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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-1150

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015, and ending 06-30-2016

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
INTERFRATERNITY COUNCIL

Number and street (or P O box, if mail is not delivered to street address) Room/suite
1198 THIRD STKRCH RM 365

City or town, state or province, country, and ZIP or foreign postal code
LAFAYETTE, IN 479072109

D Employer identification number
35-6043082

E Telephone number

F Group Exemption Number ▶

G Accounting Method ☒ Cash ☐ Accrual Other (specify) ▶

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

I Website: ▶ WWW.PURDUEGREEKS.COM/COUNCILS/IFC

J Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c)(7) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 174,913

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)		
Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>		
Revenue	1 Contributions, gifts, grants, and similar amounts received	1 27,441
	2 Program service revenue including government fees and contracts	2 6,557
	3 Membership dues and assessments	3 123,374
	4 Investment income	4 362
	5a Gross amount from sale of assets other than inventory	5c
	5b Less cost or other basis and sales expenses	
	5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	
	6 Gaming and fundraising events	6d
	6a Gross income from gaming (attach Schedule G if greater than \$15,000)	
	6b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	
Expenses	6c Less direct expenses from gaming and fundraising events	
	6d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	
	7a Gross sales of inventory, less returns and allowances	7c
	7b Less cost of goods sold	
	7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	
	8 Other revenue (describe in Schedule O)	8 17,179
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9 174,913
	10 Grants and similar amounts paid (list in Schedule O)	10 17,050
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12
Net Assets	13 Professional fees and other payments to independent contractors	13 2,126
	14 Occupancy, rent, utilities, and maintenance	14
	15 Printing, publications, postage, and shipping	15 2,075
	16 Other expenses (describe in Schedule O)	16 130,218
	17 Total expenses. Add lines 10 through 16	17 151,469
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 23,444
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 35,656
	20 Other changes in net assets or fund balances (explain in Schedule O)	20
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 59,100

Part V

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

☒

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	Yes	
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <div>37a</div>		
b	Did the organization file Form 1120-POL for this year?		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . <div>38b</div>		
39	Section 501(c)(7) organizations Enter . <div>39a</div> 0		
a	Initiation fees and capital contributions included on line 9		
b	Gross receipts, included on line 9, for public use of club facilities <div>39b</div> 0		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ , section 4912 ▶ , section 4955 ▶		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ▶		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		No
41	List the states with which a copy of this return is filed ▶		
42a	The organization's books are in care of ▶ <u>TREASURER OF IFC</u> Telephone no ▶ <u>(765) 494-2717</u> Located at ▶ <u>1198 THIRD ST KRACH RM 365 WEST LAFAYETTE, IN</u> ZIP + 4 ▶ <u>47907</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ▶		No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <div>43</div>		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		No
c	Did the organization receive any payments for indoor tanning services during the year?		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

Part VI

Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

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

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a	Did the organization make any transfers to an exempt non-charitable related organization?		
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "				
(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f

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

51

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d

Total number of other independent contractors each receiving over \$100,000.

52

Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A

Yes

No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer		2016-11-15 Date						
	JOE SINISE, PRESIDENT Type or print name and title								
Paid Preparer Use Only	Print/Type preparer's name KIMBERLEY R. MORISETTE		Preparer's signature		Date 2016-11-03	Check <input type="checkbox"/> if self-employed	PTIN P00337290		
	Firm's name ▶ HUTH THOMPSON LLP					Firm's EIN ▶ 35-2055043			
	Firm's address ▶ PO BOX 970 LAFAYETTE, IN 479020970					Phone no. (765) 428-5000			
May the IRS discuss this return with the preparer shown above? See instructions								Yes	No

Additional Data

Software ID:

Software Version:

EIN: 35-6043082

Name: INTERFRATERNITY COUNCIL

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

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

28

CREATE AND MAINTAIN COOPERATION AND COORDINATE INTERFRATERNAL AFFAIRS AMONG MEMBER FRATERNITIES, FOSTER THE DEVELOPMENT OF SCHOLARSHIP AND LEADERSHIP AMONG MEMBER FRATERNITIES AND THEIR MEMEBERS, PROMOTE A POSITIVE RELATIONSHIP BETWEEN COMMUNITY AND MEMBER FRATERNITIES, ACT AS A MEDIUM BETWEEN MEMBER FRATERNTIIES AND OTHER STUDENT ORGANIZATIONS, THE STUDENT BODY, AND THE FACULTY AND ADMINISTRATION, INSTITUTE POLICIES AND RULES THAT WILL MAINTAIN THE PURPOSES OF THE IFC, PROVIDE SERVICE

(Grants \$)

If this amount includes foreign grants, check here . . . ► ☐

28a

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JACOB HALLER DIRECTOR	5 00	0		
JT GARNETT DIRECTOR	5 00	0		
ALEXANDER MARTIN DIRECTOR	5 00	0		
THOMAS STOTZER DIRECTOR	5 00	0		
SCOTT CAMPBELL VP OF PROGRA	10 00	0		
DOUG ABRAMOWITZ VP OF RISK M	10 00	0		
MATT RITTMAN VP OF ADMINI	10 00	0		
JOE SINISE PRESIDENT	10 00	0		
ARJUN VERMA DIRECTOR	3 00	0		
ANDREW LUPKOWSKI ASSOC VP OF	3 00	0		
JACOB MCNUTT ASSOC VP OF	3 00	0		
JONATHAN PASYK VP OF MEMBER	10 00	0		
ZACH SCHMID DIRECTOR	5 00	0		

SCHEDULE O
(Form 990 or
990-EZ)Department of the
Treasury
Internal Revenue
Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2015**Open to Public
Inspection**Name of the organization
INTERFRATERNITY COUNCIL

Employer identification number

35-6043082

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 8	LATE OR PENALTY FEE 13,820 BAD DEBT REPAYMENT 3,168 REFUNDS 191 TOTAL 17,179
FORM 990-EZ, PART I, LINE 10	HABITAT FOR HUMANITY 13,750 0 0

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART I, LINE 16	EXPENSES ADVERTISING/PUBLICITY 11,561 OFFICE SUPPLIES AND EXPENSE -987 BAD CHECK FEE 75 FINANCE CHARGE OR LATE FEE 41 TELEPHONE EXPENSE 120 COMPUTER SERVICES 6,958 COMPUTER SOFTWARE 12 TRIP/TRAVEL EXPENSE 1,146 CONFERENCE/CONVENTION EXPENSE 30,914 MEETING EXPENSE 15,447 REGISTRATION EXPENSE 8,025 CALLOUT EXPENSE 1,125 AWARDS 417 BANQUET EXPENSE 3,902 BUTTON EXPENSE 767 CLOTHING EXPENSE 10,370 FOOD AND DRINK EXPENSE 454 PHYSICAL PLANT SERVICES 83 SERVICE CONTRACT PYMT 9,576 RENTAL EXPENSE 2,577 SERVICE CONTRACT PYMT 13,850 VENDOR CONTRACT PYMT 5,000 GREEK LIFE ASSISTANT 2,523 BAD DEBT EXPENSE 5,144 MERCHANDISE EXPENSE 1,323 AGED UNCASHED CHECK REISS -325 NON-INVESTMENT DEPRECIATION 120 TOTAL 130,218
FORM 990- EZ, PART II, LINE 24	606 606 LESS ACCUMULATED DEPRECIATION 188 308 TOTAL 418 298

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III	THROUGH THE UNIFICATION OF THE PURDUE FRATERNITY AND SORORITY COMMUNITY, WE WILL STRIVE TO CREATE AN ENVIRONMENT WHERE MEMBER FRATERNITIES, GOVERNING COUNCILS, AND ALL MEMBERS COORDINATE THE DEVELOPMENT OF ACADEMIC VALUES, INTERPERSONAL SKILLS, RELATIONSHIPS, AND SOCIAL EXPERIENCES THE INTERFRATERNITY COUNCIL WILL PROVIDE OUR MEMBER ORGANIZATIONS WITH THE RESOURCES NECESSARY TO DEVELOP WORLD-CLASS LEADERS, THUS BETTERING OURSELVES, OUR CAMPUS, AND OUR COMMUNITY
FORM 990-EZ, PART III, LINE 28	CREATE AND MAINTAIN COOPERATION AND COORDINATE INTERFRATERNAL AFFAIRS AMONG MEMBER FRATERNITIES, FOSTER THE DEVELOPMENT OF SCHOLARSHIP AND LEADERSHIP AMONG MEMBER FRATERNITIES AND THEIR MEMEBERS, PROMOTE A POSITIVE RELATIONSHIP BETWEEN COMMUNITY AND MEMBER FRATERNITIES, ACT AS A MEDIUM BETWEEN MEMBER FRATERNTIIES AND OTHER STUDENT ORGANIZATIONS, THE STUDENT BODY, AND THE FACULTY AND ADMINISTRATION, INSTITUTE POLICIES AND RULES THAT WILL MAINTAIN THE PURPOSES OF THE IFC, PROVIDE SERVICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART V, LINE 34	ADDITIONS 1 ARTICLE XVIII E LINE 2, 3 ADDITION OF MANDATORY REPORTING OF ALL CHAPTER COMMUNITY SERVICE HOURS AND PHILANTHROPY DOLLARS RAISED 2 ARTICLE XXI G LINE 1 ADDITION OF MANDATORY AVERAGE OF THREE COMMUNITY SERVICE HOURS PER MEMBER FOR MEMBER FRATERNITIES 3 ARTICLE XXV ADDITION OF ALCOHOL POLICY ARTICLE 4 ARTICLE XXV C ADDITION OF EXCEPTIONS SECTION TO THE ALCOHOL POLICY 5 ARTICLE X D LINE 10,11 ADDITION OF DUTIES OF VICE PRESIDENT OF PROGRAMMING AND EDUCATION CALLING FOR INTERFRATERNITY COUNCIL PRESENTATIONS AND EDUCATION FOR MEMBER FRATERNITIES AND COLLABORATION WITH RISE ON SOCIAL FUNCTION MANAGEMENT EDUCATION 6 ARTICLE X D LINE 10,11 ADDITION OF ASSOCIATE VICE PRESIDENT OF RISK MANAGEMENT 7 ARTICLE XXVI ADDITION OF ATTENDANCE POLICY ARTICLE. AMENDMENTS 1 ARTICLE XXIV E LINE 1,2 AMENDED MANDATORY SEMESTER AND CUMULATIVE INDEX FROM 2 5 TO 2 65 2 ARTICLE X D,E AMENDED EXECUTIVE BOARD POSITIONS DIRECTOR OF RISK MANAGEMENT BECOMES VICE PRESIDENT OF RISK MANAGEMENT VICE PRESIDENT OF RECRUITMENT BECOMES VICE PRESIDENT OF MEMBERSHIP VICE PRESIDENT OF MEMBERSHIP OVERSEES DIRECTOR OF PUBLIC AND GREEK RELATIONS ALL RELATED FIELDS UPDATED 3 ARTICLE XI A AMENDED BOARD OF DIRECTOR POSITIONS BY COMBINING THE DIRECTOR OF FINANCE WITH THE DIRECTOR OF INFORMATION TECHNOLOGY AND COMMUNICATIONS TO BECOME THE DIRECTOR OF FINANCE AND INFORMATION TECHNOLOGY ALL RELATED FIELDS UPDATED 4 ARTICLE XXV A AMENDED ALCOHOL POLICY TO ALLOW GLASS CONTAINERS 5 ARTICLE X D AMENDED TITLE OF VICE PRESIDENT OF OPERATIONS TO VICE PRESIDENT OF PROGRAMMING AND EDUCATION TO BETTER ADDRESS THEIR RESPONSIBILITIES 6 ARTICLE I C LINE 4 REMOVED NOMINATIONS FROM FLOOR AT ELECTION MEETING 7 ARTICLE XI A BUDGET MUST BE BROUGHT TO MAJORITY VOTE AND PC MUST APPROVE WITH MAJORITY VOTE ANY LINE ITEM CHANGE OF OVER 1000