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DLN: 93493282010185

Form **990**

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

▶ 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

OMB No 1545-0047

Open to Public Inspection

A Fo	the	2014 ca	alendar year, or tax year beginning 06-01-2014 , and ending 05-31-2015			
B Che	ck ıf a	pplicable	C Name of organization SIGMA KAPPA FOUNDATION	D Employ	er identi	ification number
✓ Add	ress ch	hange		35-177	8450	
☐ Nar	ne cha	inge	Doing business as			
┌ Inıt	al retu	ım		E Telephon	e numbe	ar
Fina			Number and street (or P O box if mail is not delivered to street address) Room/suite 695 PRO MED LANE NO 300	•		
_		mınated		(317)8	/2-32	/5
_		return	City or town, state or province, country, and ZIP or foreign postal code CARMEL, IN 46032	G Gross red	eipts \$ 1	.750.470
J App	lication	n pendin	9	2 0,035 100	.с.р.с. ф 1	.,, 30, 1, 0
			F Name and address of principal officer H(a) Is this		eturn fo	
			LISA SWIONTEK subord	dinates?		┌ Yes ┌ No
			CARMEL, IN 46032 H(b) Are al	l subordın	ates	┌ Yes ┌ No
			Includ			
<u> </u>	(-exen	npt statu	IS	," attach a	ılıst (s	see instructions)
J W	ebsite	e:► W	/WW SIGMAKAPPAFOUNDATION ORG H(c) Group	exemptio	n numb	oer ►
K Forn	n of or	ganızatıc	on V Corporation Trust Association Other L Year of for	mation 1989	9 M St	tate of legal domicile IN
Pa	rt I	Sur	mmary		•	
Governance		TO CR	describe the organization's mission or most significant activities EATE AND FUND LEADERSHIP, SCHOLARSHIP AND PHILANTHROPIC INITIATIVI PIRIT OF SIGMA KAPPA SORORITY	ES THAT	REFLEC	CT THE VALUES
<u> </u>						
9.e	2	Check	this box 🔭 if the organization discontinued its operations or disposed of more than 25	5% of its r	et ass	ets
Activities &			er of voting members of the governing body (Part VI, line 1a)		3	12
ij			er of independent voting members of the governing body (Part VI, line 1b)		4	12
Ę			number of individuals employed in calendar year 2014 (Part V, line 2a)		5	6
q.			number of volunteers (estimate if necessary)	·	6	200
			inrelated business revenue from Part VIII, column (C), line 12	·	7a 7b	32,987 29,735
	ь	ivet uiii		· Year	76	Current Year
	8	Cont	ributions and grants (Part VIII, line 1h)	1,114,06	59	1,128,899
₫	9		ram service revenue (Part VIII, line 2g)		0	0
Ravenue	10		stment income (Part VIII, column (A), lines 3, 4, and 7d)	89,9	5 2	144,230
芒	11	Othe	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	40,7	71	23,559
	12		l revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	1 244 7		1 306 688
	42			1,244,79		1,296,688
	13 14		efits paid to or for members (Part IX, column (A), line 4)	1,202,7.	0	466,534
	15		ries, other compensation, employee benefits (Part IX, column (A), lines		-	0
83	15	5-10		267,9!	55	247,831
<u>\$</u>	16a	Profe	essional fundraising fees (Part IX, column (A), line 11e)		0	0
Expenses	b	Total	fundraising expenses (Part IX, column (D), line 25) ▶193,886			
ш	17	Othe	er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	369,56	58	429,967
	18		l expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,840,24		1,144,332
	19	Reve	enue less expenses Subtract line 18 from line 12	-595,44	18	152,356
ষ্ঠ			Beginning		:	End of Year
Net Assets or Fund Balances				ear		
Ass Be	20		l assets (Part X, line 16)	5,129,5	_	5,169,857
2.5 2.5	21 22		I liabilities (Part X, line 26)	1,315,58 3,813,93	_	1,107,859 4,061,998
	t II	_	nature Block	3,013,9.	ا د د	4,001,998
my kr	rer ha	dge and as any $\frac{**}{Sig}$	f perjury, I declare that I have examined this return, including accompanying schedules d belief, it is true, correct, and complete Declaration of preparer (other than officer) is be knowledge **** inature of officer A SWIONTEK EXECUTIVE DIRECTOR	oased on a		
			pe or print name and title			
				^	PTIN P0057319	97
Paid	I		561-76	employed s EIN ► 35-		
Pre	l.					
Hen	0-	1	Firm's address ► 12800 N MERIDIAN STREET SUITE 400 Phon	e no (317)	848-892°	U

CARMEL, IN 46032

√ Yes
√ No

Form 990 (2014)					
Part III	Statement of Program Service Accomplishments Check If Schedule O contains a response or note to any line in this Part III				
1 Brief	ly describe the organization's mission				
•	EDUCATE, AND INSPIRE SIGMA KAPPA MEMBERS AND SOCIETY THROUGH EDUCATIONAL PROGRAMMING AND ROPIC ENDEAVORS				

Did the organization undertake any significant program services during the year which were not listed on

EDUCATIONAL AND LEADERSHIP PROGRAMMING THROUGH ACTIVITIES THAT ENCOMPASS THE INDIVIDUAL CHAPTER, THE FRATERNITY/SORORITY COMMUNITY, THE UNIVERSITY COMMUNITY, AND SOCIETY IN GENERAL THE SIGMA KAPPA FOUNDATION PROVIDES FUNDING FOR PROGRAMS AND RESOURCES DESIGNED TO PROMOTE PERSONAL AND LEADERSHIP DEVELOPMENT GRANTS ARE MADE PURSUANT TO APPROPRIATE GRANT DOCUMENTATION NO GRANTS OR ALLOCATIONS ARE/OR INCLUDE FOREIGN GRANTS SIGMA KAPPA EDUCATIONAL GRANTSTHE GRANT FOR THE LEADERSHIP CONSULTANT PROGRAM IS USED TO CONDUCT THE INDIVIDUAL AND GROUP COUNSELING OF CHAPTER MEMBERS AND THE TRAINING OF INDIVIDUALS TO DO SUCH COUNSELING GROUP DEVELOPMENT INCLUDES WORKSHOPS AND LECTURES ON LEADERSHIP AND EDUCATIONAL DEVELOPMENT, ASSERTIVENESS TRAINING, ACHIEVEMENT OF HIGH SCHOLASTIC ATTAINMENT, CITIZENSHIP, CAREER DEVELOPMENT, ALCOHOL AND DRUG ABUSE PREVENTION AND ADVANCED LEADERSHIP TRAINING FOR SELECTED INDIVIDUALS INDIVIDUAL COUNSELING INCLUDES ONE-ON-ONE SESSIONS WITH SELECTED UNDERGRADUATE CHAPTER MEMBERS OF THE SORORITY REGARDING LEADERSHIP OPPORTUNITIES AND SCHOLARSHIP AND STUDY TECHNIQUES, AND IN ADDITION EACH CONSULTANT SHOULD BE AVAILABLE TO ADVISE ANY CHAPTER MEMBER SEEKING INDIVIDUALIZED COUNSELING REGARDING EDUCATIONAL OPPORTUNITIES AND PROBLEMS SUCCESSES OF THIS PROGRAM DURING THE GRANTING YEAR INCLUDE FOCUSED CHAPTER PROGRAM AT TIMES, THIS IS THE CHAPTER'S ONLY HOPE OF REMAINING AN OPEN AND ACTIVE CHAPTER AT OTHER TIMES, CHAPTERS ARE PUT ON THE FOCUSED CHAPTER PROGRAM TO PREVENT THEM FROM GETTING TO THE POINT OF BEING ON THEIR LAST LEG A LEADERSHIP CONSULTANT VISITS THE CHAPTER MONTHLY AND PROVIDES CONTINUED LONG DISTANCE SUPPORT AND GUIDANCE THAT THE CHAPTER AND ALUMNAE VOLUNTEERS WOULD NOT GET OTHERWISE GOOD TO GREAT PROGRAM THIS NEW PROGRAM, CREATED IN 2013, PROVIDES SUPPORT TO CHAPTERS WHO ARE FUNCTIONING WELL ON THEIR CAMPUS AND IN SIGMA KAPPA THE LEADERSHIP CONSULTANTS WHO WORK WITH THESE CHAPTERS CHALLENGE THEM TO IMPROVE IN ALL AREAS OF COLLEGIATE MANAGEMENT AND RECRUITMENT THE GOAL IS TO TAKE A CHAPTER WHO RANGES FROM AVERAGE TO A LITTLE ABOVE AVERAGE TO TOP-TIER IN SIGMA KAPPA AND ON THEIR CAMPUS NEW CHAPTER PROGRAM THE ORGANIZATION BASES A LEADERSHIP CONSULTANT WITH EACH COLONY/NEW CHAPTER FOR UP TO THEIR FIRST THREE YEARS OF EXISTENCE THE GOAL OF THIS PROGRAM IS TO PROVIDE NEW CHAPTERS THE GUIDANCE NEEDED TO BECOME A SUCCESSFUL, ESTABLISHED CHAPTER WITHIN SIGMA KAPPA AND ON THEIR CAMPUS THE LEADERSHIP CONSULTANT WORKS VERY CLOSELY WITH EACH MEMBER OF THE NEW CHAPTER TO FOSTER A STRONG CONNECTION TO THE ORGANIZATION AND ITS VALUES, LEADING THEM TO A LIFELONG COMMITMENT TO SIGMA KAPPA INITIATION RATE OF THE NATIONAL ORGANIZATION WE HAD A 98 7% INITIATION RATE IN THE 2014-2015 ACADEMIC YEAR, UP 7 PERCENT FROM 2013-2014 WHILE THIS IS NOT A DIRECT RESULT OF THE LC PROGRAM, IT IS A COMPONENT OF THE EFFECTIVENESS OF IT A GRANT WAS MADE TO SUPPORT THE EDUCATIONAL PORTION OF THE DIRECTOR OF EDUCATIONAL PROGRAMS POSITION FOR SIGMA KAPPA SORORITY THIS POSITION COORDINATES THE EDUCATIONAL PROGRAMMING AND WORKSHOPS THAT PROVIDE LEADERSHIP, PERSONAL AND PROFESSIONAL DEVELOPMENT FOR WOMEN A FINAL GRANT WAS GIVEN TO THE SORORITY TO CONDUCT EDUCATIONAL AND LEADERSHIP ACTIVITIES AT THE SORORITY'S REGIONAL LEADERSHIP CONFERENCES (RLCS) SUCH ACTIVITIES INCLUDE THE CONDUCT OF GENERAL AND TRACK BREAKOUT SESSIONS IN THE AREAS OF LEADERSHIP DEVELOPMENT, BYSTANDER BEHAVIOR, CHAPTER MOTIVATION AND OTHER CHAPTER EDUCATION RELATED TOPICS FOR CHAPTER MEMBERS AND ADVISORS THIS EXPERIENCE AIMS TO PROVIDE PERSONAL DEVELOPMENT OF COLLEGIATE LEADERS AND ADVISORS LEADERSHIP TRAINING FOR ALL WOMEN LIFE SKILL DEVELOPMENTAS A RESULT OF THE RLCS, MORE THAN THREE TIMES THE WOMEN RECEIVE LEADERSHIP DEVELOPMENT TRAINING THAN UNDER THE FORMER STRUCTURE. THE PARTICIPANTS REPORT FEELING MORE COMFORTABLE ADDRESSING COMPLEX ISSUES WITHIN THEIR CHAPTER AND AMONG THEIR MEMBERS AFTER ATTENDING THE RLC. THE PROGRAM CONTINUES TO BE IMPROVED ANNUALLY BASED ON FEEDBACK FROM PARTICIPANTS ADDITIONAL GRANTS TO SIGMA KAPPA CHAPTERS AND MEMBERSEDUCATIONAL AREA GRANTS WERE GIVEN TO THE XI CHAPTER FOR THE PURPOSE OF PROVIDING PROGRAMMING, FACILITIES, EQUIPMENT AND MATERIALS FOR THE UNDERGRADUATE MEMBERS OF THE CHAPTER SUITABLE FOR THE INSTRUCTION OR TRAINING OF THE MEMBERS FOR PURPOSES OF IMPROVING OR DEVELOPING THE MEMBERS' CAPABILITIES THROUGH GROUP INTERACTION AND INDIVIDUAL STUDY, WHICH MAY INCLUDE, WITHOUT LIMITATION, THE RENOVATION OR CONSTRUCTION OF THOSE PORTIONS OF A BUILDING TO BE USED AS A RESIDENCE FOR SAID UNDERGRADUATE MEMBERS OF THE CHAPTER THAT ARE RESERVED FOR AND EXCLUSIVELY USED FOR EDUCATIONAL AND CHARITABLE PURPOSES QUALIFYING UNDER THE IRS RULES OR GUIDELINES THEN IN EFFECT ADDITIONAL EDUCATIONAL AND LEADERSHIP GRANTS WERE MADE TO THETA CHAPTER FOR EDUCATIONAL PROGRAMMING, ALPHA DELTA, KAPPA BETA, KAPPA OMICRON, KAPPA TAU, KAPPA UPSILON, THETA ALPHA, THETA PSI AND ZETA PHI CHAPTERS TO IMPLEMENT PHILANTHROPIC AND SERVICE PROGRAMS IN THEIR LOCAL COMMUNITIES, 10 GRANTS TO INDIVIDUALS TO ATTEND THE UNDERGRADUATE INTERFRATERNITY INSTITUTE AND LEADERSHAPE, NATIONAL VALUES-BASED LEADERSHIP PROGRAMS

4b (Code) (Expenses \$ 71,800 | Including grants of \$ 71,800) (Revenue \$)

SCHOLARSHIPSMORE THAN 60 SCHOLARSHIPS ARE AVAILABLE TO OUTSTANDING MEMBERS WHO EXEMPLIFY SIGMA KAPPA'S VALUES OF INTEGRITY, LEADERSHIP, ACADEMIC EXCELLENCE, AND OUR COMMITMENT TO SERVICE AND SISTERHOOD SCHOLARSHIPS ARE PROVIDED BY THE FOUNDATION TO ENCOURAGE AND SUPPORT THE SCHOLASTIC DEVELOPMENT OF OUR COLLEGIATE AND ALUMNAE SISTERS THESE WORTHY OPPORTUNITIES COULD NOT BE POSSIBLE WITHOUT SUPPORT FROM SIGMA KAPPA SISTERS, THEIR FAMILIES AND FRIENDS, AND OTHER DONORS SINCE 1989, THE FOUNDATION HAS AWARDED OVER \$780,000 IN SCHOLARSHIPS TO SIGMA KAPPA ALUMNAE AND COLLEGIATE MEMBERS ALUMNAE CONTINUING EDUCATION SCHOLARSHIP AVAILABLE TO ALUMNAE POSSESSING AN UNDERGRADUATE DEGREE FROM A FOUR YEAR INSTITUTION THAT HAVE BEEN ACCEPTED/ENROLLED IN AN ADVANCED DEGREE PROGRAM WITH A MINIMUM CUMULATIVE GPA OF 3 0 WALTA WILKINSON CARMICHAEL SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED ALUMNAE MEMBERS OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE, ENROLLED IN A GRADUATE PROGRAM, WHO HAVE DEMONSTRATED PARTICIPATION IN COLLEGIATE CHAPTER ACTIVITIES FROM THEIR BEGINNING YEAR AND CONTINUING THROUGH THE SENIOR YEAR OF MEMBERSHIP RESTRICTED GRADUATE SCHOLARSHIPS EUROPEAN ALUMNAE CHAPTER SISTERHOOD WITHOUT BORDERS SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE OR GRADUATE MEMBERS OF SIGMA KAPPA IN GOOD STANDING WHO ARE CURRENTLY OR HAVE PREVIOUSLY STUDIED ABROAD, OR WHOSE STUDIES HAVE AN INTERNATIONAL FOCUS GERONTOLOGY SCHOLARSHIP THE ALZHEIMER'S/GERONTOLOGY FUND AWARDS SCHOLARSHIPS AVAILABLE TO JUNIOR, SENIOR OR GRADUATE SIGMA KAPPA MEMBERS IN GOOD STANDING AND MAJORING IN GERONTOLOGY (THE STUDY OF AGING) OR A RELATED FIELD WITH AT LEAST ONE YEAR'S STUDY REMAINING AND A MINIMUM CUMULATIVE GPA OF 3 0 MARGARET J ANDREW MEMORIAL SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE JUNIOR SENIOR OR GRADUATE MEMBERS OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND ARE MAJORING IN FOOD SCIENCE, FOOD TECHNOLOGY OR A RELATED FIELD (NUTRITION, DIETETICS, ETC) ALICE HERSEY WICK SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND HAVE DEMONSTRATED LEADERSHIP AND SERVICE TO THEIR CHAPTER, CAMPUS AND COMMUNITY CHAT GROUP SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF SIGMA KAPPA WHO ARE IN GOOD STANDING AND HAVE A MINIMUM GPA OF 2 0 ON A 4 0 SCALE FOUNDERS' SCHOLARSHIP APPLICANTS SHOULD BE ACTIVE, INITIATED, CONTINUING MEMBERS IN GOOD STANDING WITH A MINIMUM CUMULATIVE GPA OF 3 0 WHO HAVE DEMONSTRATED A LEADERSHIP ROLE ON CAMPÚS (CHAPTÉR OFFICER, STUDENT GOVERNMENT, PANHELLENIC OFFICER, ETC) PREFERENCE WILL BE GIVEN TO SOPHOMORES AND JUNIORS WITH AT LEAST ONE YEAR'S STUDY REMAINING MARIAN JOHNSON FRUTIGER SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE, EXEMPLIFY THE IDEALS AND STANDARDS OF SIGMA KAPPA, EXHIBIT OUTSTANDING SISTERHOOD AND HAVE DEMONSTRATED LEADERSHIP WITHIN THE FRATERNAL COMMUNITY AT LEAST ONE SCHOLARSHIP AWARD MUST BE GIVEN TO AN INITIATED UNDERGRADUATE MEMBER OF A SIGMA KAPPA CHAPTER LOCATED IN TEXAS RESTRICTED UNDERGRADUATE SCHOLARSHIPS ALZHEIMER'S/GERONTOLOGY SCHOLARSHIP THE ALZHEIMER'S/GERONTOLOGY FUND AWARDS SCHOLARSHIPS AVAILABLE TO JUNIOR, SENIOR OR GRADUATE SIGMA KAPPA MEMBERS IN GOOD STANDING AND MAJORING IN GERONTOLOGY (THE STUDY OF AGING) OR A RELATED FIELD WITH AT LEAST ONE YEAR'S STUDY REMAINING AND A MINIMUM CUMULATIVE GPA OF 3 0 ANDREA WILL MEMORIAL SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF THE GAMMA MU CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND HAVE DEMONSTRATED LEADERSHIP QUALITIES AND INVOLVEMENT IN CO-CURRICULAR ACTIVITIES ASHLEY HENDERSON HUFF MEMORIAL SCHOLARSHIP FOR COURAGE AND PATRIOTISM. THE PURPOSE OF THE FUND IS TO PROVIDE SCHOLARSHIPS TO SIGMA KAPPA STUDENTS WHO ARE INITIATED COLLEGIATE MEMBERS OF SIGMA KAPPA SORORITY AT ANY ACCREDITED COLLEGE OR UNIVERSITY IN GOOD STANDING THE STUDENT MUST HAVE A MINIMUM GRADE POINT AVERAGE OF 3 00 ON A 4 00 SCALE, EXISTENCE OF A CONNECTION TO THE MILITARY, INCLUDIN BUT NOT LIMITED TO ARMY, NAVY, AIR FORCE, MARINES AND NATIONAL GUARD, CONNECTION MAY BE IN THE FORM OF DIRECT SERVICE OR SERVICE BY A PARENT, SPOUSE OR SIBLING, OR HAVE BEEN DIRECTLY AFFECTED BY AN INTERNATIONAL OR FOREIGN TERRORIST ATTACK ON OUR HOMELAND (FOR EXAMPLE, VICTIMS OF 9-11), AND EVIDENCE OF EXHIBITING OUTSTANDING LEADERSHIP AND SERVICE PROVIDED TO THE CHAPTER, PANHELLENIC AND THE UNIVERSITY BARBÉR-OWEN-THOMAS SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INÍTIATED UNDERGRADUATE JUNIOR OR SENIOR MEMBERS OF THE BETA SIGMA CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 2.5 ON A 4.0 SCALE, RESIDE IN THE CHAPTER HOUSE AND ARE IN NEED OF FINANCIAL ASSISTANCE BETA NU/CARYL CORDIS D'HONDT SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF THE BETA NU CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, INVOLVED IN CHAPTER AND CAMPUS ACTIVITIES AND ARE IN NEED OF FINANCIAL ASSISTANCE BETA OMEGA SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE JUNIOR OR SENIOR MEMBERS OF THE BETA OMEGA CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND ARE IN NEED OF FINANCIAL ASSISTANCE BETA SIGMA SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE SOPHOMORE, JUNIOR OR SENIOR MEMBERS OF THE BETA SIGMA CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 2 5 ON A 4 0 SCALE, RESIDE IN THE CHAPTER HOUSE, HAVE DEMONSTRATED LEADERSHIP IN THEIR CHAPTER AND ON CAMPUS AND ARE IN NEED OF FINANCIAL ASSISTANCE CHRISTINE KERR CAWTHORNE SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE JUNIOR MEMBERS OF THE ALPHA CHI CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND HAVE DEMONSTRATED LEADERSHIP AND SERVICE TO THEIR CHAPTER, CAMPUS AND COMMUNITY CHRISTY BURGESS BRAMBLETT SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF THE THETA XI CHAPTER OF SIGMA KAPPA WHO ARE INVOLVED IN CAMPUS ACTIVITIES AND SERVED AS AN ELECTED OFFICER IN THEIR CHAPTER DELTA CHI ALUMNAE MEMORIAL SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE JUNIOR OR SENIOR MEMBERS OF THE DELTA CHI CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, ENROLLED FULL-TIME, HAVE A MINIMUM GPA OF 3 25 ON A 4 0 SCALE AND HAVE DEMONSTRATED LEADERSHIP AND SERVICE TO THEIR CHAPTER, CAMPUS AND COMMUNITY ELIN J STENE/XI SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE JUNIOR OR SENIOR MEMBERS OF THE XI CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND ARE IN NEED OF FINANCIAL ASSISTANCE ELISE REED JENKINS MEMORIAL SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF THE ALPHA DELTA, GAMMA LAMBDA AND GAMMA PSI CHAPTERS OF SIGMA KAPPA WHO ARE IN GOOD STANDING, HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE AND HAVE BEEN LOYAL MEMBERS OF SIGMA KAPPA FOR AT LEAST TWO YEARS ELIZABETH LANDYMORE SMITH SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE BIENNIAL SCHOLARSHIPS IN PERPETUITY TO SIGMA KAPPA ALUMNAE MEMBERS WHO ARE IN GOOD STANDING WITH A SIGMA KAPPA ALUMNAE CHAPTER, HAVE A MINIMUM CUMULATIVE GPA OF 3 0 ON A 4 0 SCALE, EXEMPLIFY THE HIGH IDEALS AND STANDARDS OF SIGMA KAPPA SORORITY, AND ARE STUDYING HEALTH SCIENCES OR ANY FIELD OF MEDICINE EPSILON EPSILON SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE JUNIOR OR SENIOR MEMBERS OF THE EPSILON EPSILON CHAPTER OF SIGMA KAPPA WHO HAVE A MINIMUM GPA OF 3 0 ON A 4 0 SCALE, DEMONSTRATED LEADERSHIP AS A CHAPTER OFFICER WITH SPECIAL CONSIDERATION FOR THOSE IN NEED OF FINANCIAL ASSISTANCE EPSILON MU SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF THE EPSILON MU CHAPTER OF SIGMA KAPPA WHO ARE IN GOOD STANDING WITH A MINIMUM GPA OF 2 8 ON A 4 0 SCALE AND ARE A JUNIOR OR SENIOR EPSILON TAU SCHOLARSHIP THE ENDOWMENT'S PURPOSE IS TO PROVIDE SCHOLARSHIPS FOR INITIATED UNDERGRADUATE MEMBERS OF THE EPSILON TAU CHAPTER OF SIGMA

4c (Code) (Expenses \$ 15,000 including grants of \$ 15,000) (Revenue \$)

KAPPA WHO ARE IN GOOD STANDING, HAVE DEMONSTRATED INVOLVEMENT IN THEIR CHAPTER, CAMPUS AND COMMUNITY, AND ARE I

MAINE SEA COAST MISSIONTHE MAINE SEA COAST MISSION PROVIDES SPIRITUAL, HEALTH, AND YOUTH DEVELOPMENT PROGRAMS IN COASTAL AND ISLAND COMMUNITIES FROM MID-COAST TO DOWNEAST MAINE ROOTED IN A HISTORY OF NON-DENOMINATIONAL SERVICE, THE MISSION OFFERS HOPE, ENCOURAGEMENT, AND HELP TO STRENGTHEN INDIVIDUALS, FAMILIES, AND COMMUNITIES SIGMA KAPPA HAS HAD A RELATIONSHIP WITH THE MISSION SINCE 1911, PROVIDING RESOURCES FOR THEIR CHRISTMAS PROGRAM AND GRANTS TO PROGRAMMATIC AREAS A GRANT IN THE AMOUNT OF \$15,000 WAS PROVIDED TO SUPPORT THE MISSION'S HOUSING REPAIR AND WEATHERIZATION PROGRAM HAS MADE A DIFFERENCE FOR LOW-INCOME FAMILIES AND ELDERLY WHO CANNOT AFFORD THE COSTLY UPDATES OR REPAIRS REQUIRED FOR A HOME TO WEATHER THE HARSH MAINE WINTER EACH YEAR HUNDREDS OF VOLUNTEERS COME FROM ALL OVER NEW ENGLAND TO TAKE PART IN THIS PROGRAM WASHINGTON COUNTY AND ITS PEOPLE HAVE A PROUD HERITAGE OF LIVING OFF THE NATURAL RESOURCES OF LAND AND SEA HISTORICALLY, PEOPLE HAVE MADE THEIR LIVINGS FROM LOGGING, SHIPBUILDING, FISHING AND FARMING TODAY, MANY OF THESE INDUSTRIES ARE GONE OR HIGHLY MECHANIZED, LEAVING FEWER AND FEWER JOBS EACH YEAR THE UNEMPLOYMENT RATE IS HIGH AND MANY PEOPLE HAVE NO STEADY WORK THEY SURVIVE ON INCOME FROM SEASONAL JOBS THAT HAVE NO BENEFITS OR JOB SECURITY THE COUNTY LEADS THE STATE IN THE PERCENTAGE OF PEOPLE LIVING IN POVERTY, OVER 19% FOR CHILDREN UNDER 17, THE RATE IS EVEN HIGHER, 30% LIVE IN POVERTY THE ABILITY TO AFFORD A HOME THAT IS CLEAN, SAFE, DRY, AND ENERGY-EFFICIENT IS ONE OF THE MOST CRITICAL ISSUES FOR PEOPLE LIVING IN WASHINGTON COUNTY ACCORDING TO MAINE STATE HOUSING AUTHORITY, IN WASHINGTON COUNTY 29% OF HOMEOWNERS HAVE A MORTGAGE PAYMENT THAT IS UNAFFORDABLE THEY PAY MORE THAN 35% OF THEIR INCOME FOR HOUSING OVER 67% OF HOMEOWNERS HAVE A MORTGAGE PAYMENT THAT IS UNAFFORDABLE THEY PAY MORE THAN 35% OF THEIR INCOME FOR HOUSING OVER 67% OF HOMEOWNERS HAVE A MORTGAGE PAYMENT THAT IS UNAFFORDABLE THEY PAY MORE THAN 35% OF THEIR INCOME FOR HOUSING OVER 67% OF HOMEOWNERS HAVE A MORTGAGE

) (Revenue \$

Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$

4e Total program service expenses ► 534,286

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23		No
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		No
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), 501(c)(4), and 501(c)(29) 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		No
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		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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 $2 \cdot$	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
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	Yes	

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			厂_
	Estable and beauty and do Barra 2 of Francis 200 Fator 2 of automated to 1 do 1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 6 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 (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
Зa	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		No
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	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		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	Νo
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14a 14b		140

Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 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 Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax 1a 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes 8a Yes Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Νo organization's mailing address? If "Yes," provide the names and addresses in Schedule O

Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b		Νo
	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		No
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		

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed►AK, AZ, AR, CA, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MS, AL, CO, MO, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, MN, MI, IN
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V 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, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►ANN WILLIS

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ♦ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- **◆** List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than one on is both a directo		o not check e box, unless th an officer cor/trustee)			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the								
	organizations below dotted line)	Individual trustee or director	Micei Institutional Trustee Individual trustee		Former Highest compensated employee Key employee		Former Highest compensated employee Key employee		ormer lighest compensated mployee ey employee		ormer Ighest compensated Imployee 2) employee fficer		Highest compensated employee Key employee Officei		Former	MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) CAROLYN TIEGER	2 00	,							0	0								
TRUSTEE		X						0	0	0								
(2) SUSAN POLIZZOTTO	2 00																	
TRUSTEE		Х						0	0	0								
(3) CHERI DEJONG	2 00																	
TRUSTEE		Х						0	0	0								
(4) DAWN O'CONNOR	5 00																	
VP FINANCE		Х		Χ				0	0	0								
(5) JUDY ROSTAD	2 00									_								
TRUSTEE		Х						0	0	0								
(6) SARAH WOMBLE	5 00																	
VP ADMIN		Х		Х				0	0	0								
(7) JANEL REEDY	2 00									0								
TRUSTEE		Х						0	0	0								
(8) KRISTEN KIRST	5 00	x		х				0	0	0								
PRESIDENT																		
(9) KATHLEEN SZABO	2 00	х						0	0	0								
TRUSTEE																		
(10) GLENNA DUKE	2 00	х						0	0	0								
TRUSTEE																		
(11) SUZY BOOKER	2 00	x						0	0	0								
TRUSTEE																		
(12) ANN O'CONNELL	5 00	x		Х				0	0	0								
EXECUTIVE VP (13) LISA SWIONTEK	40 00																	
EXECUTIVE DIRECTOR	40 00			Х				84,675	0	16,106								
EXECUTIVE DIRECTOR	l																	

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is l	ne l both	oox, an d	officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organization	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	-1 24000 MICCY 24000 MICCY 4	´	organization and related organizations

1b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	Þ			
d	Total (add lines 1b and 1c)	•	84,675	0	16,106

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee				
	on line 1a? If "Yes," complete Schedule I for such individual	3		Νo	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such				
	ındıvıdual	4		Νo	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for				
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
	\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Total revenue Relations and Relations are revenue Relations and Relations are revenue revenue Relations are revenue revenue revenue revenue revenue Relations are revenue reve	B) ted or empt ction enue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f			I
c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1			
c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e			
d Related organizations 1d e Government grants (contributions) 1e			
e Government grants (contributions)			
<u></u>			
f All other contributions, gifts, grants, and 1f 1,128,899 similar amounts not included above			
Property of the second strict of the second			
h Total. Add lines 1a-1f			
Business Code			
Dusiness Code b c d f All other program service revenue			
Ž b			
9 C			
- B d			
E e			
f All other program service revenue			
g Total. Add lines 2a-2f			
3 Investment income (including dividends, interest,			103,56
and other similar amounts)			
5 Royalties			
(I) Real (II) Personal			
6a Gross rents 44,473			
b Less rental 20,914			
expenses c Rental income 23,559			
or (loss) d Net rental income or (loss)	8,181	15,378	
(I) Securities (II) Other			
7a Gross amount from sales of 473,534 assets other than inventory			
b Less cost or other basis and 432,868			
sales expenses c Gain or (loss) 40,666			
d Net gain or (loss)	23,057	17,609	
8a Gross income from fundraising events (not including			
events (not including s			
b Less direct expenses b			
c Net income or (loss) from fundraising events			
9a Gross income from gaming activities See Part IV, line 19			
b Less direct expenses b			
c Net income or (loss) from gaming activities			
10a Gross sales of inventory, less returns and allowances .			
b Less cost of goods sold b c Net income or (loss) from sales of inventory			
Miscellaneous Revenue Business Code			
11a			
b			
с			
d All other revenue			
e Total. Add lines 11a-11d			
12 Total revenue. See Instructions	31 238	32 987	103 56

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns	s All other organizations must complete column (A))
---	--	---

D	Check if Schedule O contains a response or note to any line in this		(B)	(c)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	382,134	382,134		
2	Grants and other assistance to domestic individuals See Part IV, line 22	84,400	84,400		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	94,663	18,933	37,865	37,865
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	112,239	23,954	41,334	46,951
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	28,058	6,002	7,291	14,765
10	Payroll taxes	12,871	2,506	5,413	4,952
11	Fees for services (non-employees)				
а	Management				
b	Legal	23,390		17,275	6,115
c	Accounting	53,373		53,373	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	51,931	1,633	26,066	24,232
14	Information technology	12,303	575	9,490	2,238
15	Royalties				
16	Occupancy	40,510		40,510	
17	Travel	15,622	2,432		13,190
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	33,947	8,794	24,678	475
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	128		128	
23	Insurance	7,530		7,530	
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)				
a	UNRELATED BUSINESS INCO	5,285		5,285	
b	FEASABILITY STUDY	128,656		128,656	
c	FUNDRAISING EXPENSES	41,020			41,020
d	CONSULTING & TRAINING	6,008		6,008	
е	All other expenses	10,264	2,923	5,258	2,083
25	Total functional expenses. Add lines 1 through 24e	1,144,332	534,286	416,160	193,886
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Раг	LA	Check if Schedule O contains a response or note to any line in the	ııs Par	:x			
		. , , , , , , , , , , , , , , , , , , ,			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	·
	2	Savings and temporary cash investments			326,941	2	257,727
	3	Pledges and grants receivable, net			192,740	3	160,838
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, diemployees, and highest compensated employees Complete Pai Schedule L	rectors t II of	, trustees, key		5	
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and cand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L		6			
	7	Notes and loans receivable, net	_			7	_
	8	Inventories for sale or use			13,746		8.399
	9	Prepaid expenses and deferred charges			14,054		8,478
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	250,548			2,
	Ь	Less accumulated depreciation	10b	175,019	452,302	10c	75,529
	11	Investments—publicly traded securities			4,123,611	11	4,629,671
	12	Investments—other securities See Part IV, line 11				12	23,215
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			6,128	15	6,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)			5,129,522	16	5,169,857
	17	Accounts payable and accrued expenses			145,397	17	235,016
	18	Grants payable			972,743		872,843
	19	Deferred revenue			,	19	,
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Sche				21	
lities	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi	rs, trus				
Liabiliti		persons Complete Part II of Schedule L				22	I
\exists	23	Secured mortgages and notes payable to unrelated third parties		_	187,443	23	0
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	t X of S	chedule			
		D			10,000		0
	26	Total liabilities. Add lines 17 through 25			1,315,583	26	1,107,859
φ		Organizations that follow SFAS 117 (ASC 958), check here ► □ lines 27 through 29, and lines 33 and 34.	and o	omplete			
5	27	Unrestricted net assets			1,344,335	27	1,672,729
Fund Balance	28	Temporarily restricted net assets		_	1,078,238		960,243
	29	Permanently restricted net assets			1,391,366		1,429,026
Ξ		Organizations that do not follow SFAS 117 (ASC 958), check he			.,,		.,,
<u>.</u>		complete lines 30 through 34.	,				
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ΑS	32	Retained earnings, endowment, accumulated income, or other fu				32	
Met	33	Total net assets or fund balances			3,813,939	33	4,061,998
Z	34	Total liabilities and net assets/fund balances			5,129,522	34	5,169,857
				-		- '	

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,7	296,688
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,1	144,332
3	Revenue less expenses Subtract line 2 from line 1	3			152,356
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			313,939
5	Net unrealized gains (losses) on investments	5			95,703
6	Donated services and use of facilities	6			33,700
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			(
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,0	061,998
Par	rt XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	✓ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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As Filed Data -

DLN: 93493282010185

Employer identification number

OMB No 1545-0047

SCHEDULE A Public (

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

SIGMA KAPPA FOUNDATION

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 2014

Open to Public Inspection

35-1778450 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the org listed in your docume	governing	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
		mstructions))	Yes	No		
Total						

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement.

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally

(see instructions) You must complete Part IV, Sections A and D, and Part V.

Provide the following information about the supported organization(s)

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

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

S	ection A. Public Support	acioni i ano to qu	amy ander the	10010 110104 5010	my produce com	<u> </u>	,	
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	638,425	918,456	1,204,280	1,114,069	1,1	28,899	5,004,129
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a	638,425	918,456	1,204,280	1,114,069	1,1	28,899	5,004,129
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							231,934
6	(f) Public support. Subtract line 5 from line 4							4,772,195
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	. 4	(f) Total
7	A mounts from line 4	638,425	918,456	1,204,280	1,114,069	1,1	28,899	5,004,129
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	60,832	67,329	75,805	89,952	1	03,564	397,482
9	Net income from unrelated business activities, whether or not the business is regularly carried on	368	25,211	19,494	27,274		32,987	105,334
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	7,221	7,814	25,253	13,497		8,181	61,966
11	Total support Add lines 7 through 10							5,568,911
12	Gross receipts from related activiti	es, etc (see inst	ructions)			12		
13	First five years. If the Form 990 is organization, check this box and st	op here	<u> </u>					
	ection C. Computation of Pul							
14	Public support percentage for 2014			11, column (f))		14		85 690 %
15	Public support percentage for 2013	•	•			15		85 210 %
	33 1/3% support test—2014. If the and stop here. The organization que	alifies as a public	ly supported orga	nızatıon		•		► ✓
17a	33 1/3% support test—2013. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization meanization meanization meanization	n qualifies as a pu — 2014. If the orgation meets the "facts and	ublicly supported anization did not o acts-and-circums d-circumstances"	organization check a box on lin stances" test, che test The organiz	e 13, 16a, or 16t cck this box and s ation qualifies as	o, and line top here. E a publicly	14 Explain suppor	▶┌
ь 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organizal Explain in Part VI how the organizal supported organization Private foundation. If the organizal instructions	nization meets the tion meets the "fa	e "facts-and-circ acts-and-circums	umstances" test, stances" test The	check this box are organization qua	nd stop he n Hifies as a	r e. publicly	, ▶⊏ ▶⊏

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493282010185

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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.

Supplemental Financial Statements

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

Open to Public

	me of the organization MA KAPPA FOUNDATION			oyer identification number
Pa	rt I Organizations Maintaining Donor A	dvised Funds or Other Similar		.778450 or Accounts. Complete if tl
	organization answered "Yes" to Form 99	90, Part IV, line 6.		·
		(a) Donor advised funds	((b) Funds and other accounts
	Total number at end of year			
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	-	onor advis	sed ∀es
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit?			
a.	rt III Conservation Easements. Complete	ıf the organization answered "Yes'	" to Form	990, Part IV, line 7.
	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreation of protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	on or education) Preservation of Preservation of	a certified	cally important land area I historic structure i of a conservation
	easement on the last day of the tax year			
_	Total number of conservation easements		2-	Held at the End of the Year
a b	Total acreage restricted by conservation easements		2a 2b	
c	Number of conservation easements on a certified his		2b 2c	
d	Number of conservation easements included in (c) a historic structure listed in the National Register	• •	2d	
	Number of conservation easements modified, transfe	erred, released, extinguished, or termina	ated by the	e organization during
	the tax year ▶		,	
	Number of states where property subject to conserv			
	Does the organization have a written policy regarding enforcement of the conservation easements it holds		andling of	violations, and Yes N
	Staff and volunteer hours devoted to monitoring, insp	pecting, and enforcing conservation eas	ements d	uring the year
	-			
	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	nts durıng	the year
	▶ \$			
	Does each conservation easement reported on line 2 and section $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of s	ection 17	0(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financ		
ar	t III Organizations Maintaining Collection Complete if the organization answered		s, or Oth	ner Similar Assets.
a	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar asservice, provide, in Part XIII, the text of the footnote	sets held for public exhibition, educatio	n, or resea	arch in furtherance of public
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	5 116 (ASC 958), to report in its revenu sets held for public exhibition, educatio	ie stateme	ent and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			▶ \$
	If the organization received or held works of art, hist following amounts required to be reported under SFA			· ·
a	Revenue included in Form 990, Part VIII, line 1			► \$
ь				
_	Assets included in Form 990, Part X			► \$

Part	Organizations Maintaining Co	llections of Art,	Histo	orica	<u>l Treasu</u>	res, or O	ther	Similar Asse	e ts (cont	inued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	s, che	_		_		significant use o	fits	
а	Public exhibition		d		oan or exch	nange progr	ams			
b	Scholarly research		e	Γ c	ther					
С	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explain	n how t	they f	ırther the o	rganızatıon	's exe	empt purpose in		
5	During the year, did the organization solicit									
Day	assets to be sold to raise funds rather than to the transfer to be sold to raise funds rather than to the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold									No
Pal	Part IV, line 9, or reported an ar					i aliswered	ו ופ	S to Follil 99	υ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other ass	ets n		Yes	No
b	If "Yes," explain the arrangement in Part XI	II and complete the f	followir	ng tab	le	_				
						F		Amo	unt	
с	Beginning balance					H	1c			
d	Additions during the year					-	1d			
e f	Distributions during the year					<u> </u>	1e			
f	Ending balance	000 5	24.5			<u> </u>	1f			-
2a	Did the organization include an amount on F	orm 990, Part X, line	21, fo	resci	ow or custo	odial accour	nt liat	oility? J	Yes	No -
ь	If "Yes," explain the arrangement in Part XI								<u> '</u>	
Pa	rt V Endowment Funds. Complete	If the organization (a)Current year		ered or year					e)Four year	s hack
1a	Beginning of year balance	1,674,504	(0)	1,399		1,182,896		1,147,804		945,099
ь	Contributions	55,568		192	,683	91,136		133,346		61,880
c	Net investment earnings, gains, and losses	75.007		1.01	702	201.015		15.057		172 505
d	Grants or scholarships	75,987 109,241			,782 ,185	201,015 75,823		-15,057 73,377		32,680
e	Other expenditures for facilities				,	,		,		
_	and programs							9,820		
f	Administrative expenses									
g	End of year balance	1,696,818		1,674	,504	1,399,224		1,182,896	1,1	147,804
2	Provide the estimated percentage of the cur	rent year end balance	e (lıne	1g, c	olumn (a)) h	neld as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ► 84 220 %									
C	Temporarily restricted endowment ► 15 The percentages in lines 2a, 2b, and 2c sho	780 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organiza	tıon th	at are	held and a	dmınıstered	l for t	he		
	organization by (i) unrelated organizations							3a(i)	+ +	No No
	(ii) related organizations						٠.	3a(ii)		No
b	If "Yes" to 3a(II), are the related organization		on Sc	hedul	 e R?		٠. ٠	3b		
4	Describe in Part XIII the intended uses of the	ne organization's end	lowmer	nt fund	ls				•	
Par	t VI Land, Buildings, and Equipme		ne org	janıza	ation answ	ered 'Yes	' to F	orm 990, Part	IV, line	
	11a. See Form 990, Part X, line Description of property	10.		(a) (ost or other	(b)Cost or o	other	(c) Accumulated	(d) Book	value
	,				(investment)	basis (oth		depreciation	`´	
	Land								1	
	Buildings		.			1				
	Leasehold improvements		.						1	
d	Equipment		.			250),548	175,019)	75,529
	Other	<u> </u>								
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part X,	, colum	n (B),	line $10(c)$.)					75,529
								Schedule D (Form 990) 2014

Part VII Investments—Other Securities. Co	mplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. C	Complete if the organizati	on answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
		90, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)	
Part X Other Liabilities. Complete if the org		-
Form 990, Part X, line 25.		, , ,
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		7
		-
		-
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	F	
2 Linkship for an arrange to a position of the Doub VIII manage	do the tayt of the feet - t-	***********************************

Par	t XI Reconciliation of Revenue per Audited Financial State the organization answered 'Yes' to Form 990, Part IV, line 12		nts With Revenue p	oer R	leturn Complete if
1	Total revenue, gains, and other support per audited financial statements			1	1,369,164
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on investments	2a	95,703		
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)...............	2d	20,914		
e	Add lines 2a through 2d			2e	116,617
3	Subtract line 2e from line 1			3	1,252,547
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII).............	4b	44,141		
C	Add lines 4a and 4b			4c	44,141
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line :	12)		5	1,296,688
Par	Reconciliation of Expenses per Audited Financial State of the organization answered 'Yes' to Form 990, Part IV, line			s per	Return. Complete
1	Total expenses and losses per audited financial statements			1	1,121,105
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)...............	2d	20,914		
e	Add lines 2a through 2d			2e	20,914
3	Subtract line 2e from line 1			3	1,100,191
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)...............	4b	44,141		
c	Add lines 4a and 4b			4c	44,141
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)		5	1,144,332

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

Return Reference	Explanation
PART V, LINE 4	TO PROVIDE EDUCATIONAL PROGRAMMING AND SCHOLARSHIPS
PART X, LINE 2	FEDERAL INCOME TAX STATUS THE FOUNDATION IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE EXEMPTION IS ON ALL INCOME EXCEPT UNRELATED BUSINESS INCOME AS NOTED UNDER SECTION 511 OF THE INTERNAL REVENUE CODE INTERNAL REVENUE CODE SECTION 513(A) DEFINES AN UNRELATED TRADE OR BUSINESS OF AN EXEMPT ORGANIZATION AS ANY TRADE OR BUSINESS WHICH IS NOT SUBSTANTIALLY RELATED TO THE EXERCISE OR PERFORMANCE OF ITS EXEMPT PURPOSE THE NET RENTAL INCOME FROM DEBT FINANCED PROPERTY IS CONSIDERED UNRELATED BUSINESS INCOME ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE FOUNDATION AND RECOGNIZE A TAX LIABILITY IF THE FOUNDATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY VARIOUS FEDERAL AND STATE TAXING AUTHORITIES MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE FOUNDATION, AND HAS CONCLUDED THAT AS OF MAY 31, 2015 AND 2014, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS THE FOUNDATION HAS FILED ITS FEDERAL AND STATE INCOME TAX RETURNS FOR PERIODS THROUGH MAY 31, 2014 AND IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS HOWEVER, AS OF THE DATE THE FINANCIALS WERE AVAILABLE TO BE ISSUED, THERE WERE NO AUDITS FOR ANY TAX PERIODS IN PROGRESS THESE INCOME TAX RETURNS ARE GENERALLY OPEN TO EXAMINATION BY THE RELEVANT TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS FROM THE LATER OF THE DATE THE FORTOWED EXTENSIONS)
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES 20,914
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS ON VALUATION OF CONTRIBUTIONS RECEIVABLE 3,475 GAIN ON SALE OF BUILDING 40,666
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES 20,914
PART XII, LINE 4B - OTHER ADJUSTMENTS	LOSS ON VALUATION OF CONTRIBUTIONS RECEIVABLE 3,475 GAIN ON SALE OF BUILDING 40,666

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Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Schedule I (Form 990)

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

DLN: 93493282010185 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

SIGMA KAPPA FOUNDATION

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.

Inspection **Employer identification number**

		35-1778450	
Par	General Information on Grants and Assistance		
1	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistan		
	the selection criteria used to award the grants or assistance?		✓ Yes —

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MAINE SEA COAST MISSION 127 WEST STREET BAR HARBOR,ME 04609	01-0216837	501(C)(3)	15,000				GRANT FOR EDUCATIONAL PROGRAMMING
(2) SIGMA KAPPA CORPORATION 13230 OUTLOOK DR OVERLAND PARK, KS 66209	23-7109827	501(C)(7)	146,684				XI CHAPTER EDUCATIONAL GRANT
(3) SIGMA KAPPA SORORITY 695 PRO-MED LANE INDIANAPOLIS,IN 46032	01-0158948	501(C)(7)	226,005				GRANTS FOR EDUCATIONAL, LEADERSHIP, AND SERVICE PROGRAMS OF SIGMA KAPPA SORORITY

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1
3	Enter total number of other organizations listed in the line 1 table	2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	63	72,400			
(2) ALUMNAE HEART FUND GRANTS	2	12,000			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.				
Return Reference	Explanation			
,	SCHOLARHIPS SIGMA KAPPA FOUNDATION EVALUATES ELIGIBLE SCHOLARSHIP APPLICANTS OBJECTIVELY BASED ON A COMBINATION OF GRADE POINT AVERAGE, PARTICIPATION IN ACTIVITIES, HONORS RECEIVED CHARITABLE CONTRIBUTIONS THE BOARD OF TRUSTEES REVIEWS VARIOUS REQUESTS FROM 501(C)(3) ORGANIZATIONS, SUCH AS MAINE SEA COAST MISSION, AND EVALUATES THE MERIT OF SUCH REQUESTS TO DETERMINE IF A CHARITABLE CONTRIBUTION WOULD FULFILL THE EDUCATIONAL AND CHARITABLE MISSION OF THE SIGMA KAPPA FOUNDATION WRITTEN DOCUMENTATION OF THE ORGANIZATION'S 501(C)(3) STATUS IS REQUIRED PRIOR TO MAKING A CONTRIBUTION			

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As Filed Data -

DLN: 93493282010185

OMB No 1545-0047

2014

Open to Public Inspection

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.

Name of the organization SIGMA KAPPA FOUNDATION

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

35-1778450

990 Schedule O, Supplemental Information

Return Reference	Explanation		
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 WILL BE PROVIDED TO THE BOARD OF TRUSTEES PRIOR TO FILING		
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS, EMPLOYEES, AND COMMITTEE MEMBERS OF THE FOUNDATION SUBMIT ANNUAL REPORTS ON A FORM APPROVED BY THE BOARD, IN WHICH THEY DISCLOSE ANY CONFLICT OR POTENTIAL CONFLICT B EFORE ANY ADDITIONAL BOARD OR COMMITTEE ACTION IS TAKEN THESE ANNUAL REPORTS ARE REVIEWED BY THE OFFICERS OF THE BOARD, WHO ATTEMPT TO RESOLVE ANY ACTUAL OR POTENTIAL CONFLICTS AN D, IN THE ABSENCE OF RESOLUTION, REFER ALL SUCH MATTERS TO THE FULL BOARD OF TRUSTEES		
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION REVIEW PROCESS CONSISTS OF REVIEWING THE 990'S OF LIKE-SIZED/LIKE-MISSION ED ORGANIZATIONS THE EXECUTIVE COMMITTEE (WHICH IS ALSO OUR PERSONNEL COMMITTEE) RECOMMEN DS COMPENSATION AND BOARD APPROVES		
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST		
FORM 990, PART XI, LINE 2C	THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF T HE INDEPENDENT AUDIT AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS		