37212-3757	45-3014286
ETA PI CHAPTER OF KAPPA ALPHA THETA	11921 CARLTON ROAD - CLEVELAND, OH 44106	51-0645633
	1 LMU DR., STUDENT PROG. & LEADERSHIP - LOS ANGELES, CA 90045-2623	95-4839344
ZETA PHI CHAPTER OF KAPPA ALPHA THETA	CAMPUS LIFE OFFICE, 24255 PACIFIC COAST HWY - MALIBU, CA 90263	91-1829440

, KAPPA ALPHA THETA FRATERNITY G	ROUP RETUR	36-6135287
ZETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	STERN STUDENT CTR, 66 GEORGE STREET - CHARLESTON, SC 29424	57-0904066
ZETA IOTA CHAPTER OF KAPPA ALPHA THETA	4 FRANK PARSONS WAY - LEXINGTON, VA 24450-1787	54-1489157
ETA CHI CHAPTER OF KAPPA ALPHA THETA	C/O MONICA ALMEIDA, ETA CHI CEO, 872 BEACON STREET APT 3 - BOSTON, MA 02215	46-0648516
ALPHA BETA CHAPTER OF KAPPA	500 COLLEGE AVENUE -	46-2270360

SWARTHMORE, PA 19081

ALPHA THETA

	IST OF AFFILIATED LUDED IN GROUP RETURN	STATEMENT 1
NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
ALPHA CHAPTER OF KAPPA ALPHA THETA	904 S COLLEGE AVE - GREENCASTLE, IN 46135-1951	35-0867562
BETA CHAPTER OF KAPPA ALPHA THETA	441 N. WOODLAWN AVENUE - BLOOMINGTON, IN 47408-3932	35-0432050
GAMMA CHAPTER OF KAPPA ALPHA THETA	825 W. HAMPTON DRIVE - INDIANAPOLIS, IN 46208	35-0867363
DELTA CHAPTER OF KAPPA ALPHA THETA	611 EAST DANIEL STREET - CHAMPAIGN, IL 61820-6213	37-0359350
ETA CHAPTER OF KAPPA ALPHA THETA	1414 WASHTENAW AVE - ANN ARBOR, MI 48104-3183	38-1375371
IOTA CHAPTER OF KAPPA ALPHA THETA	519 STEWART AVENUE - ITHACA, NY 14850	16-1164377
KAPPA CHAPTER OF KAPPA ALPHA THETA	1433 TENNESSEE - LAWRENCE, KS 66044-3481	48-0543691
LAMBDA CHAPTER OF KAPPA ALPHA THETA	215 S PROSPECT ST - BURLINGTON, VT 05401-3519	46-2452857
GAMMA DEUTERON CHAPTER OF KAPPA ALPHA THETA	179 W. WINTER STREET - DELAWARE, OH 43015	31-4389978
MU CHAPTER OF KAPPA ALPHA THETA	ALLEGHENY COLLEGE, BOX 178 - MEADVILLE, PA 16335	25-6086538
NU CHAPTER OF KAPPA ALPHA THETA	PO BOX 159 HANOVER COLLEGE - HANOVER, IN 47243	35-1041334
OMICRON CHAPTER OF KAPPA ALPHA THETA	653 W. 28TH STREET - LOS ANGELES, CA 90007	95-0890340
PI CHAPTER OF KAPPA ALPHA THETA	CAMPUS PROGRAMS & ORGANIZATIONS - ALBION, MI 49224	38-2510011
RHO CHAPTER OF KAPPA ALPHA THETA	1545 'S' STREET - LINCOLN, NE 68508	47-0207480
TAU CHAPTER OF KAPPA ALPHA THETA	619 UNIVERSITY PLACE - EVANSTON, IL 60201	36-2191771
UPSILON CHAPTER OF KAPPA ALPHA THETA	1012 5TH STREET S.E MINNEAPOLIS, MN 55414	41-0345972

PHI CHAPTER OF KAPPA ALPHA THETA	637 PRESIDENT'S DRIVE ~ STOCKTON, CA 95211	94-1490664
	306 WALNUT PLACE - SYRACUSE, NY 13210	15-0354780
PSI CHAPTER OF KAPPA ALPHA THETA	108 LANGDON ST MADISON, WI 53703	39-0385840
OMEGA CHAPTER OF KAPPA ALPHA THETA	2723 DURANT AVE - BERKLEY, CA 94704	94-1158472
ALPHA GAMMA CHAPTER OF KAPPA ALPHA THETA	1861 INDIANOLA AVE COLUMBUS, OH 43201	31-4221872
ALPHA EPSILON CHAPTER OF KAPPA ALPHA THETA	75 WATERMAN ST., BOX 1656 - PROVIDENCE, RI 02912-1168	05-0401170
ALPHA ETA CHAPTER OF KAPPA ALPHA THETA	204 24TH AVENUE S NASHVILLE, TN 37212	62-1316998
	2401 PEARL STREET - AUSTIN, TX 78705	74-1135209
ALPHA LAMBDA CHAPTER OF KAPPA ALPHA THETA	4521 17TH AVENUE NE - SEATTLE, WA 98105	91-0277810
ALPHA MU CHAPTER OF KAPPA ALPHA THETA	603 KENTUCKY BOULEVARD - COLUMBIA, MO 65201	43-0349100
ALPHA NU CHAPTER OF KAPPA ALPHA THETA	1020 GERALD AVE MISSOULA, MT 59801	81-0230943
ALPHA XI CHAPTER OF KAPPA ALPHA THETA	1472 KINCAID STREET - EUGENE, OR 97401	93-0202225
ALPHA OMICRON CHAPTER OF KAPPA ALPHA THETA	845 CHAUTAUQUA AVENUE - NORMAN, OK 73069	73-0308390
ALPHA PI CHAPTER OF KAPPA ALPHA THETA	2500 UNIVERSITY AVE GRAND FORKS, ND 58203	45-0173340
ALPHA RHO CHAPTER OF KAPPA ALPHA THETA	725 E. CLARK - VERMILLION, SD 57069	46-0224824
ALPHA SIGMA CHAPTER OF KAPPA ALPHA THETA	850 NE MONROE ST PULLMAN, WA 99163	91-0123837
ALPHA TAU CHAPTER OF KAPPA ALPHA THETA	2711 CLIFTON AVE CINCINNATI, OH 45220	31-0539242
ALPHA UPSILON CHAPTER OF KAPPA ALPHA THETA	1700 SW COLLEGE - TOPEKA, KS 66621	48-0291460

, KAPPA ALPHA THETA FRATERNITY G	ROUP RETUR	36-6135287
ALPHA PHI CHAPTER OF KAPPA		
ALPHA CHI CHAPTER OF KAPPA ALPHA THETA	607 N RUSSELL ST - WEST LAFAYETTE, IN 47906-2826	35-1578646
ALPHA PSI CHAPTER OF KAPPA ALPHA THETA	711 E. BOLDT WAY SPC 502 - APPLETON, WI 54911	39-1251208
BETA DELTA CHAPTER OF KAPPA ALPHA THETA	1050 N. MOUNTAIN AVENUE - TUCSON, AZ 85719	86-0031005
BETA EPSILON CHAPTER OF KAPPA ALPHA THETA	465 NW 23RD STREET - CORVALLIS, OR 97330	93-0202220
BETA ZETA CHAPTER OF KAPPA ALPHA THETA	1323 W. UNIVERSITY AVENUE - STILLWATER, OK 74074	73-0308395
BETA ETA CHAPTER OF KAPPA ALPHA THETA	130 SOUTH 39TH STREET - PHILADELPHIA, PA 19104	23-2496933
BETA THETA CHAPTER OF KAPPA ALPHA THETA	PO BOX 3007 - MOSCOW, ID 83843	82-0200817
BETA IOTA CHAPTER OF KAPPA ALPHA THETA	1333 UNIVERSITY AVE BOULDER, CO 80302-6213	84-0241230
BETA KAPPA CHAPTER OF KAPPA ALPHA THETA	1335 - 34TH ST DES MOINES, IA 50311	42-0351495
BETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	155 RICHMOND ROAD - WILLIAMSBURG, VA 23185-3627	54-0819839
BETA MU CHAPTER OF KAPPA ALPHA THETA	863 N. SIERRA STREET - RENO, NV 89503	88-0034267
BETA NU CHAPTER OF KAPPA ALPHA THETA	510 W. PARK AVENUE - TALLAHASSEE, FL 32301	59-0636363
BETA XI CHAPTER OF KAPPA ALPHA THETA	736 HILGARD AVENUE - LOS ANGELES, CA 90024	95-0890350
BETA OMICRON CHAPTER OF KAPPA ALPHA THETA	823 E. BURLINGTON ST IOWA CITY, IA 52240-5113	42-0351500
BETA PI CHAPTER OF KAPPA ALPHA THETA	303 OAKHILL AVENUE - EAST LANSING, MI 48823-3243	38-0706010

ALPHA THETA

BETA RHO CHAPTER OF KAPPA

GAMMA NU CHAPTER OF KAPPA

ALPHA THETA

006 BRYAN CENTER BOX 90840 - 56-6086402

1262 12TH STREET NORTH - 45-0226532

DURHAM, NC 27708-0840

FARGO, ND 58102

DELTA PESILON CHAPTER OF KAPPA ALPHA THETA BOX 871301 - TEMPE, AZ 86-6030844 B2887-1301 DELTA, OMEGA CHAPTER OF KAPPA ALPHA THETA BOX 871301 - TEMPE, AZ 85287-1301 DELTA, OMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON RIO CHAPTER OF KAPPA ALPHA THETA BPSILON SIGNA CHAPTER OF KAPPA ALPHA THETA BPSILON SIGNA CHAPTER OF KAPPA ALPHA THETA BPSILON TAU CHAPTER OF KAPPA ALPHA THETA BPSILON UPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON PRI CHAPTER OF KAPPA ALPHA THETA BPSILON PRI CHAPTER OF KAPPA ALPHA THETA BPSILON PRI CHAPTER OF KAPPA ALPHA THETA BPSILON PRI CHAPTER OF KAPPA ALPHA THETA BPSILON DESCRIPTION CHAPTER OF KAPPA ALPHA THETA BPSILON PRI CHAPTER OF KAPPA ALPHA THETA BPSILON PRI CHAPTER OF KAPPA ALPHA THETA BPSILON OMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CMEGA CHAPTER OF KAPPA ALPHA THETA BPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON CHAPTER OF KAPPA ALPHA THETA BPSILON EFA CHAPTER OF KAPPA ALPHA THETA BPSILON EFA CHAPTER OF KAPPA ALPHA THETA BPSILON EFA CHAPTER OF KAPPA BPSILON EFA CHAPTER OF KAPPA ALPHA THETA BPSILON LAMBDA CHAPTER OF KAPPA BPSILON LAMBDA CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA BPSILON MU CHAPTER OF KAPPA B				
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### ALPHA THETA BETHLEHEM, PA 18015 ### EPSILON SIGMA CHAPTER OF KAPPA ALPHA THETA		DELTA OMEGA CHAPTER OF KAPPA ALPHA THETA	1503 ATHENS DRIVE - COLLEGE STATION, TX 77840	74-2107148
### ALPHA THETA 92617 ### EFSILON TAU CHAPTER OF KAPPA ALPHA THETA CT 06511 ### CF 06511 ### EFSILON UPSILON CHAPTER OF KAPPA ALPHA THETA CT 06511 ### CF 06607 ### CF 06607				23-2319235
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KAPPA ALPHA THETA FRATERNITY G	ROUP RETUR	36-6135287
EPSILON OMICRON CHAPTER OF KAPPA ALPHA THETA	201 COLLEGE AVENUE - ASHLAND, VA 23005	54-1264288
EPSILON PI CHAPTER OF KAPPA ALPHA THETA	BUCKNELL UNIVERSITY BOX C3945 - LEWISBURG, PA 17837	23-2343442
DELTA ZETA CHAPTER OF KAPPA ALPHA THETA	KAO EMORY UNIV. PKG CTR, 605 ASBURY CIR, PO MM - ATLANTA, GA 30322	23-7105000
DELTA ETA CHAPTER OF KAPPA ALPHA THETA	1517 MCCAIN LANE - MANHATTAN, KS 66502	48-0673098
DELTA THETA CHAPTER OF KAPPA ALPHA THETA	715 SW 10TH STREET - GAINESVILLE, FL 32601	59-0968099
DELTA IOTA CHAPTER OF KAPPA ALPHA THETA	1119 WHEELOCK STUDENT CENTER - TACOMA, WA 98416	91-6057588
DELTA KAPPA CHAPTER OF KAPPA ALPHA THETA	101 LSU STUDENT UNION BX 25112 - BATON ROUGE, LA 70803	72-0626670
DELTA OMICRON CHAPTER OF KAPPA ALPHA THETA	PO BOX 866629 - TUSCALOOSA, AL 35486 0060	63-0514585
DELTA UPSILON CHAPTER OF KAPPA ALPHA THETA	128 POWELL BUILDING, EASTERN KY UNIVERSITY - RICHMOND, KY 40475	61-1060002
DELTA PHI CHAPTER OF KAPPA ALPHA THETA	5454 UNIVERSITY STATION - CLEMSON, SC 29632 1001	23-7271773
DELTA CHI CHAPTER OF KAPPA ALPHA THETA	127 CHANCELLOR STREET - CHARLOTTESVILLE, VA 22903	54-1086861
GAMMA PI CHAPTER OF KAPPA ALPHA THETA	2239 KNAPP STREET - AMES, IA 50014	42-0681123
GAMMA RHO CHAPTER OF KAPPA ALPHA THETA	6551 EL COLEGIO ROAD - GOLETA, CA 93117	95-3467067
GAMMA TAU CHAPTER OF KAPPA ALPHA THETA	3210 E 5TH PL - TULSA, OK 74104-3115	73-6112078
GAMMA UPSILON CHAPTER OF KAPPA ALPHA THETA	C/O 380 SHRIVER CENTER - OXFORD, OH 45056	23-7109591
GAMMA PHI CHAPTER OF KAPPA ALPHA THETA	19 GREEK CIRCLE - LUBBOCK, TX 79416-5815	75-6061280

GAMMA CHI CHAPTER OF KAPPA ALPHA THETA

GAMMA PSI CHAPTER OF KAPPA

ALPHA THETA

5317 N. MILLBROOK AVENUE - 94-1376051

TCU BOX 294515 - FT. WORTH, TX 75-1510946

FRESNO, CA 93710-7315

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GAMMA MU CHAPTER OF KAPPA ALPHA THETA	7407 PRINCETON AVE - COLLEGE PARK, MD 20740-3304	52-0608426
GAMMA OMEGA CHAPTER OF KAPPA ALPHA THETA	201 WIRE RD., THE VILLAGE, BOX #14 - AUBURN, AL 36849	23-7094288
DELTA DELTA CHAPTER OF KAPPA ALPHA THETA	280 BOYER AVE - WALLA WALLA, WA 99362-2044	36-3195441
BETA SIGMA CHAPTER OF KAPPA ALPHA THETA	3108 UNIVERSITY BLVD - DALLAS, TX 75205	75-0834624
BETA TAU CHAPTER OF KAPPA ALPHA THETA	200 N. MULBERRY ST - GRANVILLE, OH 43023	31-6077958
BETA PHI CHAPTER OF KAPPA ALPHA THETA	10 WOLF HALL POLLOCK COMMONS AREA - UNIVERSITY PARK, PA 16802	23-7097425
BETA OMEGA CHAPTER OF KAPPA ALPHA THETA	1015 N NEVADA AVE - COLORADO SPRINGS, CO 80903-2469	84-0405198
GAMMA DELTA CHAPTER OF KAPPA ALPHA THETA	338 S. MILLEDGE AVENUE - ATHENS, GA 30605-1048	58-0595274
GAMMA ZETA CHAPTER OF KAPPA ALPHA THETA	U OF CONNECTICUT, HUSKY VILLAGE, A2 - STORRS MANSFIELD, CT 06269	51-0243424
GAMMA THETA CHAPTER OF KAPPA ALPHA THETA	1077 MOREWOOD AVE - PITTSBURGH, PA 15213	25-1309163
	329 COLUMBIA TERRACE - LEXINGTON, KY 40508	61-0450152
ZETA MU CHAPTER OF KAPPA ALPHA THETA	350 MEMORIAL DRIVE - CAMBRIDGE, MA 02139	04-3098428
ZETA NU CHAPTER OF KAPPA ALPHA THETA	200 PARKWAY CIRCLE - DAVIS, CA 95616	68-0291571
ZETA XI CHAPTER OF KAPPA ALPHA THETA	10 ARROW ST - CAMBRIDGE, MA 02138-5102	04-3177955
ZETA OMICRON CHAPTER OF KAPPA ALPHA THETA	PO BOX 7243 - WINSTON SALEM, NC 27109	46-2468733
ZETA RHO CHAPTER OF KAPPA ALPHA THETA	9500 GILMAN DRIVE, DEPT 0077 - LA JOLLA, CA 92093-0077	31-1469417
ZETA SIGMA CHAPTER OF KAPPA ALPHA THETA	402 W. COLLEGE AVE, UNIT 1077 - ADA, OH 45810	34-1770652
ZETA TAU CHAPTER OF KAPPA ALPHA THETA	301B DAVID HOLLOWELL DRIVE - NEWARK, DE 19716	31-1469420

ZETA UPSILON CHAPTER OF KAPPA ALPHA THETA	PO BOX 830688, SU 21 - RICHARDSON, TX 75083-0688	31-1469422
ETA ETA CHAPTER OF KAPPA ALPHA THETA	2112 CLEVELAND BOULEVARD - CALDWELL, ID 83605	82-0525909
ETA THETA CHAPTER OF KAPPA ALPHA THETA	4400 GREEK COURT - ORLANDO, FL 32816	59-3671767
ETA IOTA CHAPTER OF KAPPA ALPHA THETA	5998 ALCALA PARK, SLP301 - SAN DIEGO, CA 92110	91-2078836
ETA KAPPA CHAPTER OF KAPPA ALPHA THETA	1 JOHN CARROLL BLVD - CLEVELAND, OH 44118	34-1968556
ETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	981 FREMONT ST SANTA CLARA, CA 95050	04-3777901
ETA MU CHAPTER OF KAPPA ALPHA THETA	C/O: SAC, 1600 CAMPUS ROAD - LOS ANGELES, CA 90041	32-0126362
ETA NU CHAPTER OF KAPPA ALPHA THETA	555 N SHERIDAN ROAD - LAKE FOREST, IL 60045	33-1104233
ETA XI CHAPTER OF KAPPA ALPHA THETA	275 MOUNT CARMEL AVE. BOX #31 - HAMDEN, CT 06518-1733	20-5477391
ETA OMICRON CHAPTER OF KAPPA ALPHA THETA	1 UNF DRIVE - JACKSONVILLE, FL 32224	65-1296813
ETA RHO CHAPTER OF KAPPA ALPHA THETA	285 WARREN SERVICE DR, MSC3518 - HARRISONBURG, VA 22807	51-0645634
ETA SIGMA CHAPTER OF KAPPA ALPHA THETA	1 UNIVERSITY DRIVE - ORANGE, CA 92866	61-1551175
ETA TAU CHAPTER OF KAPPA ALPHA THETA	401 W. KENNEDY BLVD., BOX P - TAMPA, FL 33606	27-3259553
ETA UPSILON CHAPTER OF KAPPA ALPHA THETA	2130 FULTON ST, UNIVERSITY CENTER 4TH FLOOR, ATTN: SLE - SAN FRANCISCO, CA	45-3013965
ETA PHI CHAPTER OF KAPPA ALPHA THETA	1900 BELMONT BLVD - NASHVILLE, TN 37212-3757	45-3014286
ETA PI CHAPTER OF KAPPA ALPHA THETA	11921 CARLTON ROAD - CLEVELAND, OH 44106	51-0645633
ZETA OMEGA CHAPTER OF KAPPA ALPHA THETA	1 LMU DR., STUDENT PROG. & LEADERSHIP - LOS ANGELES, CA 90045-2623	95-4839344
ZETA PHI CHAPTER OF KAPPA ALPHA THETA	CAMPUS LIFE OFFICE, 24255 PACIFIC COAST HWY - MALIBU, CA 90263	91-1829440

KAPPA ALPHA THETA FRATERNITY G	ROUP RETUR	36-6135287
ZETA LAMBDA CHAPTER OF KAPPA ALPHA THETA	STERN STUDENT CTR, 66 GEORGE STREET - CHARLESTON, SC 29424	57-0904066
ZETA IOTA CHAPTER OF KAPPA ALPHA THETA	4 FRANK PARSONS WAY - LEXINGTON, VA 24450-1787	54-1489157
ETA CHI CHAPTER OF KAPPA ALPHA IHETA	C/O MONICA ALMEIDA, ETA CHI CEO, 872 BEACON STREET APT 3 - BOSTON, MA 02215	46-0648516

ALPHA BETA CHAPTER OF KAPPA 500 COLLEGE AVENUE - SWARTHMORE, PA 19081

46-2270360

FORM 8868 LIST OF ORGANIZATIONS INC	STATEMENT 1		
NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID	
ALPHA CHAPTER OF KAPPA ALPHA THETA	904 S COLLEGE AVE - GREENCASTLE, IN 46135-1951	35-0867562	
BETA CHAPTER OF KAPPA ALPHA THETA	441 N. WOODLAWN AVENUE - BLOOMINGTON, IN 47408-3932	35-0432050	
GAMMA CHAPTER OF KAPPA ALPHA THETA	825 W. HAMPTON DRIVE - INDIANAPOLIS, IN 46208	35-0867363	
DELTA CHAPTER OF KAPPA ALPHA THETA	611 EAST DANIEL STREET - CHAMPAIGN, IL 61820-6213	37-0359350	
ETA CHAPTER OF KAPPA ALPHA THETA	1414 WASHTENAW AVE - ANN ARBOR, MI 48104-3183	38-1375371	
IOTA CHAPTER OF KAPPA ALPHA THETA	519 STEWART AVENUE - ITHACA, NY 14850	16-1164377	
KAPPA CHAPTER OF KAPPA ALPHA THETA	1433 TENNESSEE - LAWRENCE, KS 66044-3481	48-0543691	
LAMBDA CHAPTER OF KAPPA ALPHA THETA	215 S PROSPECT ST - BURLINGTON, VT 05401-3519	46-2452857	
GAMMA DEUTERON CHAPTER OF KAPPA ALPHA THETA	179 W. WINTER STREET - DELAWARE, OH 43015	31-4389978	
MU CHAPTER OF KAPPA ALPHA THETA	ALLEGHENY COLLEGE, BOX 178 - MEADVILLE, PA 16335	25-6086538	
NU CHAPTER OF KAPPA ALPHA THETA	PO BOX 159 HANOVER COLLEGE - HANOVER, IN 47243	35-1041334	
OMICRON CHAPTER OF KAPPA ALPHA THETA	653 W. 28TH STREET - LOS ANGELES, CA 90007	95-0890340	
PI CHAPTER OF KAPPA ALPHA THETA	CAMPUS PROGRAMS & ORGANIZATIONS - ALBION, MI 49224	38-2510011	
RHO CHAPTER OF KAPPA ALPHA THETA	1545 'S' STREET - LINCOLN, NE 68508	47-0207480	
TAU CHAPTER OF KAPPA ALPHA THETA	619 UNIVERSITY PLACE - EVANSTON, IL 60201	36-2191771	
UPSILON CHAPTER OF KAPPA ALPHA THETA	1012 5TH STREET S.E MINNEAPOLIS, MN 55414	41-0345972	

PHI CHAPTER OF KAPPA ALPHA THETA	637 PRESIDENT'S DRIVE - STOCKTON, CA 95211	94-1490664
CHI CHAPTER OF KAPPA ALPHA THETA	306 WALNUT PLACE - SYRACUSE, NY 13210	15-0354780
PSI CHAPTER OF KAPPA ALPHA THETA	108 LANGDON ST MADISON, WI 53703	39-0385840
OMEGA CHAPTER OF KAPPA ALPHA THETA	2723 DURANT AVE - BERKLEY, CA 94704	94-1158472
ALPHA GAMMA CHAPTER OF KAPPA ALPHA THETA	1861 INDIANOLA AVE COLUMBUS, OH 43201	31-4221872
ALPHA EPSILON CHAPTER OF KAPPA ALPHA THETA	75 WATERMAN ST., BOX 1656 - PROVIDENCE, RI 02912-1168	05-0401170
ALPHA ETA CHAPTER OF KAPPA ALPHA THETA	204 24TH AVENUE S NASHVILLE, TN 37212	62-1316998
	2401 PEARL STREET - AUSTIN, TX 78705	74-1135209
ALPHA LAMBDA CHAPTER OF KAPPA ALPHA THETA	4521 17TH AVENUE NE - SEATTLE, WA 98105	91-0277810
ALPHA MU CHAPTER OF KAPPA ALPHA THETA	603 KENTUCKY BOULEVARD - COLUMBIA, MO 65201	43-0349100
ALPHA NU CHAPTER OF KAPPA ALPHA THETA	1020 GERALD AVE MISSOULA, MT 59801	81-0230943
ALPHA XI CHAPTER OF KAPPA ALPHA THETA	1472 KINCAID STREET - EUGENE, OR 97401	93-0202225
ALPHA OMICRON CHAPTER OF KAPPA ALPHA THETA	845 CHAUTAUQUA AVENUE - NORMAN, OK 73069	73-0308390
ALPHA PI CHAPTER OF KAPPA ALPHA THETA	2500 UNIVERSITY AVE GRAND FORKS, ND 58203	45-0173340
ALPHA RHO CHAPTER OF KAPPA ALPHA THETA	725 E. CLARK - VERMILLION, SD 57069	46-0224824
ALPHA SIGMA CHAPTER OF KAPPA ALPHA THETA	850 NE MONROE ST PULLMAN, WA 99163	91-0123837
ALPHA TAU CHAPTER OF KAPPA ALPHA THETA	2711 CLIFTON AVE CINCINNATI, OH 45220	31-0539242
ALPHA UPSILON CHAPTER OF KAPPA ALPHA THETA	1700 SW COLLEGE - TOPEKA, KS 66621	48-0291460

Form **8868** (Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

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2 If Ba If	the tax year entere Change in acc this application is to	d in line 1 is for less than 12 months, ounting period for Forms 990-BL, 990-PF, 990-T, 4720 is. See instructions.	D, or 6069,	enter the tentative tax, less any	Final retur	n CGT	
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Form 8868 (Rev. 1-2014)					Page 2
 If you are filing for an Additional (Not Automatic) 3-Month 	Extension, o	complete only Part II and check this	box		. X
Note. Only complete Part II if you have already been granted a			led Form 8	868.	
 If you are filing for an Automatic 3-Month Extension, comp 	olete only Pa	art I (on page 1)			
Part II Additional (Not Automatic) 3-Month	Extension	n of Time. Only file the origin	al (no co	pies need	ed).
		Enter filer's	identifyin	g number, se	e instructions
Type or Name of exempt organization or other filer, see ins			Employer	identification	number (EIN) or
print KAPPA ALPHA THETA FRATERNI	TY				
File by the GROUP RETURN				<u> 36-613</u>	5287
due date for Number, street, and room or suite no. If a P O. box	k, see instruc	tions.	Social se	curity number	(SSN)
return See 8740 FOUNDERS ROAD			<u> </u>		
City, town or post office, state, and ZIP code. For	a foreign add	lress, see instructions.			
INDIANAPOLIS, IN 46268					
Enter the Return code for the return that this application is for	(file a separa	te application for each return)			0 1
					
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720 (other than individual)			09
Form 990-PF	04			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05			11	
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already gran			iously file	<u>d Form 8868</u>	·
KAPPA ALPHA T			4000	0	
• The books are in the care of \triangleright 8740 FOUNDERS	ROAD		4626	8	
Telephone No. ► 317-876-1870	_	Fax No. ►			. —
If the organization does not have an office or place of busing the organization does not have an office or place of busing the organization of the organization o			Edhard to Es		
• If this is for a Group Return, enter the organization's four di	git Group Ex	emption Number (GEN) <u>0154</u> . I	IT THIS IS TO	tne whole gr	oup, check this
box . If it is for part of the group, check this box		15, 2015	i ali memb	ers the exten	sion is for
4 I request an additional 3-month extension of time until 5 For calendar year , or other tax year beginning			~ TIINI	30, 20	111
 For calendar year, or other tax year beginning If the tax year entered in line 5 is for less than 12 months 			Final r		114
Change in accounting period	s, check leas	indarretum (riilai i	eturn	
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED TO	СУТНЕ	R ALL NECESSARY IN	FORMA	ጥፐርስኒ ጥር) FILE A
COMPLETE AND ACCURATE RETURN		R HEE HECEBORKI III	rorum	11011 10	<u> </u>
COLLEGE IND LICCOLLINE HALOID					
8a If this application is for Forms 990-BL, 990-PF, 990-T, 47	720 or 6069	enter the tentative tax less any			
nonrefundable credits. See instructions.	,,		8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6	069, enter ar	nv refundable credits and estimated			
tax payments made. Include any prior year overpaymen		•			
previously with Form 8868			8b	\$	0.
C Balance due. Subtract line 8b from line 8a. Include you	r payment w	ith this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See in		, , , , , , ,	8c	\$	0.
		st be completed for Part II		. т.	
Under penalties of perjury, I declare that I have examined this form, in	cluding accom	•	-	of my knowleda	e and belief.
it is true, correct, and complete, and that I am authorized to prepare th	iis form.	· -			
Signature > hibihah S. Payne, UPA Title	► CPA		Date	▶ 2 13	5
, a	<u> </u>			Form 8	868 (Rev. 1-2014)